WESTCHESTER PHYSICIAN

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PRESIDENT'S MESSAGE LIONS MANE PETER ACKER, MD PRESIDENT

I'm curious how many of you will make the connection with the title of this piece. No, it is not pointing out that I as president of WCMS wear a "Lion's Mane" which you can see by my picture is a stretch! I did back in the early 70's sport an impressive afro like mane and I have photos to prove it. However, as my status in life ascended, my hairline receded in direct proportion. It has been bitter sweet. While I enjoy the exalted status as two- time president of the WCMS, I mourn the loss of locks. I frequently discuss this with my psycho-hair-apist. My family of three daughters and wife have done little to diminish the pain. As I would frequently tell them, "a bad hair day is better than a no hair day."

Okay, now the reveal: Lions Mane (Hericulum erinaceus) is a type of mushroom that grows in the wild and is a much sought edible with purported medicinal uses. I have in previous years written occasionally about what physicians like to do outside of medicine. I have observed that many physicians pursue outside interests with great avidity. This is not too surprising, since medicine is a broad and complex field and attracts individuals with wide and intense curiosity. For example, two physicians, one a pediatrician (Dr. Laura Macbeth) the other a pediatric psychiatrist (Dr. Lori Adel) are violinists for Westchester Chamber Soloists, an outstanding orchestra. I have been to their concerts which are amazing. Their next concert is on February 11 at Sarah Lawrence College. If you go, say hello to me because I will be there!

Now back to Lions Mane. I have over the past few years become very interested in finding and identifying mushrooms. This interest has its roots in a life long interest I have had in nature in general. I took a lot of botany in college and became proficient in identifying wild edible plants. I was always a bit afraid to tackle mushrooms, since, of course, the consequence of eating the wrong one are dire. But then I found out about an organization – the Connecticut Westchester Mycology Association (also known as COMA –I kid you not). They sponsor

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PETER ACKER, MD President, WCMS

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FROM THE GUEST EDITOR...

SHOULD I STAY OR SHOULD I GO? PART II BRUCE MOLINELLI, MD, IMMEDIATE PAST PRESIDENT



(Part I synopsis- private practice (autonomy) vs employment (stability). Which is better? At this point it's moot, since employment is the prevailing option today for most physicians. So how can one keep autonomous as an employee? As promised last month, see Part II below for an answer.)

What are the three words of being a successful doctor?

You know them – Able. Affable. Available.

But is this still true, or is the new triplet now

Location. Location?

And although where one practices may indeed make a difference on success, I am referring to the original connotation of the phrase- real estate.

With increasing gap years for matriculating medical students, larger debt upon graduation, and prolonged residencies with additive bench years and personal times off, physicians are now realizing financial benefit even later in life. What once was an already delayed income when compared to one's age group peers entering the work force, is now even more delayed- perhaps outright late or even non existent. In addition, the changing landscape of medical finances has limited work opportunities towards employed physician models limiting opportunities for private practices which historically realized more income potential. So with higher debts, and lowering income ceilings from employment, there is a growing trend of more doctors exploring various supplemental income strategies to diversify their earnings. (I cannot help but make italicized editorial comments along the way of this article in order to ring the warning bell to our profession reminding us of our principled and teleological purpose - patient care- yet being cognizant of the importance of financial viability as an evil necessity. It used to be physicians made enough to not worry about finances thereby freeing us to focus on our patients- today, maybe not so.)

One blossoming trend includes Real Estate Investment. Purchasing properties for rental income or Capital Investing in real estate as a doctor involves careful planning and consideration, splitting one's focus away from medicine.

I asked for advice from my friend ChatGPT, entering "How are doctors supplementing income? ", with "Real Estate investment" being the top of the list including step by step instructions. (*Really? Shouldn't I be more concerned about keeping up to date with my specialty, and making sure I have focused my time on thinking about my patients rather than check the local newspaper for real estate deals? Does society really want us doctors constantly focusing on our stock portfolio and real estate holdings anymore than they we already had been???....)*

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PRESIDENT'S MESSAGE LIONS MANE PETER ACKER, MD PRESIDENT (Continued from page 1)

weekend foraging walks and are led by very knowledgeable and experienced amateur mycologists. Though there is the prospect of having wild edible mushrooms at end of the walk, I find the process of walking in the woods, and looking carefully to be fascinating and most rewarding. It's a bit like bird watching with advantage that the mushrooms can't fly away! It is nature writ large and makes any walk or even car ride more interesting. Not too long ago, I was driving and spotted a large Chicken of the Woods (Laetiporus Sulphureus) growing on tree stump. I stopped and harvested it and had it for dinner that night.

In addition, I have enjoyed meeting other enthusiasts. COMA has an annual foray every September at a camp in North Western Connecticut and at the end of each day we hover over tables with hundreds of mushrooms as we painstakingly identify each one. At one those forays I met a mycology professor who taught a one week intensive course in the Western North Carolina Appalachian Mountains. I took that course two summers ago. After a morning in the field, we spent the afternoon in the lab. I learned to look at spores under the microscope and use that as an identification tool. I also became very friendly with my classmates and we periodically see each other at mushroom events. Just last month, eight of spent a weekend in West Virginia.

Nothing like walks in the woods as a counter to the daily rigors of medicine. I would love to hear from any of you what passions you have outside of medicine!

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STOP THE TRAIN Elliot Barsh, MD

"One's humility must be in the same area as

one's greatness."

Hi everyone.

I hope that our column finds you healthy.

Gratitude is not a feeling, it is a practice.

It is a combination of recognizing goodness outside ourselves and affirming it to ourselves and others.

Thankfulness has been strongly and consistently shown to raise human beings' happiness.

It stimulates the ventromedial prefrontal cortex, part of the brain's reward circuit.

Gratitude can make us more resilient, and enhance relationships by strengthening romantic ties, **bolstering** friendships, and **creating** family bonds that endure during times of crisis.

It may improve many **health** indicators, such as blood pressure and diet.

Gratitude can make us more generous with others, more patient, and less materialistic.

When we are not grateful, we **complain**.

We see scarcity in what we feel we have, when there is an **abundance** in what we are a part of and we get to do.

What is scarce?... Unmet?... Unseen?... **Unheard**?

There are so many "everyday" blessings we can count.

Do we have someone we **trust** to hold our vulnerabilities, guard our solitude, and love us?

Do we have people who trust us to **listen** for understanding, talk with kindness, and accept our love?

We can get caught up in how healthcare has changed, how hard it has become to take care of our patients, and how unenjoyable our workplaces can be.

Or we can appreciate that no matter how things change, we still get to do this.

We can still be a refuge, a hand to hold, a wit**ness** to suffering, and a healing **presence**

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FROM THE GUEST EDITOR... BRUCE MOLINELLI, MD, IMMEDIATE PAST PRESIDENT

(Continued from page 2)

Here is the ChatGPT strategies for a doctor to invest in real estate:

1. Educate Yourself: Understand the basics of real estate investing, including property types, financing options, and potential risks. (*Sure , in all my free time, I'll focus on this. Then again, now that I am working shifts and not all the time, perhaps I will have the time..*)

2. Define Your Goals: Clarify your objectives for real estate investment, such as generating passive income, long-term appreciation, or tax benefits. (*Definitely enticing given the loans I've accrued during my medical education.You have my attention.*)

3. Due Diligence: Conduct thorough due diligence on potential properties. Assess property values, potential rental income, and any associated costs. (*No need to brush up on my medical journals , rather surf the internet on real estate instead!*)

4. Choose a Strategy: Decide on a real estate investment strategy, whether it's residential or commercial properties, fix-and-flip, rental properties, or real estate investment trusts (REITs). (*Just how much time do I need to devote to this? I guess those CME requirements can wait...*)And it goes on and on . Let's face it , if this were interesting, we would not have become physicians in the first place.

So what is the answer to use our medical knowledge to gain financial and professional autonomy within an employment model? Well, here is a list to augment one's income well within our skillset:

1. Moonlighting with Telemedicine Consulting or Per Diem shifts

2. Locum Tenens, which pays well as needs arise and physician pools diminish

3. Writing medical articles for a fee

4. Corporate Consulting- highly sought medical knowledge as a resource for companies can be lucrative

5.Medical Expert Opinions for malpractice cases will pay better hourly wages than professional fees for clinical practice.

These strategies allow young (and old) doctors to not only supplement their income but also achieve greater financial stability and flexibility in their careers. (*But do they promote autonomy in practice? Financial diversity- yes, but autonomy? Not so sure.*)

Essentially these strategies involve selling our expertise.

But are we being entrepreneurial gaining autonomy or simply selling out?

Well, currently the trend of the corporatization of medicine promotes more systems based practice and less traditional patient-physician bonding (*why have we let it come to this?*).

Is there another viable option to remain financially sound without the need for a firesale of our autonomous souls? (*I say yes.*)

So here is a potential answer to the question, "How to remain autonomous as an employed physicians?"

Let's again be the leaders of our own industry and take it back. We will have to work within the corporate framework which currently "owns" the profession, so we must rise up the corporate ranks, like any other professional. Let's not settle for employee status, and rely on unionization for protection. Let's become the rule setters, and determine policy that would be commensurate with our profession's charge of patient care the way we should be delivering it. To do so will require a reversal of years of non medical (albeit at times, well meaning) administrators determining delivery of care based on corporate models. Put physicians back into these roles. Granted, we too will need to understand the corporate models since this is the current framework from which we are subjected. But maybe, just maybe, our cumulative medical professional acumen and altruism will create a more friendly patient care delivery model.

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AUTISM CONFERENCE 2024

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Harland Winter, MD — Director, Center for Pediatric Inflammatory Bowel Disease, Massachusetts General Hospital for Children; Associate Professor, Harvard Medical School

Douglas Wallace, MD, PhD — Endowed Chair in Pediatric Mitochondrial Medicine and Metabolic Disease; Director, Center for Mitochondrial and Epigenomic Medicine, CHOP; Prof., Dept. of Pediatrics, Univ. of Pennsylvania

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neuroimmuneinstitute.org/autism-2024-conference-fee-waivers



MSSNY Announces two NEW Podcasts on COVID-19 ★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast websitel

FROM THE GUEST EDITOR... BRUCE MOLINELLI, MD, IMMEDIATE PAST PRESIDENT

(Continued from page 2)

But there is another avenue to simultaneously pursue in conjunction with corporate control. True meaningful change in medicine will require a legislative overhaul. To do this effectively, we physicians need to step into legislative positions to direct the laws of our country to dismantle burdensome legislation inducing physician vicissitudes and impeding financial stability. We need to run for office in order promote a more robust patient care directed model that will assure financial stability liberating physicians to refocus on patient care.

Perhaps the next generation of MDs and DOs will be taught in medical school more business and legislative related topics during their training and will have the answer, or at least the skillset, to make these changes. But let's not wait for them—let's start the process for them now.

Awaken from you slumber, your burnout, your cashing in and rise up to the challenge.

Be vested in your hospital. Reconnect to your medical staff. Join and support your medical societies. Speak to your legislators, perhaps run for office. Be involved. Start by volunteering or submitting your interest to the various committees of your institution or your company or commit time to your medical societies by supporting negotiations with governing bodies.

Let's reawaken our drive and make "location" mean omnipresence where it matters, in administrative and legislative boardrooms.

Are you affable? Check Are you able? Check Are you available? I guess that depends on one's location.

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As David Whyte writes,

"Gratitude arises from paying attention...to the millions of things that have come together to bring us here.

It is an appreciation that life is a gift...and our participation is a privilege.

That we are miraculously part of something rather than nothing."

Thanks for reading.

Be grateful.

Be safe.

"No matter how dark the days, we can figure out ways to be one another's light"

Finding Light in Winter

No matter how dark the days, we can find light in our own hearts, and we can be one another's light.

"Instead of hanging a medal on the wall that marked some achievement that would be beyond you now, honor the thing that you did today—and that you'll also be able to do tomorrow."

Why You Might Want to Toss Out Your Trophies

If mementos of personal triumphs are starting to make you feel like a has-been, you might be better off without them.

"Why was it her responsibility to trust me and not equally mine to trust her?"

Something for Sleep

"However the sky has chosen to appear, looking up always offers a reminder that there's more to this world than me and my problems."

Become Friends With The Moon

Ordinary life is just fine.

"Think it, say it, be it."

Four Ways to Be Grateful-And Happier

Ancient philosophers proposed it, modern researchers have confirmed it: Being thankful is good for you.

BLESSING FOR THE LIGHT by David Whyte

I thank you, light, again, for helping me to find the outline of my daughter's face, I thank you light, for the subtle way your merest touch gives shape to such things I could only learn to love through your delicate instruction, and I thank you, this morning waking again, most intimately and secretly for your visible invisibility, the way you make me look at the face of the world so that everything becomes an eye to everything else and so that strangely, I also see myself being seen, so that I can be born again in that sight, so that I can have this one other way along with every other way, to know that I am here.

Blessing For Sound by David Whyte

I thank you, for the smallest sound, for the way my ears open even before my eyes, as if to remember the way everything began with an original, vibrant, note, and I thank you for this everyday original music, always being rehearsed, always being played, always being remembered as something new and arriving, a tram line below in the city street, gull cries, or a ship's horn in the distant harbour, so that in waking I hear voices even where there is no voice and invitations where there is no invitation so that I can wake with you by the ocean, in summer or in the deepest seemingly quietest winter, and be with you so that I can hear you even with my eyes closed, even with my heart closed, even before I fully wake."

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MSSNY House of Delegates 2024 Will take place on April 12-14 At the Long Island Marriott in Uniondale, NY

There will be opportunity for all members to participate in CME activities virtually or in person

If you have interest in serving as a delegates please contact our office as soon as possible

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Facilitators

Patrice Harris, MD: Past President, AMA; Past Chair, AMA Opioid Task Force; Past President, Georgia Psychiatric Physicians Association; Past Trustee, American Psychiatric Association; Co Founder and CEO, eMed; **Julie Silver, MD**: Associate Professor of Physical Medicine and Rehabilitation, Harvard Medical School; Associate Chair, Department of Physical Medicine and Rehabilitation, Spaulding Rehabilitation Network

Educational Objectives

- Describe methods to improve women physicians' communication skills within work or professional settings including the C-Suite
- Identify professional skills to enhance advocacy of self and the development of professional networking
- * Develop leadership skills
- * Outline methods to enhance physician wellness



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The Medical Society of the State of New York designates each live activity for a maximum of 3.0 AMA PRA Category 1 Credits[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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Westchester Academy of Medicine Westchester County Medical Society Annual Holiday Party 2023

The Westchester Academy of Medicine and The Westchester County Medical Society held its Annual Holiday Party on Tuesday, December 19th at Sam's of Gedney Way in White Plains. About 50 members and their guests enjoyed great food, conversation and fellowship. The Academy and Society would like to thank our sponsors and raffle donors for their generous support of this event and our educational activities.













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MSSNY LEGISLATIVE UPDATE

Morris Auster, Senior Vice-President & Chief Legislative Counsel

To begin with, **the Wrongful Death Lawsuit Expansion bill (A6698)** remains one of 4 bills that **has not yet been delivered** to the Governor. With only a week left in 2023, the likely scenario is that this bill will again be carried over into a bonus 30-day consideration period in January 2024, like last year. When the bill gets sent to the Governor after Christmas, we will send another "call to action" urging more phone calls and letters from physicians.

The following bills **supported by MSSNY** (working together with various patient advocacy groups) were signed into law by the Governor include:

• A1673/S1196 – requires health insurers and Medicaid to cover biomarker precision medical testing, when medically appropriate

A463/S2677 – requires health insurers to provide more detailed information about clinical rationale and appeal steps when such insurer has denied a step therapy override request.

As you may have read, the Governor vetoed legislation (**S3100/A1278**) that would have prohibited non-compete clauses in future employment contracts. MSSNY DGA staff had been in frequent contact with the State Senate

regarding the intense negotiations between the Governor and the Legislature over the last week regarding various proposed amendments to carve-out certain persons who make above a certain threshold and other changes to the bill, but no agreement was reached. You are all very familiar with the controversial nature of this issue – Just in the last few days, MSSNY had heard from physicians on both sides, with some physicians and specialty societies urging for the bill to be signed into law as written, while other physicians (representing large medical groups) urging that the bill be vetoed or significantly narrowed. This will continue to be a major source of discussion for 2024.

The Governor also signed into law other bills of note:

• **A5985/S4401 –** Requires DOH and SED to develop and maintain a database of CME coursework for physicians on nutrition. MSSNY had worked with the sponsors to revise the bill from earlier versions that would have required physicians to complete such coursework

• **A219/S942** - changes the scope of practice for athletic trainers. MSSNY worked with the sponsors of the legislation over many years, as well as various specialty societies, to ensure that the bill provisions did not encroach upon the practice of medicine.

• A1707/S599 – requires drug manufactures to provide 60-day notice to DFS of their intent to increase a drug's price if such price has increased by at least 16% in the previous 24 months.

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