



## INITIAL STRUGGLE AND HURDLES FACED BY YOUNG NEUROSURGEONS— SUGGESTIONS,ADVICE AND GUIDANCE

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**ABSTRACT** Neurological services can be given easily in major institutions but problem arises when a young and new neurosurgeon starts his career from a centre at small town with lack of neurosurgical facilities . New neurosurgeon faces all types of hurdles in deptt itself and unsupportive attitude from the colleagues initially . Most of the young neurosurgeons may pass through such conditions .So to make easier adjustments young neurosurgeons should follow some suggestions , advice and guidance from the senior neurosurgeons based on their experiences .Considering it an essential matter ---some guiding points are being discussed here in this article based on senior neurosurgeons experiences and guidelines .

**KEYWORDS :** young neurosurgeons , initial problems , suggestions and guidance , experiences of seniors

### INTRODUCTION

Neurological services initially were confined to major medical institutions and big hospitals till recent times, but now gradually are coming to smaller towns and also within the reach of millions of Indians. Credit should go to the young daring neurosurgeons for an idea of serving and settling at a place (govt/private) where proper infrastructure and instruments are not available and where people are not aware of what the neurosurgeons can do. Sometimes even medico colleagues of an organisation or of a town were not in a stage to accept a super-specialist and were not much cooperative professionally till the neurosurgeon showed his skills and knowledge at any tender moment of life of a patient. These young neurosurgeons fought these challenges with hard work and sincerity. Their responses are being shaped according to their experiences gathered during their inevitable struggles while establishing themselves in hostile environments. Considering these facts in mind I have tried to collect some lessons and experiences (including experiences of a senior neurosurgeon) in a small city of India. The experiences which I want to share are not scientifically rich but in day to day life, hopefully will be beneficial to those neurosurgeons who want to choose small towns and developing new organisations of govt/private for starting their neurosurgical career. These may work as suggestions, advice and guidance for young neurosurgeons.

Now a days there is ever increasing competition among doctors of same speciality and with other branches colleagues also with different type of feelings in all organisations whether govt or private. The medical teachings also do not guide much about the initial settlement /establishment /adjustment of a young neurosurgeon. So there is great need for initial SUGGESTIONS and GUIDANCE from senior neurosurgeons. Therefore it is very much needed for new and young neurosurgeons to learn from experiences and struggles of senior neurosurgeons when starting his career from a small organisation or hospital in a new setup in a new town. A regular contact with a senior neurosurgeon or colleague is always suggested for discussion of any case or consultation at odd hours for a serious case.

Another problem is FAITH over a new and young neurosurgeon. Colleagues and the public don't know about the new neurosurgeon as a human personally and his professional calibre so hesitant initially to be operated by him. May be these neurosurgical patients were not operated in that small town or small hospital earlier either due to non availability of neurosurgeon or non availability of infrastructure at that place even if a neurosurgeon was there . Relatives were fearful and anxious about the outcome of the patient. Therefore personal acquaintance is important for a new neurosurgeon at a new joining at any place and detailed communication is required between the new neurosurgeon and family of the patient regarding any operation and its probable complications and outcome/prognosis for developing faith over neurosurgical operations and the neurosurgeon in future. There should not be any communication gap.

Another important thing for a young neurosurgeon is HONESTY and

SINCERITY..... While going for any procedure/operation he should be honest in telling about the real need of the procedure, expenditure if any, probable complications and expected results after the procedure whether outcome is good or bad. Patient should be supervised sincerely whether family is ready for the procedure or not .Never hesitate in referring the patient to higher or another neurosurgical centre if family wants to take the patient to some other city or hospital for further management or if proper infrastructure and instruments are not available for that operation at your centre. It is pertinent to add that consultations from another neurosurgical colleagues may be taken if needed or if requested by the attendants. May be life of that patient can be saved due to your honesty about the procedure which is not possible at given place, but it does not mean that the young neurosurgeon should not try at his centre with whatever little facility is available there. Because initial trials will only increase faith over the new neurosurgeon and his work at that place which is required for development of neurosurgery at that place.

New neurosurgeons are usually young and very energetic just after neurosurgical training at a good centre with full of facilities hopefully. So they can fight any challenge in life initially and can tolerate all physical and mental burdens successfully forgetting his health and family life. Therefore young neurosurgeon should work hard physically, mentally and professionally for establishing himself and neurosurgery department at a small place with his experiences and experiences of others including senior neurosurgeons who have also faced probably the similar problems while his own settlement.

At a small set up in small town or at some govt hospitals with lack of facilities and good infrastructure for sophisticated neurosurgical procedures young neurosurgeons may have to work alone usually without the full support of colleagues . So they become expert in allied neuroscience discipline also. Many a times they are their own physician, intensivists, neuroradiologist and anaesthetist. At the time of results of the patients ----that is expected from these centres are compared with well equipped neurosurgery centres without considering the lack of facilities. So small and developing centres should be joined by young neurosurgeons for developing neurosurgical services in that area and government should take care of such centres also for betterment as far as possible. Young neurosurgeons should also adopt the newer techniques and researches for bringing up modern neurosurgical procedures gradually to that place after updating himself through conferences and workshops. One should have determination to succeed over the atmosphere of lack of resources and experiences.

Now I will like to share some initial experiences and hurdles faced by a senior neurosurgeon, Professor Pradeep Bharti Gupta, in his initial days of career. I am thankful to Professor Pradeep Bharti who gave his precious time to me while sharing his experiences and struggles that may be hopefully beneficial to a few if not all young neurosurgeons coming to a hospital with lesser neurosurgical infrastructure. Professor Bharti passed his M. Ch. from prestigious K GMC Lucknow in 1985

and got an opportunity to work as Registrar neurosurgery in Sir Ganga Ram hospital Delhi. Within a span of two months there was an offer of a lecturer post in neurosurgery department of LLRM medical college Meerut. A big challenge was taken to jump from well established neurosurgery department of Sir Ganga Ram hospital in Delhi to LLRM medical college Meerut where there was no facility at all for the treatment of neurosurgical patients. A big part of trauma comes to Meerut medical college including head injuries. He joined on 17<sup>th</sup> March 1986 as Lecturer neurosurgery department at LLRM medical college Meerut.

Initially there was no neurosurgery OPD, no neurosurgery OT, no neurosurgery ward facility and no resident support to neurosurgery. New OPD (no 12) was allotted to neurosurgery by General surgery department and was started on every Friday. One resident and one intern were given by Gen Surgery department for managing OPD patients. The number of patients were less than 10 for initial few months. After about 10 months period, it was a matter of joy when number increased to 10 patients which gradually rose to more than 100 patients within a span of 4 yrs.

Within a day of joining a reference was received from medicine department where a patient of head injury was admitted and he had one sided dilated pupil although the patient was fully conscious. As there was no neurosurgical operation facility initially so the attendants were advised to take the patient to higher centre Delhi. But the attendants refused to take the patient to Delhi. After about two hours attendants met Professor Bharti and sadly informed the expiry of the patient. It was the time when he decided that all patients who need emergency neurosurgery operations will be operated over here only with whatsoever facilities are available.

With this view in mind HOD surgery Professor R.L.Gupta was approached who permitted neurosurgical operations in General surgery operation theatre. As there was no CT scan facility, so cranial angiogram was the only modality by which patients could be investigated for any mass lesion or haematoma. There was no angiography table, no serial cassette changer and no Counard's angiography needle. The only asset was to have Mr Kapoor senior most radiography technician who was trained radiographic technician from KGMC Lucknow. He readily agreed to assist in performing angiograms. In absence of Counard's needle, L.P. needle was used, with which it was dangerous to perform angiography but only method to do carotid angiography for which Dr Pradeep Bharti Gupta was trained thoroughly. By this method he was able to save many lives till Counard's needle was made available to us after approximately one years' time.

In initial days it was very difficult to arrange operation theatres as most of anaesthetists were not trained in neuroanaesthesia and were hesitant to give anaesthesia to the neurosurgery patients. Once a patient who was the son of one of the employee had head injury with one pupil dilated and was in a need of emergency neurosurgical operation. However anaesthetists were busy in Gen surgery cases, the cooperation from anaesthetists was so nice that HOD anaesthesia department Professor Santosh Mittal came herself to give anaesthesia to this patient who was operated and survived to become dental surgeon later on.

Initially there were 4 beds in male and 4 beds in female ward for neurosurgery indoor patients. These beds were common with General surgery patients. Persistently Professor Bharti was trying to increase the faculty, residents and ward beds. At that time it was observed that a new block was closed due to lack of adequate number of patients in hospital. With great difficulty six bedded male and six bedded female ward was started with central oxygen and suction in 1994.

Independent neurosurgery OT was started in 1998. Initially there was one demonstrator appointed in neurosurgery. However when the residency scheme was started that too was withdrawn. Continuous efforts were made to take non PG residents posts sanctioned by the govt but were never given. However surgery department was supportive to give JR's on rotation basis and senior residents on sharing basis with Plastic surgery.

Initially equipments list was made by Professor V.S.Dave and Professor D.K.Chabra for all six medical colleges in U.P. and these basic equipments were purchased gradually. It was very difficult to get operation theatre table and diathermy for neurosurgery due to custom

problems. With local help one fibre optic head light and one ventilator was purchased. It was given by the government after 1986 riots. In year of 1996 post of associate professor was sanctioned after 10 years of existence of the department

In 2013 after persistent efforts by Professor Bharti Gupta a new super speciality block was sanctioned by Government of India under PMMSY scheme to LLRM medical college Meerut. In 2015 -16 CT scan and MRI machine was sanctioned and installed in the LLRM medical college. Finally post of Professor in Neuro surgery was also sanctioned along with 4 posts of senior residents to facilitate working in 2018 which was after a span of 32 years of constant demand.

Now advanced instruments have been purchased by the government for super speciality block and neurosurgery department is in process of shifting to the new block having all modern facilities for neurosurgery. So once there was no OT, no OPD, no resident with neurosurgery department but now with dedication and persistent effort of Professor Bharti new block of neurosurgery department is ready and to be started soon. Therefore young neurosurgeons should learn with the experiences of seniors .....how they developed the department of neurosurgery just from nothing. This was story of one place only, but similar problems may be at other places also.

Professor Bharti has given few guidelines for young neurosurgeons based on his experiences.

- 1) It is very difficult to run a neurosurgery department in a govt sector initially without proper infrastructure as demand from a patient, public, and govt is very high.
- 2) One should be prepared for the hard life in govt sector initially. There may be targets to be fulfilled without proper infrastructure at small setup to start with.
- 3) One should be observing the patients regularly in post op days because the residents are not properly trained in neurosurgery.
- 4) The young neurosurgeons should be dedicated to his clinical services and should be relevant to academic goals for recognition academically and for contribution to the development of neurosurgery at that place.
- 5) Most of the head injury patients being the medicolegal cases....proper and correct documentation and charting of every event and treatment is essential along with date and time.

Take home message is----neurosurgery branch is very demanding and you have to sacrifice your personal and family life for the sake of patients and their welfare.

Success may come easily by following experiences and guidance from seniors and some practical strategies in professional life that may be changed according to priority time to time in future as per suitability of young and new neurosurgeons.

- 1) Documentation and record keeping honestly is essential.
- 2) Update and educate yourself regularly and participate in scientific meetings by sharing personal views without hesitation.
- 3) Work ethically whatever difficulty there may be.
- 4) Always represent neurosurgery branch whether small town so that other medico colleagues and public will know more facts about the neurosurgery and you.
- 5) Try to make a good team---who are willing to work even at odd hours. This will improve the outcome of the patients.
- 6) Do honest and sincere practice based on the basics and academic researches so that the next coming neurosurgeon may follow the guidelines made by you.
- 7) Sincerity in statement and punctuality of time is also essential for good neurosurgeon.
- 8) There should not be any communication gap between doctor and family of the patient regarding honest and true outcome/prognosis of any patient including possible complications.
- 9) It is better to operate and sleep instead of sleepless night.

According to DARMODY JENNY,----Personal skills, problem solving skills, quick thinking, patience, understanding and empathy with good amount of physical stamina for long operations is also essential.

LAURA DYRDA also gave few key points to be remembered while starting the career are as follows ----

- a) visualize where you want to be in next few years
- b) Set strong goals and develop an action plan

- c) Develop a business sense
- d) Choose a location that you and your family like.
- e) Know how you will fit into the practice and community .
- f) Investigate the recruiting organisation and practice place.
- g) Signing the contract----include the advancement details also.
- h) Rely on a supportive network....
- i) Understand how compensation works and sign a tight contract
- j) Building a patient base---always be available
- k) Make yourself known
- l) Develop a relationship with medico colleagues
- m) Provide a outstanding patient care
- n) Learn to make clinical decisions
- o) Mirror the best qualities of your mentor
- p) Don't be afraid to ask questions with seniors
- q) Work within the solid indications
- r) Refer complex cases to more experience surgeons --if needed in initial days
- s) Exercise humility
- t) Achieve financial stability ---invest in your practice as soon as possible
- u) Live within your means
- v) Hire a financial planner
- w) Enter into a loan forgiveness programme
- x) Plan for future /retirement

There may be so many points to be written here as each and every neurosurgeon suffers differently at different place. so suggestions and advice may also differ many a times. Young neurosurgeons are advised to bear these points also in mind---hopefully may benefit you at some or other time in life.

### CONCLUSIONS

A very kind , noble, educative and therapeutic role is waiting for all neurosurgeons while serving the neurosurgical patients and saving their lives. Neurosurgeon may earn the heartiest gratitude and blessings from the society for his untiring efforts for serious patients. Easy adjustments and success requires the suggestions ,advice ,and guidance from senior neurosurgeons based on their experiences in the initial days of the career of a young neurosurgeon especially at small towns. these suggestions may be beneficial at least to some if not all.

Wishing good luck to all young and new neurosurgeons.

### THANKS

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