

Dr. Francisco Garcia
Swift Current Saskatchewan
SRPC Member



My name is Dr. Francisco Garcia and I'm a double board-certified urologist and specialist in sexual medicine (male and female) that now calls rural Saskatchewan my home. I have been living and working in Swift Current for 8 years, and have spent that time creating a rural centre of excellence in sexual medicine that draws patients from around the province, and more recently across provincial borders. While I practice general urology and perform a wide variety of cases, I have always had a passion for quality-of-life surgery, and found my home in sexual medicine. Sexual medicine is truly an area of medicine where we are forced to be generalists, accept the biopsychosocial model, and take off our blinders to understand the whole person and their hurdles to improve their quality of life. There is so much misinformation and taboo around sexual activity that being able to dispel myths and normalize issues is a reward in itself. However, the simple act of revitalizing a relationship by giving a couple the ability to be intimate again is an amazing reward that is hard to describe.

I was drawn to rural Swift Current for several reasons, including a close-knit safe community to bring and grow my family to 4 daughters with my amazing wife, an enthusiastic health region eager to not only provide the minimum general urology but be willing to support the development of a centre of excellence in a rural setting, and a contract model to protect my professional and personal time to provide comprehensive general and specialty urologic care. While all change is slow, there has always been movement forward to push what a rural centre can do, and seeing the community fall in support of expanding what services we can offer is inspiring to keep pushing that envelope. We have not only seen "firsts" for our community over the years, but have even seen some "firsts" in the province that have occurred in our rural hospital.

Currently I am a general member of SRPC, and also am part of the specialist committee for rural medicine. I was invited to speak at SRPC in Halifax in 2019 regarding sexual medicine for generalists, and not only had a fantastic time, I found a group of like-minded folks that valued generalism and pragmatism in practice as much as I did. I am a stalwart supporter of the incredible value of a generalist,

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but try to live being a specialist generalist and keep my practice broad. I hope to assist the specialist committee to push forward the ideas of promoting more acceptance of specialist generalists to allow more patients to receive care closer to home, and unburden common issues from over encumbered tertiary centres. A big part of this comes from encouraging specialist training programs to send their trainees to see how generalist specialists practice, and I hope to contribute in some fashion at the college level with this.

Outside of medicine, I have a well-documented weakness for cheeses of different types and styles, a thorough enjoyment of videogames, a passion for sex education (youths or adults), and a wife that has determined all 4 of our daughters will be Disney princesses so that is how our vacations are planned. As a family, we love immersing ourselves with the local markets, fairs and culture, and developing those rural connections which have been invaluable over the years.

If I were to be stranded in a remote community, the medical device I would absolutely need would be the humble yet versatile foley catheter. It is probably the most under rated cross-specialty instrument out there. Most will think of using it to drain bladders, but can be used for cervical dilation to induce labour, to tamponade bleeding from penetrating traumas, remove foreign bodies from body cavities, useful in refractory epistaxis, and used as feeding tubes. The options available are limited by one's creativity.

Many have asked me why I would hang my hat on "rural sexual medicine", and the answer is fairly simple. Sex is a universal core experience for everyone, and should be fun for everyone as well. It also crosses all disciplines in medicine so it forces one to keep a generalist mindset. Interacting and treating rural patients really does force one to keep that pragmatic and generalist approach as much of the attitude is making the best out of what you have. This attitude constantly pushes me to hear what the patient is looking for out of the encounter and tailor (and sometimes innovate) their treatment, instead of trying to fit them into a diagnostic box to follow an algorithm blindly.

A parting bit of advice for the learners and new attendings: when a patient's story, compliance/non-compliance, or severity of a problem doesn't seem to line up with what you're seeing in front of you, ask about sex. Patients do not want to bring it up, or sometimes admit that its relevant, but addressing it can make them take their meds regularly, or explain why they are reluctant to get that cancer treatment.

My most quoted mantra in the operating room or the clinic, from training to practicing independently would be:

- "The enemy of good, is better."