

Never Get Ahead of Others

Choon-Ki Lee, MD

We physicians have been expected to be the elite and leaders of our society. We have recognized ourselves or have been considered by others as more intelligent and gifted than ordinary people in every aspect of life. Hence, you may wonder why we should not get ahead of others. What I mean is that we should not be competitive at least in treating patients and performing surgery. No one can deny that we should go the extra mile with research and publication. However, I doubt whether taking an aggressive stance with regard to patient care would be beneficial.

I would like to make it clear that I do not intend to depreciate the efforts by doctors or hospitals to explore or implement a new treatment. However, it is another matter whether we should jump on the bandwagon for innovative treatments.

Newly developed treatments are not rigorously tested for safety and efficacy in most cases. So they should be publicized and recommended to the public only when their safety and efficacy are proved by several years of follow-up. Let me site an example of spinal surgery, and especially disc surgery, which I specialize in. Between the 1980s and 1990s, chymopapain injection was praised as a simple and effective treatment for lumbar disc herniation. However, it is no longer in use since it caused severe side effects. Thereafter, laser disc surgery and nucleotome became popular, which were known for involving a minimal skin incision, but they have turned out to be less effective than the established techniques and they have gone the same way as chymopapain injection and the Dodo bird, that is, into oblivion. It is worrisome that new treatments become popular due to the media publicity, but they are without scientific evidence and then they just disappear when their side effects are revealed.

Considering that medicine is about treating human beings, extreme care should be taken with using a new

treatment. Most importantly, the short-term treatment results observed in some patients should not be described as if they were obtained from all of the patients with the same disease. A doctor's personal experience with some limited number of patients is just an anecdotal episode. People tend to see what they want to see. No wonder then, that we often find ourselves generalizing results based on our anecdotal episodes. This can pose a danger in the field of medicine. That is why only results proven through objective and statistical analyses and comparisons are accepted in the field of medicine. Introducing short-term results obtained from some patients as a proof of successful treatment is an irresponsible act that can lead to a variety of problems.

We should also guard against simply implementing a new method even when it is proven to be far more effective than the established techniques. Every surgery has its own learning curve, which represents the period needed to learn from a skilled person. The learning curve is long for difficult surgical procedures. New operative methods based on new ideas or using new devices usually require a long and complex learning curve. You will probably experience difficulties before being accustomed to a method and finally mastering it. Unexpected events often occur in the operating room for surgeons who are armed only with knowledge acquired from books and a complete picture of the surgery. In this situation, the safest and easiest way is to get assistance from an experienced person who can come to the rescue with a solution that cannot be learned from books. Therefore, being the first person to try out a new surgical method means enduring hardship in first few cases without a guarantee of successful outcomes. Accordingly, it would be the best to wait for others to be experienced with the method you have in mind and later learn from them. You do not have to feel ashamed when you have to learn a new method or technique from someone of the same age or a few years junior to you. Rather, you can learn not only the surgical technique, but also the possible complications without paying a price. So, never get ahead of others. That's the wisest way.

Correspondence to: Choon-Ki Lee, MD, Editor-in-Chief
Department of Orthopaedic Surgery, Seoul National University College of
Medicine, 28 Yeongon-dong, Jongno-gu, Seoul 110-744, Korea
Tel: +82-2-2072-2336, Fax: +82-2-764-2718
E-mail: choonki@snu.ac.kr

Copyright © 2010 by The Korean Orthopaedic Association

This is an Open Access article distributed under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/3.0>) which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

Clinics in Orthopedic Surgery • pISSN 2005-291X eISSN 2005-4408