Very recently I had the privilege to visit the 2nd Department of Anesthesiology at Attikon Hospital, University of Athens, Greece. Upon departing Athens I was reminded of Winston Churchill’s quote soon after the Greeks repelled Italian fascist forces,

“Hence we will not say the Greeks fight like heroes, but we will say that heroes fight like Greeks.”

Well, I have a new version for you,

“Hence we will not say that Greeks practice medicine like heroes, but we will say that medical heroes practice medicine like Greeks.”

Seven days previously I had landed in Athens, at Christmas time. To say the least, my wife was not pleased that I had decided to give a lecture in Greece the week before Christmas. Nonetheless, I felt it was a privilege to be invited. The Chair of Anesthesiology in Athens and I were trying to set up a resident exchange program. Greece, as the whole world knows, has serious economic problems. So, let’s just say I was doing my “bit” to help out.

I needed to get a taxi. I knew immediately something was amiss when I got into the cab. As most travellers know, the cabbies in Southern Europe can be curmudgeons. Usually they are smug, a little rude, stand-offish, disparage my American citizenship, wonder why we elect stupid presidents (their words, not mine), and personally blame me for the ills that have befallen...
them and their national economy. My bald-headed, unshaven, cigar-smoking cab-
bie did none of this. He was polite and did not insult me, not even once. He spoke
in somber tones about the economic tragedy that affected him and his nation. I
had a pleasant ride to the university hospital, but soon realized that these eco-
nomic matters had also gravely touched the practice of academic anesthesiology
in Greece.

I made my way to the Chair’s office (she was also the chief medical officer) and
found her busy preparing the written examination for anesthesiology board cer-
tification in Greece. She introduced herself, offered me something to drink, and
continued to work on the exam. After a short while she looked up from her work,
her piercing stare darting out above her glasses,

“You know, Thanasi [my Greek name], we have 12 candidates, only 12 candidates.
Only one or two truly viable programs remain. We have several faculty openings
and no money to pay for the positions. My residents finish and leave the country if
they can; if not, they become unemployed.”

It is true. Greek anesthesiology graduates have trouble finding jobs; one that I have
come to know well told me she will graduate and probably go home to work in her
father’s bakery. Not only are there no job prospects but those who teach residents
and practice in the university system make 2000 euros a month—yes, a month.
And that includes call pay because there isn’t any. And they work hard.

There are 30 hospitals in Athens that have emergency departments (EDs) but they
are not all open at the same time. Due to the scarcity of resources only two EDs
are open each day in the city of Athens. Each hospital takes a 1 in 15 rotation.
However, the ED of the university hospital is mandated to a 1 in 4 rotation. You
have not seen an ED “rock” until you witness the human tsunami that floods this
hospital’s doors. When the ED finally closes at the appointed hour the turbulent
flow of human misery ceases like the aftermath of combat gone quiet. But the
operating rooms keep going. Though IV morphine is available in the hospital,
the only oral pain medication on the floors is Demerol. There is a limit on local
anesthetics for regional blocks. In fact, I had brought local anesthetics to the staff
in my suitcase. Drugs for cancer intermittently run low or just plain run out; as
do many of the basics that we take for granted in American medicine. There are
no nurse anesthetists, no anesthesiology assistants, almost no back up available—
everyone is in rooms. Incoming patients continue, the faculty just keeps moving.

The next day the hallways are laden with stretchers and makeshift beds. There is
not enough room at the inn. My friend, the Chair with the spine of steel and fire
in her eyes, clicks her iPhone camera to document the overcrowding due to a lack
of funding, a crisis that besieges not only anesthesia but all other departments. She
stands tall, almost Olympian, all five feet of her, and is uncompromising in the
best sense of the word.

She threatens to send the snapshots to the press.
In the evening we all got together to discuss the day's events. Dinner that night was an exceptional experience. Greeks have only two degrees of separation and when this is coupled with the fact that for every two Greeks there are three arguments, dining becomes vibrant and stimulating, to put it mildly. As a guest, never try to put your hand in your pocket to pay for a meal; for this egregious offence your hosts will slay you like an Easter lamb. The quizzical expression on their faces, their hand gestures, and their outraged body language will make it evident that you have done the unthinkable: you have proven yourself a barbarian, or at least a *xenos* (foreigner). You are the guest whether you like it or not, whether you are embarrassed or not. These colleagues who have less will always give you more.

My short tenure among those still dedicated to teaching and service under such arduous circumstances left me humbled and gave me great pause. Would those of us who live and teach under more fortunate circumstances be able to carry on like this? Here is an academic world on the brink of collapse in Europe, in the land of Hippocrates no less. No money, limited medications, an uncertain future, but lots of hard and fruitful work being done without complaint, and with incredible generosity. My newfound friends tell me they stay to teach the young, though there are fewer to instruct and even fewer who will stay. These aging mentors revealed a sacred awe to me: their humanity has made them true teachers,

> “True teachers are those who use themselves as bridges over which they invite their students to cross; then, having facilitated their crossing, joyfully collapse, encouraging them to create on their own.”

I understand there are situations that are even more surreal in other parts of the world (Syria, for example). But this was my slice of reality for anesthesiologists with whom I shared a ripple of time.

Mr. Churchill, you were right.

References