
A Personal Path to (Pre)-Retirement

By Boulos Haraoui, MD, FRCPC

Retirement . . . A word you don't like to hear when you've spent a rewarding life practicing rheumatology during the best decades for our specialty.

But you have to at least resign yourself to planning for it!

Because after so many years of experiencing the pleasure and satisfaction of caring for the sick who occasionally become "accomplices," and exchanging with them various life experiences (marriages, children, work, travel), it is difficult to cut ties . . . especially when, like me, it is the only skill you have. I'm not a sportsman, let alone a golfer; I'm not a handyman either: The only thing I know how to do with my hands is to perform joint injections, and I've done hundreds, or rather, thousands of them in nearly 40 years of training and practice.

But more than planning what you would like to do during retirement, you need to think about the hundreds of patients who need to continue to see a rheumatologist.

So, my first priority has been to reduce the size of my practice. For more than a year and a half, I have not seen any new patients, and I have gradually started to transfer my "easiest" patients who are doing well to younger colleagues. I am blessed to have colleagues who are competent and generous enough to accept my transfers.

Admittedly, cutting ties is not always easy and is often very emotional with tears and several thank-you cards. This makes me think, and sometimes wonder, about the pace of transfers. But I say to myself that, sooner or later, this is what it has to come to! By my estimates, I will have exhaust-



ed my long list within the next two to three years, if my health allows me to continue doing so.

Along with the transfer of patients, I had to gradually reduce my other activities as well. Accordingly, I have reduced my clinical research projects as well as my participation in various committees, such as CATCH (the Canadian Early Arthritis Cohort) and soon the CRA Research Committee. However, I nevertheless continue to pursue certain intellectual and academic activities, such as screening and monitoring comorbidities in rheumatoid arthritis patients, and I often accept invitations to review articles submitted for publication. I continue to travel to attend conferences or take part

in advisory committees and to give lectures on my areas of expertise.

The main thing I've realized since I made this decision 20 months ago is that it has to be done gradually, but well. At the same time, I am beginning to "enjoy" the other aspects of life that give me satisfaction: First, my two grandsons, who will soon be three; travelling more for pleasure than just to attend conventions and other meetings; and finally, starting to read the dozens of books that I had put aside for when I would have more time, *i.e.*, retirement or . . . pre-retirement, a word that is less hard to accept.

*Boulos Haraoui, MD, FRCPC
Rheumatologist
Montreal, Quebec*