Why be a Surgeon and Research in Northeast Brazil?

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Received date: 19 February 2020; Accepted date: 19 March 2020; Published date: 25 March 2020


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As a general surgeon, I never thought of research in my field. What I liked was to operate and is in the operating room. It was through my professor and master and doctoral advisor that I discovered the possibility of researching surgery. I learned that through research in medicine, we could evaluate established treatments, scientifically validate dogmas or paradigms that were once unquestionable, and apply evidence-based surgery for the benefit of our patients. In this sense, I noted the importance that senior researchers in surgery services should encourage young people and offer knowledge on how to design research, from the methodology of studies, collection of primary and secondary data, and analysis of complex data to the publication of the result in the form of a manuscript. Work on the use of techniques to innovate and translate research results in the real-world process of operational activity. As I am not so young anymore, I think that training the next generation of surgeons in research is of fundamental importance.

Although challenging, it is feasible and feasible to associate professional surgeons and research activities from medical residency to the battle for survival in professional life. Again reinforcement is not natural but possible and should be encouraged. In Brazil, specifically in the Northeast of Brazil, the surgeon needs to work at least 90 hours a week, sometimes including Saturday and/or Sunday, if he intends to associate research with professional activity. Besides, there are no incentives for the action of a researcher in Brazil, unless the professional belongs to a public university, and yet, he will have difficulties. Difficulties because in Brazil, and especially in the Brazilian Northeast, the figure of the surgeon who does research is not recognized, because it is believed that if a surgeon does research, he does not operate well, or does not have enough time to dedicate himself to the activity of a surgeon, all this due to the lack of research culture in our region, unlike other areas in the country. The emergence of video endoscopic, robotics and other technologies have made clinical and experimental research in surgery increasingly relevant to understand the pathophysiological mechanisms of diseases better, undertake therapeutic trials with new drugs, surgical techniques, biological markers, and evaluate these new forms of treatment and with prospects of applicability in the human species, scientifically validated.

All of this brings benefits to our patients, the reason for everything we do, and for whom we do it. Without research, surgery would be doomed to dominant stagnation at all times. Patients and doctors would not have the same knowledge and possibilities for treating diseases. Research, then, is essential to
medicine and even more to surgery. Discovery and validation are two critical phenomena that emphasize the importance of research. Research is the force that drives innovators and discoverers to advance in the understanding of surgical pathology. In conclusion, for all this and despite all the difficulties in reconciling professional/surgeon life with that of a humble but persistent researcher, I continue to do research even in the most challenging scenarios and conditions, which are those encountered by research surgeons in the Brazilian Northeast.