



What has become of family physicians?

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There was a time when family physicians played a central role in our society. During this era, they worked alone and were perceived to be somewhat like missionaries; they could boast of having delivered half the village and having treated the other half. They were called upon at all hours of the day and night to deliver babies, care for the sick or injured, and comfort the dying. It was a time when family physicians were highly respected and revered. To honour these physicians, many streets, town squares, amphitheatres, conference rooms, foundations, and awards of merit were named after these illustrious doctors.

What about today?

This might come as a surprise to some, but doctors are no longer venerated as they once were. Family physicians remain important individuals in our community and they retain a certain status, but they are no longer looked up to in quite the same way as in the past. As proof of this, many people don't have family physicians and don't consider it important to consult them. As a sign of the times, we have almost all experienced a scenario in which a virtual stranger, upon learning that you are a doctor, inquires about your specialty. Once you say you are a family physician, they respond in a tone that conveys disappointment, as if to say: "Oh! You're just a family physician!"

Why have we fallen from our pedestal?

Many factors have certainly contributed to this decline—for instance, the higher level of education of the population, as well as widespread access to the Internet. Family physicians are no longer one of the few professions to benefit from higher learning; therefore, they are no longer perceived as being all-knowing and powerful. However, family physicians must ask themselves if they have contributed to the decline of their profession by not taking the place left to them by their predecessors.


How do we now define the role and place of a family physician? Surely, anyone would define a family physician as a "physician for families," but what does this really mean? In the past, family physicians provided comprehensive care; this is no longer the case. Today, many types of practice exist: some physicians practise exclusively in ambulatory care, others are in emergency medicine, some are hospitalists, and others concentrate on the treatment of sexually transmitted infections. Very

few are "true" family physicians, who provide comprehensive and continuous care for all members of a family, be it traditional, extended, or blended. Few of us can claim to be like family physicians of the past; rather, we have become mini specialists subjected to the same requirements and expectations as our colleagues from the Royal College of Physicians and Surgeons of Canada or from the Fédération des médecins spécialistes du Québec, but with lower remuneration! What differentiates a family physician who practises in an emergency department from an emergency medicine physician working in the same place? In fact, very little.

Paradoxically, while we are becoming more and more specialized based on our interests and the various opportunities available, the profession of family physician is in a perilous situation. Fewer and fewer residents opt for family medicine. Meanwhile, many other professionals are taking over domains abandoned by family physicians, to such an extent that any village or community can do without a family physician if a nurse practitioner, pharmacist, and therapist are available.

It is unacceptable to train family physicians for 4 or 5 years, in addition to 2 or 3 years of residency, for the purpose of practising in all spheres of family medicine, only to have them choose to limit their practices. A physician whose practice involves solely aesthetics, varicose veins, or psychotherapy is no longer a family physician.

Some might retort that we have simply abandoned an outdated model and that expertise must rest on an interdisciplinary and multidisciplinary approach. True! However, a ship needs a captain. In the boat of health care, this responsibility belongs to the family physician, who alone cares for the family throughout their lives. If the family physician doesn't want this responsibility, or is incapable of accepting it, someone else will take his or her place and the profession of family physician will disappear.

The College of Family Physicians of Canada must have the courage to take a position; governments and professional authorities must recognize the importance and unique role of the family physician. 

Competing interests
None declared

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