A hundred thousand years ago the Neanderthal man had an average life of 25 years. At the end of the 19th century the life expectancy of mankind was 50 years and now approaches 75. We added only in the 20th century, what achieved in a hundred millennia. This phenomenon, although due to multiple causes, is unquestionably related to the medical capacity to prevent and cure diseases.

An English bacteriologist in 1928, Alexander Fleming, began this era with the accidental discovery of penicillin that would revolutionize the treatment of infections. With the double-helix of the structure of DNA, Watson and Crick in 1950 laid the groundwork for the development of Immunology and genetics. Jonas Salk and Albert Sabin vaccines gave end to the horror of polio by those same years, and preventive immunizations of attenuated virus finished with contagious diseases like smallpox, eradicating it from the face of the Earth. From that same decade, cardiovascular surgery, organ transplants, intravenous nutrition support, hemodialysis, fetal surgery and microsurgery, videoendoscopic and robotic surgery, diagnostic imaging, as well as modern laboratory tests and the appearance of immunosuppressive and antineoplastic drugs, have enabled a whole improvement of the prognosis of many conditions.

At the beginning of the past century, pneumonia or peritonitis placed the doctor on the hard trance of only accompany the suffering to die well, and despite everything, he was referred to as the healer, health and fortune carrier, considered to be a respectable professional. Paradoxically, the image of the physician moves in inverse proportion to advances in the art and science of healing. The development of the technology requires to constantly investing in equipment in
perpetual update, communicated with the outside, reading expensive bibliographic material and attending symposia essential to keep updated, not to mention their commitments to economic, family, housing, education for their children, etc. However they look mercantilists, gaining more than it should, attributing them, instead of heart, a juicy bank account.

The reality is different. Almost 90% of the medical population, as part of the Venezuelan middle class, is hit by the current economic situation. The wages of hunger of some of these professionals sometimes oblige them venture into the informal economy or seek other horizons, contributing with the bloodshed of our country's human resources after having invested enormous sums in their formation. The majority of our young people, aware of this situation, obviously studied medicine for altruistic reasons. But just a mishap in which seems to have an abuse or human error so it becomes a matter of public derision from occurring, that the doctor is meat and substance of any television program or the tabloid press that appeal to the most primitive instincts. Everything is there simplified. "If healthy, the Saint cured him and if he dies, the physician killed him". Why use terms of common underworld to qualify ruthlessly a professional who tries to save a life in a public or private hospital? Just in case, would the inability to act perfectly in an emergency deserve the punishment of judicial and public degradation? Are we all human or gods all?

Aesculapius, father of medicine, advised his son before sending him to the Trojan war, "you'll be alone in your sorrows, alone in your studies, alone in the middle of human selfishness. You'll even find support among physicians, who are made deaf war for interest or for pride. If you crave to know man, penetrate all tragic of his destiny, become a doctor, my son!"

Because of a deteriorated image, coupled with sensitive social irritability of recent years, the number of demands for the medical malpractice in civil and criminal courts reached troubling levels. The penal code explicitly typifies as a crime, neglect or abandonment, recklessness and incompetence, negligence, not intentional and that recently in some cases have given them the character of malice or eventual intention which may impose imprisonment for up to 10 to 15 years.

No penalizes errors of judgment or poor training that ultimately are the fault of demagogic indiscriminately massification State college and maintains public hospitals collapsed, places where lessons are taught in pre-and post-graduate. How you can train a newly graduated young to be surgeon where hardly a minimum of interventions can practice so that it is considered as an expert in this area?

Immanuel Kant, philosopher of the 18th century, established the current codes today, "doing something because you think it is your obligation is a moral act, and although the cause is right and it does not achieve its purpose, it is correct". Ethics of intention!

Technological advances also dehumanize the practice of medicine. Specialists who practice only sophisticated scans or those who participate in the artificial support of critical patients can not engage properly with them or with their families to explain the risks and the genuine expectations of your treatment. Imagine, we are at the gates of surgical interventions for remote telemetry.
What treat they would receive which are operated in Venezuela, from Boston, for example? Communication with patients is essential!

Improve the image and the social role of the physician, requires that our unions comply with provisions in the law of our exercise, "seek and promote the achievement of a high level scientific and human education, adapted to the realities and needs of the country". To properly certify those requesting credentials of specialists as well the institutions intending to train them. That the universities are more selective and educate with excellence the number of doctors we need. That would require the State to put technology to everyone based on realistic policies and not "throwing money to broken sack". The high current costs may not be borne entirely by Governments even though our Constitution says it. We recognize that we have been bad managers of the few existing resources. We reclaim well-equipped hospitals, payroll enough, without political patronage, with physicians trained properly, worthy wages that enable them the continuity of their education and prevent the thrust of schedules with other institutions. Only thus we will not seem a Union that only ask for a wage increase even though justice in appropriate.

The great physician in Cordoba, Maimonides, in the 12th century was praying:

"God, remove from me the temptation that the thirst for profit and the quest for glory influence in the exercise of my profession. Always and tirelessly help the rich and the poor, the just and the unjust, the enemy and friend. Take away from me the idea that I can do everything. Give me the strength, the will, and the opportunity to expand my knowledge in order to ensure greater benefits to those suffering ".

As we move away from these ancient principles, will proliferate "alternative" proposals that will fill the gaps in our understanding required by patients.

Finally let the complaints of money when morale is raised in our hearts. No gold in the world can resurrect the dead. Let us give love to society what with love we were taught.

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