

GASTROENTEROLOGY

Checking Health from the Inside Out

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Why did you choose this specialty? I was interested in both surgery and internal medicine. Gastroenterology is a nice amalgam of both areas—allowing for clinical diagnosis and patient interaction, along with procedure intervention. I have good hand-eye coordination, which made video games especially rewarding, and in 1989, as far as I was concerned, colonoscopy was the best video experience on the planet.

What are your areas of special interest? I have specialized training in endoscopy [examining the inside of the body with an endoscope], which includes colonoscopy, ERCP [which examines pancreatic and bile ducts] and endoscopic ultrasound. The latter two procedures have been evolving and developing over the last 20 years, and it has been especially rewarding to achieve excellence in those areas. The other area, while some might not call it specializing, is taking care of the patient. Getting to know someone, identifying common ground, and relating to their concerns and issues can lay the groundwork for communication that can lead to the best care for someone.

Are there new treatments that we can look forward to in your specialty in the next 5–10 years? I hope to see a breakthrough in the understanding of inflammatory bowel disease (IBD). I would hope for a cure, but first might expect better-directed therapy that is more durable with fewer side effects.

Is there a patient behavior that you wish you could change? Yes. Get screened for colon cancer. We can and do make an impact. A colonoscopy is not just to find a cancer and then treat it, although that is important. Rather, colonoscopy, as a part of a screening program, can prevent cancer. Let me repeat that. Prevent cancer. Not very



Due for a colonoscopy? Don't wait, says Dr. Edward Slosberg of Western Washington Medical Group, who notes that it can prevent cancer

many things we do in medicine can achieve that.

How do you think health care is going to evolve in the next decade? I think we will see more short interactions with the health care system through the use of video and online access. This will be helpful with the more common issues people have, such as cold and flu; however, I think we will see a bit of discontinuity with a primary physician/provider, and I think that is a loss overall. Like anything else, over time, things will average out.

What's the most fun—outside of medicine—that you've had recently? Watching a sunset with family and friends. ■

WHAT QUALITIES SHOULD A PATIENT LOOK FOR WHEN CHOOSING A DOCTOR?

Communication. That when they meet with their doctor they feel comfortable speaking to them. It can make all the difference in the experience and the results.