

G2G

By Glen Thomson, MD, FRCPC

It is somehow appropriate to pair the paradoxical topics of ageism (page 4) and new information technology (page 6) in this, my last issue as editor. As a baby boomer struggling to remain relevant, I am constantly challenged by the exponentially evolving electronic world in which I exist. In order to remain conversant with the younger generation (*i.e.*, my now age-of-majority children), I have had to gain some facility with text messaging, although I still refuse to become involved in the Facebook phenom-

enon. At the office, I spend more time and energy every year to keep the computers and server neatly documenting the minutia of my professional life, all of which comes to a grinding halt when the power fails (twice in two years). I will not surrender my paper charts to the vagary of the ether—yet. My world at home and work are much different now than 20 years ago.

So too since I paid my \$50 annual fee and joined the Canadian Rheumatology Association (CRA) in 1990. Back in the day, the attendance of the annual meeting numbered in the 30s and the annual budget was less than \$5000. I was fortunate to be there when the CRA cleaved itself from the Royal College annual meeting and began meeting as an organization in February each year (Paul Davis will rightfully take credit for the first winter symposium, although this was not a CRA annual meeting). Since then, the size of the meeting has grown greatly. The annual event now triples Dunbar's number of 150, the



"So long, and thanks for all the fish." (With apologies to Douglas Adams).



BITD.

number of individuals with whom we usually maintain some social relationship. The intimacy of the meetings has diminished, but to the benefit of greater opportunities to network and with increased revenues for the CRA. Still, I look fondly back at a time when I recognized most everyone at the meeting and knew most by their first names.

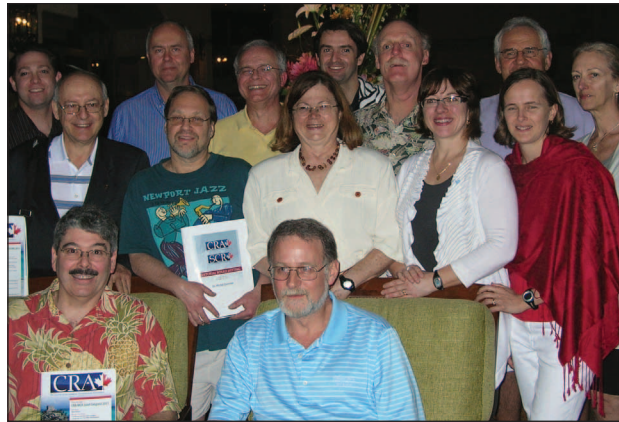
That is the one of the problems with getting older. We remember the "good old days" because the suboptimal parts of history are forgotten. Experience

and knowledge accreted with age should produce wisdom, or at least an appreciation for the complexity of most issues. Unfortunately, all this selectively accumulated information and overwhelming novelty may result in panicked inertia. A permanent retreat into the comfort of the familiar results in sclerosis of thought.

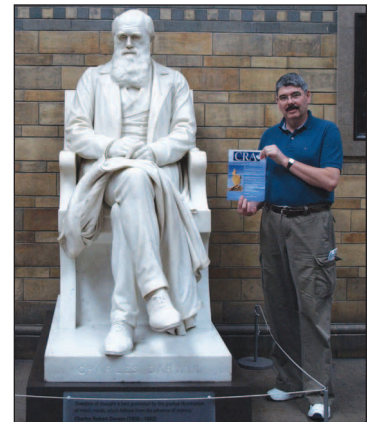
At the University of Toronto in 1987, I remember Hugh Smythe's introductory remarks to my new group of rheumatology residents. He stated that each generation thought that they were the first to invent sex. He recognized that each new generation had the confidence and optimism to think that they could solve the problems that had stymied the prior generation. There is an assumption that the parents' generation is part of the problem, not the solution. Only later comes an appreciation of the challenges of those who have gone before us. As Mark Twain has been quoted, "When I was a boy of fourteen, my



The Thomson Twins.



The Board, never bored, while on location in Cancun, 2011.



Hail to the Chief!

father was so ignorant I could hardly stand to have the old man around. But when I got to be twenty-one, I was astonished by how much he'd learned in seven years."

The boomers were not the first generation to invent sex, but were there during the tectonic movements in technology which were derived from affluence and driven by the space race. We can be encouraged that Bill Gates and Steve Jobs are the 50-somethings who led us into this era. While the torch of innovation has been passed to a younger generation, who have exploded onto the scene with the social media revolution, those of us

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on generous side of the half-centenary must become and remain comfortable with information technology if we do not want to contribute to a generational divide. Having said that, I may never understand the need for immediacy of some social media like tweeting, and I still need a translator to decipher some text messages from my kids.

Yet, there is some comfort in things that are old and familiar. The printed page still has a warmth and personal quality that a flickering screen does not. But in this age of immediacy, it is impossible for hard copy to keep up with the continual and rapid change in knowledge and information. Those younger individuals may never appreciate the blissful sensation of opening a brand new textbook. Stuffing a magazine into a briefcase for the flight is old-fashioned when your tablet can contain 10,000 newspapers. But, you can keep reading this print edition long after the flight attendant tells you that all electronic devices must be turned off.

It has been a sincere pleasure to communicate with the readers of this magazine over the last dozen years. Hopefully, there has been some mental grist for the intellectual mill and a few smiles along the way. I am deeply grateful to all of the editorial board members, writers and contributors over this geologic span of time. I must thank the STA HealthCare Communications' managing editors, Maria, Stephanie, Maeve, Mandi, Kate, Katia, and Russell, for their tolerance and support of my fluid notions of the journal's content and format. Paul Brand, STA's Executive Editor, was there for Barry Koehler's first issue in 1992 and has been the steady hand on the publishing tiller since. He has been a rock of professionalism. I will miss my interactions with all of you.

CYA PLO SIT KIR T+* :)

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*CYA = see ya; PLO = peace, love, out; SIT = stay in touch; KIR = keep it real; T+ = think positive. From preceding page: G2G = got to go; BITD = back in the day.