

Editorial

MESSAGE FROM THE EDITOR

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As the new editor of the Fiji Medical Journal (FMJ), I would like to thank the Fiji Medical Association (FMA) and its president Dr. Ifereimi Waqainabete for this opportunity to serve the medical community of Fiji. This has always been something of a dream ever since I was part of the FSMed students association printing copies of *the Tablet*, the medical students' newsletter, in a little corner room in Hoodless House.

The FMJ aims to become a repository for locally published works by medical personnel. For this to happen, there has to be a desire for Fijian medical professionals to share their studies, experiences and opinions. There is no coincidence that the birth of human history began with the advent of writing via cuneiform script. If we do not write, then we shall have to succumb to having our clinical experiences being shared through anecdotes and recollections. Even worse, without written records, we stand to repeat mistakes from the past; shared clinical experiences can help minimize this.

It is no surprise that doctors' mental health can be seriously affected by the stresses of the job. With the recent increase in the salaries of doctors, with which the FMA was instrumental, there has been an increase in expectations from the public on the improvement of medical services garnered. But is it reasonable to expect infallibility? In a system where human interactions are routine, the elimination of human error is almost impossible [1]. Every doctor strives to avoid mistakes, and despite their best intentions, the outcomes may not be ones anticipated. In a system where error cannot be eliminated the role of risk reduction and risk management plays an integral role.

On another note, medical work is an act of service to the public, be it provided by doctors, nurses or other medical personnel. To derive happiness from medical work encompasses deriving satisfaction in providing service to all kinds of people with suboptimal health. Of course there is the issue of salary, but monetary compensation for

services rendered only goes so far as to providing happiness. If a doctor finds himself or herself not being happy, then one may strive to fulfil this gap with other things in life [2]. Taking a vacation and travelling to other countries. Spending quality family time. Exercising towards the pursuit of physical wellbeing. Supplementing financial income with investments and other businesses. Partaking in high-end food and wine. With different personal preferences, the list of ways to derive happiness is endless. The trick is to find the balance between maintaining the provision of optimal medical services to the public and the pursuit of happiness for oneself. The FMJ has invited Dr. Myrielle Allen further elaborate on this issue of doctors' mental health and self-care.

References:

1. Goldman B. Tedx Toronto: Doctors Make Mistakes – Can We Talk About That. 2010. Accessed March, 2018: https://www.ted.com/talks/brian_goldman_doctors_make_mistakes_can_we_talk_about_that
2. Reese SM. Are Doctors Happy? - Medscape - Mar 22, 2012

*"Be kind, for everyone you meet is
fighting a hard battle"*
Ian Maclaren