MJA from the Editor's desk

MD - DOCTOR OR MANAGER?

Not so long ago the role of management in medicine was clear. Hospitals were run pragmatically by the directors of medical services, nursing and finance. The clinician's role was also clear: to manage patient care and maintain professional standards. The hospital's prime purpose put the patient's welfare first.

All this has changed. As healthcare has become increasingly complex and expensive, consuming large chunks of our gross national product, a commercial approach to healthcare has evolved, and critical to its success is clinician involvement in management. However, there is a shortfall of doctors equipped with the requisite managerial skills to deliver effective and efficient health services which can accommodate cost constraints and meet the bottom line.

Indeed, management concepts such as strategic planning, finance, marketing, accounting and assessment of quality are foreign to most medical schools and doctors. As a consequence increasing numbers of doctors have been enrolling in management programs, including the Master of Business Administration (MBA), and MD-MBA tracks have been developed in medical schools.

Will this trend serve the profession well? Is there not a fundamental difference between the purpose of medicine and the rationale of business? Do doctors in management have an ethical obligation to act as advocates for patients or the institution they serve? Edmund Pellegrino, the eminent US ethicist, believes that this fundamental conflict leads to "a confusion of roles that is dangerous to the patient", and asserts that he "would rather maintain the adversarial relationship that safeguards the covenant of trust between doctor and patient and avoid the Faustian compact of the MD-MBA".

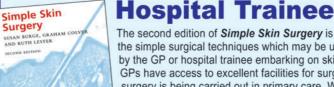
Ultimately, mixing the competing demands of medicine and management may prove as futile as mixing water and oil.

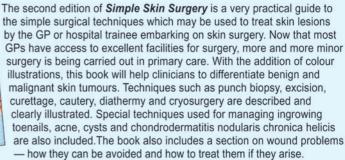
Martin B Van Der Weyden

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