Inaugural Address

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Good evening and thank you. I am tremendously honored to stand before you tonight as AMA president.

To reach this pinnacle is to travel a great journey. And like all great journeys, I did not travel alone.

First and foremost, I want to thank my family -- my wife Nancy, my love, my best friend, strongest supporter and confidant. Lord knows where I would have ended up without you, but it’s a sure bet that it wouldn’t have been here.

Thank you also to my daughter Karen and her husband, Kyle; and my daughter Amy and her fiancé Jason for their love, their strength, and their unwavering support.

I love you, and I could not have done this without you.

My mother, Adele Konecky, is here as well. Some of you may remember me introducing her to you in Orlando, during one of the funniest moments of my speakership.

If you weren’t there, or don’t remember … well, I’ll tell you later at the cocktail party.

Mom, I love you and I am delighted that you are here to share in the joy of this evening.

(Pause)

I would also like to thank my brother and sister, and their families, as well as the many friends, family, and colleagues who are here tonight. Some of you traveled long distances – Israel, California. One of you postponed having a knee replaced.

I’ll probably hear from the Orthopaedic Surgery contingent about that one.

(Pause)
I would like to recognize Dr. Martin Posner and Dr. Steven Green, who taught me hand surgery and have remained good friends for 30 years now, and also my Hospital CEO Jerry Murray.

Thank you to Dr. Steven Stack for his service to the AMA, his leadership, his mentorship, and his friendship.

And thank you also to the many colleagues and staff at the AMA and elsewhere who have inspired me, guided me, and have reminded me in difficult times of our power to meet any challenge.

Your tireless work on behalf of physicians is shaping the future of medicine and leaving a proud legacy for us all.

(Pause)

In preparing for this moment, I have taken the opportunity to reflect on our profession and the steps I've taken on my personal journey.

My childhood dream, as it was for most kids in my neighborhood outside New York City, was to play for the Yankees. However, my inability to handle a high and tight fastball made it necessary to re-evaluate my career path by age 11.

In college, I became interested in biochemistry and basic science research. Medicine wasn’t even on my radar until graduate school at the University of Rochester, where I developed an interest in immunology.

It was this study that brought me to clinical medicine, since I became convinced, and still believe, that immunology will be one of the fields that yield quantum leaps in the treatment of some diseases.

When I went to medical school in Syracuse, I was assigned a mentor from the medical community; just someone to hang out with, to shadow, or just to have as a resource.

My mentor, Ned Hughes, was an orthopedic surgeon. He introduced me to reconstructive surgery, and particularly to hand surgery. I was drawn by the technical challenge of the work, but also by the satisfaction of being able to restore function to a truly remarkable organ.

(Pause)

The hand gives life to what the mind sees and what the body feels… I was so taken by the poetry in that.

(Pause)

The hand caresses a baby, a child, a lover … it seals a deal, or provides rescue from the abyss.

(Pause)

The Bible tells us that the children of Israel were delivered from Pharaoh with “A Mighty Hand.”
My colleague, John Agee asks; “Can anything match the wonder of skilled musicians’ fingers dancing on strings?”

What a beautiful image that is!

Ned Hughes took me to my first county medical society meeting. Himself the son of a physician, he talked to me about caring for the profession. Twenty years or more before I heard the term, Ned was teaching me about paying it forward. He was the first of many people who mentored me along my path.

Most, but not all, were physicians, and from them I learned the great power that medicine has … the tremendous privilege that being a physician is … and the responsibility that each of us has to nurture and care for this great profession.

It was a colleague who first brought me to a Pennsylvania Medical Society meeting. Another pointed me towards the PAC in our state. Still others brought me to the AMA. A more senior physician took an interest in me in Pennsylvania, and suggested that I try to become vice speaker of the Pennsylvania House of Delegates. That ultimately led to my run here at the AMA.

Without those people, think of the videos you all would have missed!

Without those people, I would not have the honor of being here today.

So now you know a little bit about HOW I got here. Let me tell you WHY I am here.

I have had the privilege of practicing hand surgery in central Pennsylvania for 30 years.

Early in my career I had the opportunity to take care of a 4-year-old boy who was born without thumbs.

I was able to rotate his index finger and make it an opposable digit. We took off the splint at about six weeks. Later that evening his mother called me in tears to tell me that he was sucking his “thumb” for the first time.

On another occasion, I took care of an elderly woman who was living in the house she and her husband had built together. She had really debilitating arthritis that was making even minor tasks difficult, and she was despondent about having to leave her home.

I was able to reconstruct her hands so that she had enough function to remain independent, and to remain in the home that meant so much to her.
All of us who practice medicine have stories like these – those moments we cherish when we restore something valuable once thought lost.

It is precisely these moments that drew us to medicine. Peter Carmel reminded us that one of the most intimate acts a person can do is to come to you and say “take care of me.”

Being a physician is so empowering and uplifting, how can you not love this work?

That is why it is troubling to hear about so many accomplished and brilliant doctors who are leaving the profession.

It is disheartening to hear physicians’ stories of being “burned out” … of feeling unsupported by administrators … dogged by unnecessary regulations … stressed by the pace of their jobs … and mired in mountains of paperwork.

A recent study by the AMA and the Mayo Clinic found that more than half of U.S. physicians are experiencing professional burnout, numbers that are getting worse every day.

Nearly a dozen specialties have experienced a more than 10 percent increase in burnout between 2011 and 2014.

Urology, rehabilitation, family medicine … each with burnout rates at 63 percent or higher.

Radiology … 61 percent.

Orthopaedic surgery, my specialty, … 59 percent.

And we’re supposed to be the fun guys!

There are profound changes happening in medicine right now and as leaders of our profession we must respond.

And that response must be two-fold: adapting to change and advocating for our profession.

I think we all understand the importance of adapting to the changing landscape in health care. Modern medicine is advancing at a pace unprecedented in human history.

Advocacy, however, is something different.
It is fighting back against the powers in government, the private sector, and elsewhere that are inserting themselves into health care – that are wedging themselves between us and our patients.

It is fighting against inappropriately narrow networks, unfunded mandates, senseless regulation, and the futility of conforming to protocols and requirements that have no basis in reality, and no relationship to quality care.

(Pause)

I firmly believe that ALL physicians need to participate in advocacy as a professional responsibility, just like we participate in lifelong learning. I plan to spend the coming year bringing that message to as many physicians and medical students as I can.

I can tell you from experience that what happens in the halls of our state legislatures and Congress is as important for our profession as what happens in the halls of our hospitals and clinics.

(Pause)

Physicians have been active in politics since the birth of our nation: Four physicians were signers of the Declaration of Independence.

We have served in Congress and in the executive branches of state and local governments.

In 1847, Dr. Nathan Davis founded the AMA on the principles of improving conditions for physicians and encouraging them to speak with a unified voice on the issues that impacted their practices and their profession.

Nancy Nielsen, in her presidential address, framed our collective call to action by quoting the great sage Hillel: “If I am not for me, who will be for me?”

There are two more lines to that saying. We’ll come back to that in a bit.

(Pause)

I know everyone in this room has heard this call to serve; that’s why we are here.

But we all have friends and colleagues in medicine who are leaders in their communities, but who choose to remain silent.

For the betterment of medicine, we need all those sitting on the sideline to get involved. For the betterment of our profession, we need more ideas at the table.

I tell physicians all the time: If you think the AMA is the voice of other people and not you, you need to lend us your voice. Get involved.

Help us find solutions and respond to the tremendous challenges we face and those we know are coming.
In these challenges, there is opportunity. Think of it. You and I have access through our smart phones to a seemingly infinite amount of medical literature and data. We have access to technology that allows us to visualize, and to understand disease at a molecular level, and to customize and personalize medical care like never before.

We must work together to ensure that, as physicians, we lead the way in delivering these advances to our patients. We must stand up for our patients in the face of excess commercialism, bureaucracy and regulation.

We need to be their voice – their advocates, in the true sense of the word. Hillel’s famous second line says it all: “If I am only for me, what am I?”

As AMA president, I will be reaching out to you to ensure that your voice is heard, and that our priorities align as we take on these challenges together.

As leaders, we all must reach out to our elected representatives in Washington DC, and across every state, so that they understand how administrative bureaucracy and over-regulation is contributing to physician burnout and undermining quality care.

As leaders, we will be reaching out to the public at-large to raise awareness about preventive care, so that Americans get screened for chronic conditions such as pre-diabetes that can negatively impact their quality of life.

And I will make it a goal of my presidency to reach out to business and community leaders – to civic organizations, chambers of commerce, rotary clubs – so they understand all that the AMA is doing to improve health care and strengthen the health of our communities and our nation.

I have been engaged in this work for the past year. Community groups are very excited to hear this message, to learn about our priorities, and to know what they can do to help. They are natural allies as we work towards the betterment of public health.

If I can leave you with one thought tonight, it is this: Relationships.

I read recently about a landmark, decades-long study at Harvard to understand the roots of happiness.
Think of it: Men and women have lived on this planet for eons and we’re only now trying to figure what makes us happy.

I think men and women are still trying to figure each other out, but that’s another story.

(Pause)

Researchers at Harvard began this study in 1938 by intimately tracking the lives of healthy, able-bodied Harvard students.

What they did in school. What they did for leisure. What they ate. Their sleeping and drinking habits.

All of it was subjected to study.

For the next 75 years they tracked these alumni and recorded tidbits about their daily lives in the hopes of unlocking the secrets of healthy aging.

And what they found – perhaps not surprisingly – is that the number one indicator for good health and happiness over a lifetime is relationships.

Those who isolate themselves from others see declining health in midlife and, by and large, go on to live shorter lives.

Relationships – whether it’s with a parent, a child, a sibling, a good friend or coworker – shelter us from the negativity in the world, and give meaning to our lives.

So, why do we so often go it alone?

Why do we blindly shake our fists at our challenges, ignoring the community behind us confronting the very same hardships that we are?

(Pause)

I began tonight by thanking those who inspired me as a young physician to become an orthopaedic surgeon, but who also helped me to see how I fit into the larger global community of medicine.

They taught me that advocacy is a lifetime pursuit. It is not showing up for a specific cause and then stepping back into the shadows.

Advocacy is a process. It’s relationship-building. There is that word again.

It is maintaining a presence in your community, in your field, and in your state.

Many of our colleagues do not yet know the power in these relationships; the power in working to create a shared legacy in medicine.

We should see that as an opportunity: to create a community of physicians worth joining.
To show them the value in what we do. To show them the results of our hard work: Whether it’s protecting physician autonomy, or collaborating with tech entrepreneurs on the next digital breakthrough.

(Pause – Build momentum for a big finish)

We are the custodians of a marvelous profession and a noble tradition of healing and ethics.

Let this be the year we tell our colleagues about all that we are doing on their behalf and on behalf of our patients, so that more may join in our fight.

Let this be the year we show them the value of belonging to a community like the AMA, which is tackling the biggest challenges that are driving some of our best doctors out of the profession.

Through advocacy and action, everyone in this room is doing his or her part to fulfill the mission of the AMA and to move medicine forward.

Let’s reach out to those around us. Let’s build these relationships.

Let’s encourage others to join us – to lend their voices – as we work together to create a future that supports thriving physicians …

expands quality care …

and strengthens the health of our nation.

“If not now, when?”

Thank you.

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