

## 2012 WTS Scholarship Recipients

### How do you believe that changing health care access will impact your future as a cardiothoracic surgeon?

#### **Mara Antonoff, General Surgery Resident, University of Minnesota**

The move toward universal health care coverage has created significant market pressures for physicians. Seemingly contradictory demands--caring for more patients while further containing costs--pose a challenging paradigm for cardiothoracic surgeons. A resonating wave of change promoting increased emphasis on evidence-based practice and outcomes is washing into our surgical lives. Shifting the paradigm toward cost-effective, outcome-based care is a modern challenge. Surgeons must actively take leadership in organizational efforts to enhance our understanding of the components required to deliver quality care in an economy of finite resources.

#### **Ann Gaffey, General Surgery Resident, University of Pennsylvania**

The extension of insurance to 30 million people by the Affordable Care Act creates new research opportunities. The larger patient population with access to surgical care allows for re-evaluation of medical decision-making through collaborative ventures and comparative effectiveness research model. Thoracic surgery is poised to spearhead this shift from the current paradigm of anecdotal reports to one that analyzes comparisons among options for treatment, surgical approaches, and follow-up care. With my interest in epidemiology and economics, I aim to be a leader this effort with the goals of innovating care and improving quality-of-life for patients in light of financial constraints.

#### **Kimberly Holst, Medical Student, University of Michigan**

Increases in healthcare access will be accompanied by increased monitoring of cost and outcomes. The vast difference in cost of cardiac surgery in the United States compared to other areas of the world was recently highlighted when Dr. Devi Shetty won the Economist Innovation Award. Financial reform will be mandated by healthcare payers and cardiothoracic surgeons must anticipate these changes to be a part of the process. Increased healthcare access and reform has potential to maximize cost effectiveness and quality of care; however, if not performed in a conscientious way will lead to poor outcomes for patients and cardiothoracic surgeons.

#### **Eva Richardson, General Surgery Resident, University of Mississippi**

As a resident of Mississippi, one of the most medically underserved states in the nation, I am often overwhelmed by the number of patients with advanced cardiothoracic disease that could have been prevented or cured if they had access to healthcare. As policies change and access widens, there will be a need for streamlined, multidisciplinary clinics that eliminate multiple office visits and duplicated testing. I plan to work closely with cardiologists, pulmonologists, and gastroenterologists to provide fiscally responsible and efficient treatment plans for each patient. My goal is to accommodate the increasing number of patients without compromising excellent care.

#### **Joanna Sesti, General Surgery Resident, New York University**

I became a doctor to care of people. Unfortunately, 16% of Americans lack access to healthcare. This situation is challenging to all, including cardiothoracic surgeons, because it forces the system to increase services while decreasing healthcare expenditures. To ensure increased access doesn't come at the price of quality healthcare I need to be more than a surgeon; I need to be a businesswoman, leader, patient advocate, and an active member of organizations like the STS. The STS database is an excellent example of the type of initiatives we will need in medicine to guarantee the care we provide to patients.