

Monday Message: April 07, 2025

What is Artificial Intelligence? Should we be afraid? Dr Geoffrey Hinton, father of AI, suggests that AI will allow machines to take over the world ( well that might be a bit of an exaggeration).

“AI can automate routine, repetitive and often tedious tasks, including data collection, entering and reprocessing data, allowing faster and more accurate predictions and reliable data -driven decisions.”

“Machine learning algorithms can continually improve their accuracy and further reduce error as these algorithms are exposed to more data and “learn” from experience” ( Cole Stryker, Eda Kavlakoglu, IBM Agu 9 2024).

I invite you to learn about how we in medicine benefit from AI on Tuesday April 8th at 1245 when Dr Muhammad Mamdani gives the key note Collaborative Research Day Bethune lecture at the Department of Surgery Research Day “ Applied Artificial Intelligence in Healthcare”. It will be terrific! Hope you can join us not just for the keynote lecture but for our annual DOS research day starting at 8 am, located in the lower level of the Halifax Convention Centre. Research Day showcases the breadth and depth of research conducted by learners at all levels in our department.

A culture of inquiry, innovation, and creation of new knowledge are at the heart of academic surgery. Asking questions, finding solutions to problems, innovating are all essential to advances in surgery. Very few people make discoveries worthy of the Nobel prize, or even a New England Journal of Medicine paper, but small things add up and can make a difference. The spirit of inquiry is part of our DNA. As children we ask why? How? What if? I think it gets drummed out of us as we are taught and tested on facts and instructed to reproducibly do procedures a certain way. But what if we did something slightly different? Is there a better way to do this procedure? What if we didn't put in a nasogastric tube? People questioned medical dogma, did things a different way and often the result was a better outcome for the patient. Innovation isn't just building a new gizmo, it is also about tweaking and improving things we do every day.

Sharing our knowledge and experience is part of our mission as academic surgeons. If you read early medical literature it is often a single surgeon's collected case experience, with careful observation and reflection on patient outcomes, sharing what the surgeon learned from those cases so that the reader could benefit from that surgeon's experience. Now the literature is full of big data. We are drowning in data! Perhaps AI can help us learn from all this data? I think we can still learn from careful observation and reflection on our own experience and that of other experienced surgeons. This is what I would call a deep dive. I am not sure if all the big data collections allow this kind of deep dive because often the granular details are missing but maybe Big Data and AI will be the answer!

On Tuesday, please come and support our Dal Surgery researchers and don't forget on Wednesday Grand Rounds presented by Dr Emily Krauss!

gail

Monday Message: April 14, 2025

<https://www.cbc.ca/news/canada/nova-scotia/why-a-university-professor-turned-the-tv-show-ted-lasso-into-a-course-1.7507137>

I noticed on my newsfeed last week a story about Lori Dithurbide who is an associate professor of kinesiology at Dalhousie University's school of health and human performance which reported excerpts from an interview she did with CBC Radio's *Information Morning Nova Scotia* host Portia Clark.

Professor Dithurbide is using TV series Ted Lasso as the basis for new course she is offering next year at Dal. ( see the link above)

### **What?**

Professor Dithurbide indicates that the course, "will draw on the show's themes to offer a unique spin on coaching and leadership." Coach Lasso "demonstrates....that you can still hold people accountable and have high expectations of people around you doing it in a kind way." "That results really good performance, but also a very good team culture.

Here in Nova Scotia we are living through an unprecedented focus on accountability from our government and executive leadership team. I completely understand the focus-- after all what are Nova Scotians getting for their tax dollars when it comes to health care. I don't think anyone who works in health care would argue that the system needs to improve. As health care providers we are accountable to the people of Nova Scotia. The government who collects taxes and distributes them, understandably wants to know they are getting value for their money.

Every facet of health care is now monitored and evaluated on metrics including us in surgery. How many cases are we doing, how many hours are we operating, how long do patients wait to see us, how long do they wait for the operation they need. All fair questions. But not everything on which we are measured is in our control. At the same time other groups are being monitored and evaluated, our colleagues in anesthesia for example. Our work depends on them. Their work depends on us.

The unintended consequence of the way we are being managed is that our work culture is adversely affected. ON an individual level things are fine but there is some tension that has been created as we are under pressure to do an extra case.

This is perhaps even more problematic in the ED where we are measured by our ability to offload the ambulance within a certain period of time, assess the patient within a certain period of time, decide on patient disposition within a certain period of time, all the while dealing with increasing volumes of patients coming through the doors and patients overflowing our inpatient units. Our leadership team have put us under tremendous pressure, not just with metrics but with new digital solutions that add to our day to day work. We are all professionals. We are in this business to help patients. We want to do our job and do a good job. I can't tell you how many times I have heard a surgeon say-- I just want to do my job.

A little kindness and forgiveness — even an acknowledgement that we are trying—would go a long way.

Have a great week everyone  
gail

Monday Message: April 28, 2025

Happy Monday !

Back to work for me.

I had a great time away—my two conferences were very invigorating!

I know that many of you participate in national and international conferences but there are many who do not.

Why not?

Time away from family

Cost and hassle of travel

Anything worthwhile will be published and can be read later

Not much of real use in my practice

Not much new

Why should you go ?

Hear about new ideas and techniques early , consider implementing

Publication can take a year or more so missed opportunity to incorporate new things into practice

Networking with colleagues—hear about what they are doing, their real world experience

Catch up with friends

Take a break from the routine, “ me time”

Travel to an interesting place

I think it is important for us to attend national and international conferences. Local conferences tend to be the same people who do the same things—even national meetings can be this way.

It jolts me out of my complacency to go to a conference and hear about new stuff. Talking to colleagues is worthwhile – whether to share ideas or share war stories or to ask advice.

Of course connecting with friends and colleagues over a nice meal is great for wellness—as is just getting away even if you just order room service, go to bed early and get a full night’s sleep.

“ Life begins at the edge of our comfort zone”.

Go for it!

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