



come the first Ontario town to use an APP — alternative payment plan. The details are still being worked out between the ministry and the coalition, but it was the town's political action that established the possibility of an APP.

"The APP, the quality of life, the sessional fees for

emergency work and Gord's [Hollway] concept of a group practice — these were the only things we could really offer prospective doctors," said Macey. "If we had the money we would have bribed them, but we didn't so we had to do something different."

Disincentives in south won't solve recruitment problems

At first glance it might appear that Marathon's solution to its physician-recruitment problems involved serendipity: a town wanting to rebuild its medical infrastructure met a group of young physicians eager to start new practices and new lives.

However, Dr. Gordon Hollway says there was something deeper than chance at work here. A major part of Marathon's success is a testimony to the improved rural-medicine residency programs now in place around the country. More than that, though, it is an illustration of a profession in transition.

"When we talk to people from the current classes, most of them look at Marathon as a sensible career choice," said Hollway. "We have modest incomes with modest workloads and the time to actually enjoy life. This is quite a change from even 10 years ago, when grads would probably [have said] we're nuts."

When Hollway first came to Marathon in 1987 he

practised with a small number of doctors who wanted little more than to work very hard and make lots of money. "I keep thinking back to 2 physicians in particular who were here briefly in the mid-80s. They left because they were not busy enough. I think they were fairly reflective of what physicians were looking for back then — high incomes with short-term stays in small communities."

Things appear to be changing. "Macho-medicine," where physicians work until they drop, is giving way to a more sensible approach to rural practice, said Drs. Mike Sylvester and Rupa Patel. Both recently graduated from the McMaster University Health North Program and came to Marathon looking for a job — and a life.

"Used to be that you were considered a wimp if you didn't meet the demands of the community," said Sylvester. "Things have changed now. We want more."

As an example, when Drs. Steve Klassen and Ruby Klassen decided to come to Marathon they heard from dozens of senior physicians who said they would be bored with the practice. "They said there simply wasn't enough work here for 7 doctors, and there isn't if all you want to do is make a lot of money," said Steve Klassen.

Dr. Sarah Newbery, another new member of the Marathon team, agrees. She said the profession in general is going through some long-overdue changes. Recognition of a drug problem within the profession is an example, and physician burnout is another. "I think the profession is finally admitting that we're human."

Dr. Eliseo Orrantia said the future looks good for places like Marathon. He cautioned that no cookie-cutter solution is possible, and was particularly scornful of the "deal" that sees the incomes of new physicians cut by 30% when they practise in overserved parts of Ontario. All 7 physicians agreed that disincentives in the south is no way to solve problems in the north. As Hollway said, the last thing places like Marathon need is a group of physicians who do not want to be there.

"We want people to choose Marathon for the positive reasons, not because they couldn't get into Scarborough or Ottawa," he said. "This is going to have a minimal impact on places up here, and is certainly not worth shooting our young over."



Marathon's physicians (front, from left) Ruby Klassen, Sarah Newbery and Rupa Patel; (rear) Steve Klassen, Eliseo Orrantia, Gordon Hollway and Mike Sylvester