Listen Up!

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Editor in Chief

The title of this column is designed to draw your attention to the CD with audio interviews that accompanies each issue of this Journal. To my great surprise, we still encounter readers who harbor the misunderstanding that the CD contains only a digital version of the Journal, i.e. that it duplicates the Journal’s printed content. To further dispel this misconception, we are now listing the audio contents on the front cover of the journal.

In case you discarded some of the early discs without listening to them and would like to hear what you missed, my introduction to this month’s CD includes a list of the previous interviews. And, of course, you can check them on the website.

Don’t forget that our website is now active (www.jlgh.org) and all content of past issues is archived there. Any text article can be read or downloaded, and the audio files can also be listened to or downloaded to your computer as MP3 files – meaning that they can be burned to a CD or transferred to an iPod.

Heritage

On this issue’s CD we begin a new series of interviews that I hope you will find uniquely interesting and informative; conversations with former physician leaders at Lancaster General Hospital about the early years at LGH, and about the people and policies that laid the groundwork for where LGH is today. Tradition is very important at LGH, and I want to record the thoughts of those who helped build our traditions because they have no other forum. We’ll incorporate these recordings into the audio Journal as we have the space for them.

This time I speak with Dr. Richard Weber, known to most of you for his long-term service in a variety of leadership positions, including Vice-President of the Medical Staff 1969-73, President of the Medical Staff 1973-77, Member of the Board of Trustees 1978-86, and Medical Quality Management Coordinator 1986-1997.

In the other interview, I speak with Dr. T. Raymond Foley of Regional Gastroenterology Associates of Lancaster about Project ACCESS, a noble, physician-led effort to provide free health care to low income, uninsured patients.

Opinion

My conversation with Ray Foley is timed to coincide with my first opinion piece for the Journal. It kicks off a planned short series of articles about our country’s clumsy and inefficient system of paying for health care. There is so much waste in the system that though we spend a far greater percentage of our GDP on health care than any other country does, we cannot provide coverage to almost 50 million Americans.

As always, we welcome dissenting or supporting views, whether expressed in a letter or a longer article.

Happy Birthday

Since this is the fourth issue of our quarterly Journal, the first having appeared in April, 2006, the current issue marks our first birthday. We hope you’ll forgive us for our pride in calling attention to this milestone and for saying we’re pleased to have come this far. We’ve had some good-natured quibbling around our office as to whether our birthday wasn’t actually last October. True, this Journal was first suggested by Tom Beeman in the late summer of 2005, and our work officially began on October 1 that year, but I think this Journal must be judged by its impact on the public, so I’m celebrating its birthday on the anniversary of its first publication.

Content

In response to some comments we’ve received, I might mention again that we rigorously edit these “specialty” articles to provide lucid and comprehensive overviews for a broad medical audience. I assume that many of our readers are, like me, simply curious about medical progress, and fascinated by it. And, aside from the fact that most of us need to know at least something about
medicine’s diverse advances, the public looks to us to explain new developments. Doctors are the only scientists most people know, and they may reasonably expect us to have a basic understanding of important developments. Unfortunately, it is also a rare medical family that is not afflicted by at least one of the conditions we’ve covered. It is time-consuming and often unproductive to search for comprehensive reviews of the state-of-the-art, and that’s why the Journal is subtitled “A Record of Medical Progress.” We want to be a source of useful medical information, even if “useful” means only that we heighten your level of awareness about a topic that may afflict you, or someone you know or love.

I can’t think of a better word than “love” on which to end this column, so I’ll close.