



# President's message. Generalism is dead: Long live generalism!

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In Canada, as in many other countries, generalism in clinical medicine has given way to medical specialization over the last 60 years. This type of specialized care is not affordable and does not serve our divergent and far-flung population well. The Canadian Medical Association (CMA) recently had its 146th annual meeting in Calgary, Alta. Dr. Louis Francescutti, the new CMA president, said at the outset of his inaugural address that health care systems in Canada and elsewhere are moving away from this model of specialized care. Patients (and payers) are demanding more patient- and family-centred care. Health care is shifting out of hospitals, the traditional power base of specialist physicians, and into the community.<sup>1</sup>

These words should gladden the hearts of SRPC members, because community-centred medicine is our forte. People living in rural and remote areas have always depended on doctors who provide comprehensive primary care in their communities, along with hospital, emergency and population health care, and expanded-scope services (e.g., anesthesia, obstetrics and general practice surgery). However, the general practitioners of old who provided these services are in decline. We need “more doctors looking after the whole person — not in a job based on one organ or in only one clinical setting.”<sup>2</sup>

There is rising awareness that the complexity of services provided by medical practitioners increases with increasing rurality or remoteness. As described by the Australian Medical Association, the practice of rural medicine

presumes an interdependent model of medical service that combines high level competency in primary, secondary and sometimes even tertiary

medical care and forms a distinct scope and method of practice.<sup>3</sup>

In Canada there are a number of medical schools doing a great job of training generalists in rural programs. However, the SRPC is advocating for a countrywide rural curriculum in medical schools. This curriculum would produce a well-trained doctor with the necessary knowledge and skills to pursue a career in rural medicine, while enjoying it and not burning out.

The World Summit on Rural Generalist Medicine is to be hosted in October 2013 by the Australian College of Rural and Remote Medicine and the Rural Doctors Association of Australia. The summit will bring together rural doctors from around the world, along with health planners, policy-makers, researchers and educators, to discuss successes, share ideas and plan for the future of generalism in health care in rural and urban areas.

A Canadian contingent will attend the summit, as well as Rural Medicine Australia 2013, the annual conference of Australian rural doctors. We hope to come back empowered with many new ideas. Expect things to happen and sparks to fly as we work together to promote generalism and community-based care in Canada (especially rural Canada) to the benefit of all Canadians.

## REFERENCES

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