

Editor's Page

Academic Medicine Today: Passion is Needed

PANOS E. VARDAS

Department of Cardiology, Heraklion University Hospital, Crete, Greece



Three decades ago I was talking to a friend of mine who had just taken the first steps in his career and had bright visions of an academic future in cardiology. He spoke with passion about his dreams, analysed the difficulties he was facing, and compared the conditions in small and large countries, all with a firm belief in the value of his ideas.

He was filled with admiration for those more renowned cardiologists, who had the joy of seeing their research papers published in respected, important medical journals, and for their laborious efforts to vindicate themselves academically. At the close of the discussion, I remember, he had his own, irrefutable argument: "You see, I don't have a house, I don't have a car, I don't have anything of my own. Believe me, if I had to choose between a publication in *Circulation* and a large sum of money, say a hundred thousand dollars, I would choose the former, without a second thought."

Today I still talk with my young colleagues. Many things have changed, certainly in Greece, but I'm afraid probably elsewhere, too. It is true that among young trainees the most capable are usually those who seek to realise their dreams through an academic career. One, that is, which combines proficient training, research work, teaching, and clinical practice. The kind of career that aspires to contribute, to a greater or lesser degree, to the development of our science.

However, I discern fundamental differences in the morale of these young people compared to the old days: I see hesitancy in their choices, limited staying power, and a lack of passion. The latter factor, passion, is of course the main element of any creative activity that is not exclusively related to financial re-

ward and the satisfying of daily needs. It is this passion that keeps people creative, tireless and brilliant, instead of just resting on their laurels. We must ask ourselves, then, why this passion for academic medicine is lacking, to a large degree, in today's young people. What has changed in the hierarchies, the objectives, the role models?

I am afraid that over the last thirty years most things have changed. Maybe all. Firstly, there has been a decline in the ideological drive, the romanticism, the staying power in the chase, and the faith, not in material, but in ethical values. The form of social esteem, with all that involves, which used to reward those with a vocation to a level commensurate with their social contribution and prowess, has become seriously devalued. On the other hand, slowly but surely, new norms have been imposed on the urban middle classes, models where the main measure of success is judged to be financial potency.

Of course, this new reality does not concern only the realm of academic medicine; it has equally afflicted many areas staffed by functionaries essential to society as a whole. However, it is particularly in the field of medicine, in contrast to the clergy, the army, and the general volunteer sector, that something even worse is occurring. Year by year, private health care enterprises are mushrooming. Here the protagonists are certainly not physicians! Here, academic medicine is an oxymoron. Rather, this is the domain of the anonymous, the collective, the lucrative. It is clear that we are living in a new era, with a new ideology, one with a self-serving and financial character.

Academic medicine is struggling for survival. Passion is needed!