

East Coast Tidings: Meet the CRA's New Secretary-Treasurer, James Henderson

Some people would say that the most difficult and arduous task in the Canadian Rheumatology Association (CRA) is that of Secretary-Treasurer. What made you accept the nomination for this post?

I would have to counter that the most difficult position would be that of President, and having watched our last three Presidents operate, I would have to tip my hat to them as making a far more serious commitment to the CRA. I have certainly enjoyed all the time I have spent working with the CRA executive. When Carter Thorne indicated he was stepping down, I was certainly interested in playing a larger role. I think Carter would agree that the role of Secretary-Treasurer is to provide some long-term stability for the executive. Carter served in the position for many years and was a stabilizing force providing a historical perspective as to how the CRA has evolved over the years. I anticipate that I will be contributing in much the same fashion.

The last several Secretary-Treasurers came from independent practices in their communities. Does running the business aspect of a practice have benefits in running the business aspect of a large organization like the Canadian Rheumatology Association (CRA)?

For the past 15 years I have been running the business end of the Fredericton Medical Clinic. This is a medical clinic that houses 80 physicians under one roof. I certainly think that having responsibility for such a large organization has definitely prepared me for the business aspect of the CRA.

Ten years ago, the budget of the Canadian Rheumatology Association (CRA) wouldn't buy a good second-hand car. This situation has changed dramatically. What do you see as the financial challenges of the CRA over the next few years?

We have been trying to acquire sufficient savings in our account which, if our donations were to dry up, would still allow us to finance the CRA Annual Meeting.

We are living in a changing climate and we will never be in a position to always count on sponsorship of the pharmaceutical industry to help pay for our Annual Meeting. We are also finding the CRA is being stretched in many directions as

we try to fulfill our role as the arthritis experts in Canada. We need to make sure that our grasp on challenges does not exceed our financial ability to sustain ourselves.

In addition to running a successful practice in Fredericton, you are known to be an avid sportsman. How would you describe James Henderson without the stethoscope?

When you find me outside the office you will usually find me outdoors. My wife and I both enjoy canoeing and have had opportunities in the past few years to canoe a few rivers in the Northwest Territories and Nunavut. We plan to do another river in Nunavut next summer. We have certainly canoed many of the rivers in New Brunswick. Both of us also enjoy salmon fishing and like nothing better than to stand in the middle of a river searching for the elusive salmon.

My other favorite pastime is getting my fingernails dirty in the garden.

The CRA is a political organization. You have had prior exposure to "real" politics before the current posting with the CRA. Would you please describe some of your experiences?

The closest brush with politics I've had was running for office as a provincial Member of the Legislative Assembly (MLA) in the 1991 provincial election. It was an exhilarating experience, but I am sure I was completely out of my mind at the time. Looking back, I am truly thankful I was unsuccessful in that campaign.

I have been involved for many years with the New Brunswick Medical Society (NBMS) in a variety of roles and am currently chairman of the Negotiating Committee for the NBMS. I have just recently stepped away from the role of Chief of Internal Medicine, which I held for close to 10 years.

If you were suddenly appointed as the new federal Health Minister, what would be your top three suggestions to solve Canada's ongoing healthcare woes? I would begin to take a close look at the fact that most Canadians incur 80% of their healthcare bills during the



last three months of their lives. Many patients like to think that intensive investigations and expensive medications can somehow cheat death. There seems to be a lack of recognition that death is an inevitable part of life and often patients undergo a poor-quality death in an intensive care unit rather than being surrounded by family and loved ones in their own homes. A lot of savings to the healthcare system could be achieved by helping Canadians come to grips with their fear of death.

I certainly feel that the federal government has a role to play in a national pharmacare system and I am disappointed that the current government seems to be stepping away from that challenge.

I also personally feel that there is a role for a private side to our healthcare system. When one looks at how the system functions in Britain, the two seem to work together very well with physicians working on both sides of the system.

Who has most influenced you in your career?

I had the opportunity to spend six months with Dr. Howard Stein at St. Paul's Hospital during my final year of training and I would have to say that he, more than anyone else, showed me how to function as a rheumatologist.

What have been the best (and/or worst) pieces of professional (or personal) advice that you have been given?

I have certainly learned that stockbrokers never seem to have their clients' financial security at the top of their priority list. I can think of several instances when I have been given advice that, in retrospect, made perfect sense for them and their careers, but not for me.

The best piece of advice I was ever given was to "have a look around the Maritimes" as a place that one might want to consider raising a family. Coming to the east coast has made all the difference in my quality of life.

If you could learn three skills instantly, what would they be and why?

The first skill I would like to achieve immediately is the ability to kayak in white water. I am fairly comfortable

canoeing in most white water, but have always thought it would be fun to tackle the waves one on one.

I have often thought having the ability to perform microarthroscopy of some joints would certainly help in the ability to investigate inflammatory arthritis. I can foresee the day when, hopefully, the equipment will be available for this sort of procedure to be done in the office as part of a regular rheumatologic exam.

The third skill I would like to achieve is, of course, to learn to read my wife's mind.

What advice do you have for young rheumatology trainees wanting to someday practice in Fredericton or other similar setting?

As long as the individuals are committed to staying in one location for the duration of their professional lives, I would advise them to own their own office space and be in a position to control the real estate themselves.

I would also tell them not to focus too much on debt accumulated during training, as over a lifetime, the amount of money owed will be miniscule compared to their total lifetime earnings.

I would advise them that their greatest asset during their careers as rheumatologists will be the people they hire to run their offices and that they need to invest a lot of time and energy to make sure they get the right people.

I would also tell them to avoid the thrill of owning a new car and always buy used vehicles. The quality of their professional lives will be directly proportional to the density of rheumatologists in their immediate vicinity.



– James Henderson, MD
Secretary-Treasurer, CRA