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Editorial

Experience as a young neurosurgeon

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1. Objective

To tell the experience of the learning curve faced during the practice after training period of a neurosurgeon. How as a neurosurgeon there are Ups and DOWNS. Becoming a neurosurgeon is not easy as thought by many other doctors and people.^{1,2}

2. Background

Each year, 13.8 million patients need neurosurgical interventions, and as many as 5 million do not have access to safe and affordable neurosurgery. Most of these patients live in low and middle income countries. Young Neuro surgeon has a lot of duty to fulfil.³

3. Methods

One cannot overemphasize the role of teachers in their careers, who continue to be students until the grave. Just like Dronacharya felt proud of Arjuna and Ekalavya, a teacher always takes pride to hear his student as a good orator and surgeon and is always admiring his accomplishments. The

Sanskrit shloka at the beginning of the article means “Guru is Verily the representative of Brahma, Vishnu, and Shiva. He creates, sustains knowledge, and destroys the weeds of ignorance. I salute such a guru.” Respect and revere your teachers and seniors, this shall take you a long way.

Residency programme in India was started in 1958 at Christian Medical College, Vellore. The basic structure of the programme is learning neurology, learn to treat indoor and outdoor patients, reading various types of radiological investigations and planning the case. Junior residents are mostly posted in wards, ICUs which help them to learn manage Neurosurgery emergencies and manage patients after surgery also; this practise seems better compared to places where neurosurgery ICUs are managed by intensivists. Residents should be posted in ICUs for critical care learning and should be exposed to all the procedures which is done by intensivists.

4. Results

4.1. Overcoming challenges

Immediate post residency, one needs a mentor who can be from within the institute or outside where one works. I was lucky enough. When I moved to a premiere institute in

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Chandigarh, a whole newer aspects of neurosurgery was laid before me. And after finishing the observership, I was lucky to find a teacher/mentor in one of the senior consultants in corporate set up who helped me build up my confidence. The options of observership and fellowship should be widely made available through various societies and one should pursue these courses following residency training which I underestimated during my residency. COVID pandemic has tested everyone, trained or under trained. In the current scenario of a pandemic-affected world, there has been an unprecedented fund of information and learning available online. The best of the best neurosurgical colleagues have come out and contributed to a myriad of webinars and presentations, which have been frozen in time over YouTube and other electronic media, these shall serve as an immense resource of neurosurgical knowledge and information for the years to come. Furthermore, one must learn the art of showcasing their skills to their peers and subordinates, for there is no better way to learn than to teach. Always ensure good communication with higher authorities and management, and continuously strive to improve the armamentarium.

As doctors and surgeons, our every effort and endeavor, revolves around the patient. We dedicate one-third of our lives to learning to heal the patient, and the rest to improving upon what we have learned. Be considerate toward patients by talking nicely, and respectfully, and listening to them compassionately. Be generous to reduce the fees for the ones who are poor and needy. Be empathetic with the patient, and go an extra mile for the ones who are really in need, for no one has ever become poor from the act of giving!.

One has to equally balance their personal life and ensure to take care of their family, despite their busy schedule. Relax and rejuvenate yourself as and when time permits. There shall be moments in life when the spouse shall be waiting with movie tickets in hand and the surgeon shall be busy traversing the cisterns. One might be busy seeing patients while a friend shall call: wind up bro! let's go to the club. The neurosurgeon must be prepared to be a master acrobat, learning the art of balancing the weight of responsibility and the roles of a parent, a spouse, and a common man.

5. Conclusion

Residency programme needs to be real. Access to cadaver lab, hands on during residency should be made essential part of the training. Fellowship no longer seems to be optional but a must in this era of sub specialization. Mentorship is a necessary part of self-growth. It helps you navigate through both personal and professional crisis.^{4,5}

Lastly a word about our duty toward society, yes, we have an obligation as the societal expectations from a doctor are to be—next to god, people bestow their faith in us, and pray that the doctor shall treat their ailment.

Take active participation in conferences and meetings. Conduct free camps such as epilepsy clinics and screening camps such that the notion amongst patients, regarding doctors being money-earning machines is taken care of. Let them know that the doctor has got a human touch.

If the local government hospital does not have an established neurosciences unit, one may voluntarily give their services and consultation for an hour or so, only poor patients shall come there.

In conclusion, the journey from a medical student and passing out as MCh is pretty daunting, with the growing competition, the overwhelming pace of technology, the roles and responsibilities of a person, and the expectations of friends and family. Studying in a medical college and the long hours of duty are not necessarily a pleasure trip, and even after passing out, there are multiple challenges. Keep in mind the above rules, the journey may not be easy. It's the best saying neurosurgeon should have A neurosurgeon should have the eyes of an Eagle, hands of a lady and the heart of a Lion.

6. Conflict of Interest

None.

7. Source of Funding

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