

# TAKING *Time*

**Sabbaticals provide physicians with the opportunity for travel, research and reflection—and these days they're not just for academics**

BY SUSAN SARVER

**FOR** *Stephen Rostand, MD, as for many physicians, delayed gratification had become a way of life. Focused on building a career in academic medicine, Rostand deferred the pursuit of many of his personal interests to the future. However, when the nephrologist and professor of medicine at the University of Alabama at Birmingham discovered that he had kidney cancer, suddenly the future rose up to meet him.*

*Rostand underwent surgery to remove the tumor; fortunately, no metastases were discovered. Though*

*the news of a cure came as a tremendous relief, Rostand already had made up his mind to do some of the things he had always wanted to do in his life—beginning with taking a sabbatical.*

*The very word sabbatical conjures up images of sprawling academic endeavors sprinkled with thoughtful strolls through tranquil settings. Yet, these days, sabbaticals are no longer exclusive perks reserved only for tenured academics. Rather, they are as diverse as the individuals who take them.*

*Physicians in a wide range of practice settings and at varying points in their careers are discovering the benefits of claiming a protected stretch of time to*



*give focus to personal and professional interests. Though the destinations and purposes differ widely, sabbaticals, almost without exception, change the physicians who take them. The new skills, knowledge, perspectives, and insights gained through a sabbatical can give rise to a renewed relationship with work and even with life.*

**The future is now**

During his recovery, Rostand began forging plans to undertake a collaborative research project with a friend who lived in Paris, a city ideally suited to his interests in photography and French language and culture. The University of Alabama at Birmingham offers sabbaticals to its faculty, supporting absences of six months or less with full pay and those up to

one year with half pay. By the time he firmed up his plans, awaited the return of a department colleague from a sabbatical, and made his way through the approval process, two years had passed. In 1995, Rostand finally embarked on the first sabbatical of his 22 years at the University.

Initially, he found that the most noticeable reprieve involved the telephone. "When the phone rang, it wasn't a patient; it wasn't a catastrophe," he recalls. Rather, telephone calls usually meant invitations for dinner or to join a weekend getaway. In collaboration with his friend, a French nephrologist who had access to laboratory facilities in Paris, Rostand began research to develop a model of parathyroid function. During his five-month stay, they succeeded in growing the cells that make the hormone, but, Rostand recalls, "we didn't succeed in getting them to be particularly functional." Yet

*Continued*

## SABBATICAL

Continued from previous page

that research marked the beginning of an entirely new area of thinking for Rostand, and it formed the basis of a book chapter and a scientific paper. Perhaps more importantly, the work drew him away from his daily demands and gave him time to pursue personal interests.

While on sabbatical, Rostand wrote several short pieces of fiction and an account of his experience as a patient. He kept a journal and trekked about the city, capturing the Parisian rustle of life on black-and-white film. As Rostand went about the business of daily life as an American in Paris, he completely immersed himself in the French culture and language. He chatted with his neighbors and the local shopkeepers. Even in the laboratory, he insisted on speaking only French. Because his wife's employment and his daughters' college commitments prevented them from accompanying him, Rostand was never tempted to revert to speaking English.

The dramatic change of pace gave Rostand time to reflect on his career and his life. He sees a process that is often at work in physicians who pursue a career in academic medicine. "You start off and you think you're indispensable; you get promoted and there's a certain amount of self-im-

portance... and you don't want to give up anything."

Not only did the sabbatical give Rostand the time to ponder the past, it gave him the time to develop some insights and plans for the future. "When I returned, I looked at my job in a different way," he says. "One of the things I realized is that at age 55 I couldn't keep doing what I did at 35

with the same degree of efficiency." Rostand finds that he has become more selective about committee involvement, he is more willing to let young faculty take action, and he's more willing to say "no."

According to Rostand, life and work often become so routine and repetitive that people don't actually think about what they're doing from day to day. He says, "[A sabbatical] is a way to kind of look

back and take stock. I suppose if you're ultra-compulsive, you could take stock in a week. I kind of like the five-month approach."

### New perspectives

While sabbaticals invite reflective, panoramic appraisals of both the past and the future paths that comprise a career in medicine, they can also force a close look at the details of

daily practice. Such observations have undoubtedly benefitted the young patients of Virginia Feldman, MD, a pediatrician with Kaiser Permanente and a clinical professor of pediatrics at the University of Oregon who also directs a regional domestic violence program. Primarily because of her sabbatical experiences, Feldman's pediatric patients are perhaps less likely than most to get stuck with unnecessary laboratory tests and x-rays.

During her first sabbatical to India and her second to Ecuador, Feldman discovered that laboratories and x-ray departments are either scarce or nonexistent in many parts of these countries. When you don't have a laboratory, "you learn to live without it," says Feldman. Stepping into portions of the world that are more needy than the one she sees every day have brought Feldman back to a time when a physician's senses were the primary diagnostic tools. For her, those experiences were a striking reminder of how medicine can be practiced with a reasonable certainty without the thousands of dollars of lab tests that are common in this country.

"It's so comfortable being a doctor in America," says Feldman. "There are busy days and a lot of pressures, but, in general, it's a decent lifestyle. I think it's important to be aware that this is not how the rest of the world lives." Feldman's mission sabbaticals have always involved the family, and her desire to take her skills to underserved areas of the world is shared by her husband, who is an internist.

Feldman finds that a little pre-planning for a sabbatical often works in her favor. "I find someone to cover for me before presenting the idea to the board," she says. In arranging their joint sabbatical, Feldman and

### Planning Points

- Plan as far in advance as possible
- Decide what you want to do and how long it will take to do it
- Determine sabbatical policies of your sponsoring institution
- Determine how work responsibilities will be met during your absence
- Plan how to meet financial needs both at home and at the sabbatical destination
- Decide about family involvement and make plans for education and housing
- Obtain passport and visa, if needed
- Prepare your home for an extended absence

her husband worked with Volunteers in Mission, an organization of volunteers who pursue mission activities around the world. In India, the couple served as advisers in hospitals and provided clinical care in rural areas. They quickly discovered that medical care involved more than treating illness and saving lives; it also meant providing the means to achieve economic security. Says Feldman, "Sometimes the worst thing you can do is bring in high-tech medicine that can increase the population without increasing the means to take care of them."

Program volunteers taught patients, particularly women, basic skills, such as weaving and growing mango plants, to help them establish a source of income. Because large families with few financial resources are common in India, Feldman observed that parents often must choose which children they can afford to treat. It is customary in India for a bride's family to provide a substantial dowry at the time of marriage. Therefore, girls are deemed expensive and thus, are the population most likely to go without medical treatment even in the event of life threatening illness.

Throughout her experience, Feldman found that seemingly small interventions can have a major impact. For instance, because umbilical cords are commonly cut with ordinary tools and receive no special care, neonatal tetanus is one of the leading causes of death in rural India, says Feldman. As a preventive strategy, small packages of supplies were assembled for program workers to help mothers provide adequate cord care.

Though she adjusted to the lack of technology, as a pediatrician, Feldman had difficulty accepting the absence



**When Stephen Rostand, MD took a five-month sabbatical in Paris, he had time to ponder the past and develop some plans for the future. "[A sabbatical] is a way to kind of look back and take stock. I suppose if you're ultra-compulsive, you could take stock in a week. I kind of like the five-month approach."**

of otoscopes. "No one looked at ears," she recalls. Instead, "everything was treated with antibiotics if people could afford it. That's kind of the standard approach in many underdeveloped countries." When Feldman returned home, shipping a load of

otoscopes to India was among the first orders of business.

When she returned to work, Feldman brought back a new perspective of medical practice. "I think what patients really want is interaction and

*Continued*

Jump on-line to...

The freshest, easiest resource  
for physician opportunities.

  
**icon**

Interactive Career Opportunity Network

[www.mgmaicon.com](http://www.mgmaicon.com)

or call toll-free 1-877-700-0203

- Visit the web site or call 24 hours a day.
- Search thousands of practice opportunities from across the United States by region, state, or specialty.
- Create an on-line CV and confidentially submit it to the opportunities that fit you best.
- Register in the positions-wanted database. Organizations which are searching for physicians will contact you.



**MEDICAL GROUP MANAGEMENT ASSOCIATION** is a national health care organization serving more than 20,000 members and 8,000 organizations, representing 190,000 physicians.

**icon** is a service provided by MGMA in collaboration with **Unique Opportunities®** The Physician's Resource.



To post an opportunity call toll-free, 1-877-877-MGMA

Check No. 27 on Reader Service Card

## SABBATICAL

Continued from previous page

help in understanding what they've lost when they get sick. That compassionate aspect of medicine is so much more important than lab tests," Feldman says. "It's a reminder that most of what we're doing in medicine may not be what we should be doing."

An all-physician board at Kaiser Permanente established its sabbatical policy, which allows three-month absences after three years of service with 12 months permitted after 12 years. Sabbaticals are supported at half pay. Among the 630 physicians within the organization, between 12 and 15 physicians take sabbaticals each year with most using the time for educational purposes or community service.

The policy satisfies what Feldman calls her "sabbatical urgings," in which she finds great personal and spiritual fulfillment. She headed to Ecuador in 1993, again accompanied by her family and schooled with a crash course in Spanish. The trip to Ecuador showed Feldman that deciding where to spend her energies in a world with many needs is often a matter of serendipity. After three months of providing care in a small clinic in Cuenca and serving as an adviser to a

**"[The sabbatical]**

**really allowed me for**

**the first time since**

**medical school to re-**

**expand my scope as a**

**human being. I became**

**more whole."**

fledgling child abuse prevention team, a travel agent told her about a group of Schwar Indians near the Amazon who had no medical care. So, Feldman and her family packed up and headed for the jungle. With simple tools—stethoscopes, basic medicines, and suture kits—they faced a multitude of disorders: intestinal diseases, scabies, parasites, and numerous machete injuries among the young children learning to clear the jungle to grow food.

Among the most urgent problems was a need to find a new protein source to combat widespread Kwashiorkor. With the change in ecology of the Amazon brought on by the massive clearing of the forests by oil companies upstream, the fish supply had disappeared. Feldman and her husband determined that plantains (high-protein bananas) and nuts from the palms were the answer to the protein shortage. They taught the Schwar about the importance of eating more of these foods with the help of an interpreter.

Though Feldman's style of sabbatical may not be for everyone, in the process of practicing medicine in another culture and seeing the struggles that exist elsewhere, she has gained a perspective of medicine that is impossible to come by in this country. Feldman's global perspective will broaden even more later this year when she responds to one of her sabbatical urgings by returning to India.

#### New directions

While the new perspectives, knowledge and skills gained from a sabbatical can boost a career in medicine and reinforce career decisions, they can also guide a career in a new direction. That proved to be the case for William Steinmann, MD, a professor of medicine and the director for the center for clinical effectiveness at Tulane University Medical Center in New Orleans. In 1979, while on the faculty at the University of Pennsylvania School of Medicine, Steinmann took a two-year sabbatical to England that confirmed his research interests and defined his future career.

Before the sabbatical, Steinmann had envisioned himself primarily as a clinician, but one who was intensely interested in evaluating the efficiency and effectiveness of the care he delivered. Throughout his fellowship training and in between teaching and caring for patients, research was very much on his mind. Steinmann recalls, "I tried to think of great research questions, but I didn't really have the skill to do that yet." When Steinmann was named one of five individuals in the nation to receive a Millbank Memorial Fund Scholarship, a career development award to support study in the field of clinical epidemiology, the University of Pennsylvania agreed to allow him

two years to pursue his interests.

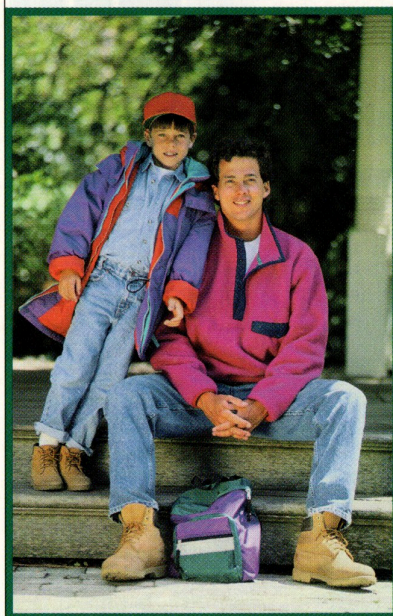
In a sabbatical that came along very early in his career, Steinmann spent the first year studying and obtaining a master's degree in epidemiology and biostatistics at the London School of Hygiene. The second year, he worked

at Green College in Oxford with investigators who are considered the masters in the field of clinical epidemiology. "This was a new area of research," says Steinmann, "and I went to the mecca of this research, and, early on, I

*Continued*

## Growing Communities...

### IDEAL FOR GROWING YOUR CAREER



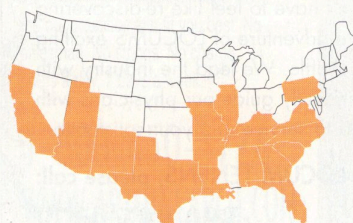
**Y**ou'll enjoy practicing in an excellent hospital with outstanding colleagues and exceptional earning potential with Community Health Systems.

CHS has the financial and managerial assets to help you build your practice in one of our growing towns across the United States.

In fact, the only thing better than working in a CHS community is living in one.

To find out more about CHS opportunities, call Kim Gray at **800-367-6813**, fax your CV to 615-373-3095 or e-mail: kimberly\_gray@hq.chs.net  
Visit our web sites: [www.chs.net](http://www.chs.net)  
[www.practelink.com/chs](http://www.practelink.com/chs)

#### Opportunities in these states



*Community Health Systems, Inc.  
is the nation's largest hospital  
company focused on non-urban areas.*

A proud member of ASPR  
Sorry, no J-1 Visa opportunities available.

#### Openings for BC/BE physicians in

Anesthesiology	General Surgery	Ophthalmology
Cardiology	Internal Med	Orthopaedics
Emergency Med	Med/Peds	Otolaryngology
Endocrinology	Neurology	Pediatrics
Family Practice	Ob/Gyn	Psychiatry
Gastroenterology	Oncology	Pulmonology
		Urology



**COMMUNITY HEALTH  
SYSTEMS, INC.**

P.O. Box 217  
Brentwood, TN, 37024

## SABBATICAL

Continued from previous page

saw how it was done.”

While in the process of learning how to be a researcher, Steinmann gave focus to his particular interest in glaucoma research. At Oxford, says Steinmann, “I did a couple of studies looking at who gets glaucoma and some of the risk factors.” Having the opportunity to expose and explore his ideas within a milieu of great research helped Steinmann to develop the principles and central core values that form the foundation of his work as a researcher and clinician today.

Though taking a sabbatical as a junior faculty member is not the norm, Steinmann believes the timing was ideal in helping him determine the path of his career early on. With all the wrong career turns he has witnessed in academic medicine, he believes that an early sabbatical may actually be more beneficial than one taken late in a career. “Efficiency is what I operate from,” says Steinmann. “You don’t have time to think about what you’re doing and where you’re going when you’re under fire with a typical career,” he says. Providing a block of protected time two or three years into the job when individual interests and capabilities are better defined, is a significant investment that can charge a career with well-contemplated direction and the knowledge and skills to accompany it.

While Steinmann immersed himself in academic and research experiences, he also acquired some new personal interests and reclaimed a few of those that had atrophied during his years of training. He became interested in English antiques, re-established a physical fitness routine, and discovered that he could draw. He also began to paint, eventually turning his hand to painting eggs for Christmas ornaments. Painting allowed him to

contemplate, and by the time his sabbatical ended, Steinmann had painted nearly 500 eggs. Thinking back to those years, he says, “They really allowed me for the first time since medical school to re-expand my scope as a human being.” He adds simply, “I became more whole.”

### Taking the bad with the good

It would seem that sabbaticals are the ultimate escapes to another world. Yet, they are forced to take place within the real world of imperfections and unexpected events. Though planning can help to ward off disasters and disappointments, even the best sabbaticals can have rough spots.

Steinmann discovered that embarking on a sabbatical soon after training, before becoming financially established, can present special challenges. When his plans for housing in England went awry, he found himself relying on the Salvation Army for temporary accommodations until he could make other arrangements. Still, he kept a positive attitude, focusing on the great room rates of 4 pounds 20 pence per night (about US \$9).

Sometimes the hazards of taking a sabbatical are encountered back home. When Steinmann returned, he was surprised to discover that others had completed eye research on ideas that he had contemplated prior to leaving for England. “Who knows what can happen in academia when you’re gone,” says Steinmann. Yet, that experience did not deter him from continuing his research or from becoming nationally known for his evaluation of glaucoma screening.

When Rostand was on sabbatical, he received word that his secretary, who had worked for him for 15 years, had been fired. “While I was gone,” says

Continued



ll Drive  
54401

**Care  
You  
ere -  
Back**

to feel like re-discovering  
ure of LOCUMS exciting  
Ve lead the industry with  
uide our physicians with  
ce and your satisfaction.

TENENS, please call:  
**800.685.2272**  
dwest & Eastern Regions  
**800.211.4971**  
Western Regions  
ysicians [www.locumsnet.com](http://www.locumsnet.com)

M  
Kinda sophis  
for anyone w  
practitioner, g  
such yearnin  
Armstrong at  
(Sorry, no opportu

**Stop wo  
interact w**

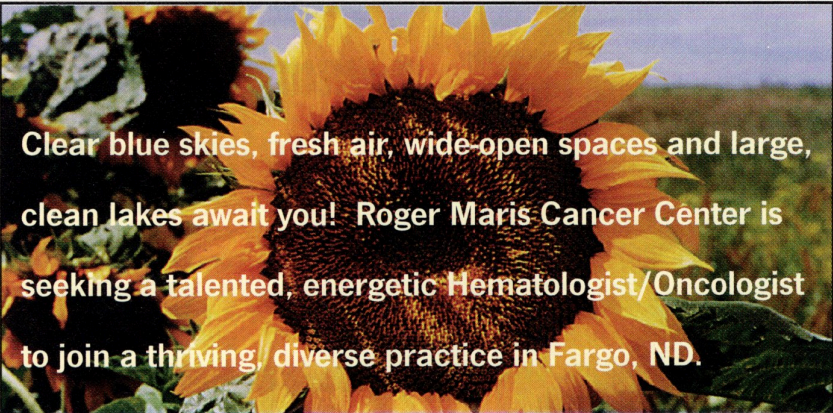
You know the opportunity  
there...but how do you fin  
you prefer the telephone c  
you can research detailed  
profiles from across the U  
and around the world. Get  
derstanding of the global r  
skills then fine tune your s  
a single state. You can init  
transmitting a confidential  
the opportunities that fit yo  
salesman. No strings. No  
hours a day, 7 days a wee

**1-800-450-  
WWW.ARTOFSE**

**AR**  
APPLIED RESE

## SABBATICAL

Continued from previous page



Clear blue skies, fresh air, wide-open spaces and large, clean lakes await you! Roger Maris Cancer Center is seeking a talented, energetic Hematologist/Oncologist to join a thriving, diverse practice in Fargo, ND.

- The MeritCare Roger Maris Cancer Center seeks a BC/BE adult medical hematologist/oncologist to join a thriving, diverse practice consisting of six adult, one pediatric, and three radiation oncologists within an integrated multispecialty health system. Join a team of physicians active in NCCTG, ECOG, RTOG, CCG, and NSABP trials as well as resident and medical student teaching. Excellent subspecialty collaboration combined with dedicated nursing, psychological,

social work, chaplaincy, and educational support provide a premium environment in which to practice. Inpatient unit and cancer center are physically and fiscally linked constituting one service line permitting seamless and efficient delivery of care. The Cancer Center commands majority market share with low managed care penetration and offers an attractive compensation, retirement, benefit, and 403B package.

- For more information submit your CV to:

Kathleen McKittrick Toft, 1-800-437-4010  
or e-mail [Kathetoft@meritcare.com](mailto:Kathetoft@meritcare.com).  
Also see our Web site: [www.MeritCare.com](http://www.MeritCare.com)  
737 Broadway, Fargo, North Dakota 58123

NOT LOCATED IN A HEALTH PROFESSIONAL SHORTAGE AREA



Check No. 41 on Reader Service Card

WE  
GIVE  
YOU  
MORE  
CHOICES.



St. Vincent  
Hospitals and  
Health Services

2001 West 86th Street  
Indianapolis, IN 46260  
(317) 338-6830  
(317) 338-2407 FAX  
e-mail: [sswhisma@stvincent.org](mailto:sswhisma@stvincent.org)



You're a physician with the highest level of expertise. You deserve the very best opportunities and hospitals that are capable of providing you with the same level of care that you would provide for your patients. You're seeking a network that works to meet your needs and offers you choices.

St. Vincent Hospitals and Health Services can help you set up a new practice or join an existing one and also offers practice management expertise. Opportunities exist throughout the state of Indiana.

St. Vincent Hospitals and Health Services is seeking dedicated primary care physicians to join our network. Please call us for more information or send us your CV today.

Check No. 58 on Reader Service Card

Rostand, "my boss decided that there was a financial crisis in the division and that my secretary was going to solve it, so he let her go. People can take advantage of you if you're not careful, and it doesn't matter what your power base is," he says. "I have a friend who went on sabbatical—a very august cardiologist—and when he came back he was no longer head of the cath lab nor did he have an office." Despite the risks, Rostand says he would definitely consider another sabbatical.

Feldman feels that adopting a laid-back, non-western attitude has been important to getting through difficulties encountered on her sabbaticals. For instance, says Feldman, "The train may come on Monday and it may come on Tuesday. It's not whether it comes at 9:04 or 9:06." She admits, however, "It does take some practice." Feldman also has faced surprises waiting at home. "When we came back from India, our living room was flooded because the roof leaked. It's all part of the territory."

The willingness to face whatever inconveniences a sabbatical may bring is perhaps tied to the temperament that also is willing to break away temporarily from a world that would seemingly crumble under the act. Taking sabbatical time to dwell, work, study, and think within a new environment and an expanse of protected time might well be an act of courage. But like many acts of courage, it could prove to be the one move that makes all the difference in the future. ■

*Susan Sarver is a registered nurse and a writer at Tulane University Medical Center. Her work has appeared in the Christian Science Monitor and Readers' Digest. Her article "Tending to Rights," appeared in our January/February 1998 issue.*