

CHOICES AND DECISIONS

By
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I was barely 18 years old when I joined medical school. After spending an uneventful first year in premedical classes, we had a date to enter the anatomy dissection hall. It was a crisp spring morning with birds chirping and dogs barking in the background. A new batch of about one hundred and fifty medical students entered the corridors of the anatomy department. After the roll call, we started walking towards the lecture hall where we were to meet the Professor of Anatomy. All of us were walking with our heads down following the feet in front of us. As we settled down in the hall, we heard the Professor come in. He spoke (I quote) "I welcome the new batch of ostriches. You don't have to be like ostriches with your heads buried in the sand. You did not notice anyone or anything. Lift your heads up and notice your surroundings and greet people as you go about doing your work." (Unquote). On that day I decided that I would walk with my head held high, notice my surroundings and greet people.

The smell of formalin overwhelmed us as we entered the dissection hall and the half dissected human bodies were a little intimidating. However, in a couple of weeks I got used to the formalin smell. One day, as I was walking towards my friends I overheard two girls from senior class talking about us. One said, "The new boys are too young and they do not have facial hair or moustaches". I decided that if I must look older and respectful I must grow a moustache. I kept it for 35 years.

The above are the first meaningful or meaningless decisions I made in my life. I understood that at every juncture of life I will be given choices and I have to make the right decisions.

By definition, choice is an act of choosing from a variety of options. A decision is a conclusion or resolution reached after consideration.

Is there a difference between a choice and a decision? From psychological investigations the difference stems from the concept of Freedom and Determinism, where freedom is the place of choice and determinism is the point of decision.

Determinism is a doctrine, in its absolute form, that all events are ultimately determined by causes external to the will. Thus, we cannot really choose anything and all has been pre-determined. Freedom, if absolute, is the ability to choose among different alternatives affected by other considerations and restraints. Nothing has been pre-determined.

However, we have to admit that decisions are usually influenced by outside factors and absolute freedom is rare and constraint in some form or other is the norm. Thus, choices are connected to reasons and decisions are connected to causes. By considering the available choices you can arrive at taking bold and life changing decisions.

Common choices we face in life include, but not limited, going to school or not, to smoke or not, to drink or not, to do drugs or not, to go to college or not, to marry or not, to go to church or not, and ultimately, to live or not.

Each one of us faces these situations of decision-making. Some are easy and some are difficult based on the personal, social, economic or political situations. Some have the luxury of choosing the right path and some do not.

Two incidents I mentioned at the beginning of the paper are examples of simple decision-making. One was a question of self-respect and the outgoing nature of the individual and the other just a question of vanity. Subsequent decisions in my life were far more complex and needed more deliberation and discussion with other members of my family and peers.

I will discuss one such event, my immigration to the United States of America, and before that I would like to take a step back in to the history.

According to the official sources there are approximately 31.2 million people of Indian ancestry or origin residing out of India.

The modern Indian merchant Diaspora in Central Asia and Arabia emerged in 16th century and remained active for over four centuries. Russian chronicles reported presence of Hindu traders in Moscow and St. Petersburg in 18th century.

During the mid-nineteenth century until the end of World War 1 much of migration was of GIRMITYA INDENTURED WORKERS to other British colonies under the Indian Indenture System. Major destinations were Mauritius, Guyana, Trinidad, Tobago, Surinam and other parts of the Caribbean, Fiji, Seychelles, Malay Peninsula, East Africa, South Africa and Australia.

Constant migration of Indians from the western part of India took place to East and South East Africa in the last two hundred years of British colonization of India. Most Asians in South Africa are descendents of laborers brought by the British to work in the sugarcane plantations.

Emigration of Indians to the USA started in the late 19th and early 20th century. Emigrants on their way to Vancouver, Canada, stopped at the ports of San Francisco and Seattle in transit. Discrimination against Asian immigrants in Canada forced many to settle in the United States along the West Coast. Asian Women were restricted from entering the country due to US Government policy in 1917. Many south Asian men in California married Mexican women and they continued to live in central valley of California to this day. After World War II, the United States Immigration Policy allowed family reunification for Asians and people of non-white origin. They were allowed to become citizens and were able to vote.

After independence from the British in 1947 there was another wave of Indian immigrants to the United States. Most of them came to work in the fields of defense, aerospace, teaching and research at universities and the health industry. Most recent and probably the largest wave of immigration occurred during the Computer and Internet Era.

India became independent on August 15, 1947. My father was a Government official and moved from place to place. I was born in 1954 and I joined Medical School in 1972.

The Seventies was the most significant period in the post-independent India. It was a decade of massive turbulence and testing in modern Indian history. After a comparative calm of post independence, the seventies was like a dizzying roller coaster ride with gut wrenching ups and downs. India was engaged in a war with Pakistan and emerged victorious. The explosion of the nuclear bomb for peaceful purposes increased its international prestige. However, inflation, crime, and taxes kept pace with the political havoc.

When the opposition cried for the resignation of the then Prime Minister, Mrs. Gandhi, following a court ruling that her election was illegal, she declared a state of emergency on June 26, 1975, to meet the internal threat to national security. The nineteen months that followed went down as the darkest chapter in India's democratic history. All the opposition leaders were rounded up and jailed. A couple of my close friends who were politically active during this time were jailed as well. Press censorship was enforced. When the emergency ended and elections were conducted, the ruling party lost miserably.

However, the euphoria and optimism fragmented all too soon. It was a time of political madness. The economy was in shambles and inflation took its inevitable upswing.

During these turbulent and uncertain times I graduated from medical school. Though I was not directly affected by the economic and political changes in the country I felt insecure for my family and myself.

My friends and I spent many hours discussing the future of medicine and medical practice in India and if immigrating to another country like United States of America was an option. Most of my friends decided to leave the country to work elsewhere. We applied to several other countries for jobs. We just wanted to leave India and we left for other shores. Eventually I reached United States of America.

I liked the saying that good decisions come from experience and experience comes from bad decisions. As a physician, I have to make decisions all the time to improve the health of my patients.

I am going to narrate an interesting medical decision I took as a young physician. I was a surgical resident on call in a busy city hospital in Lagos, Nigeria. After seeing about 30 patients I took a nap and was awakened by a knock on the door. I opened the door and saw a man standing with his guts hanging out of his abdomen. Quickly, I put him on the stretcher and took him to the ER operating room. It was 3 AM with rain pouring and most of the staff was tired and dozing. I saw a punctured wound in the abdominal wall and intestines were pushed out and they were turning blue. If I did not do something quickly he may end up having bowel resection and complications from extensive surgery. I asked the nurse to get the operating room ready for surgery. Unfortunately, the anesthesiologist left for his home about half hour ago and to wait for him to come back would waste the precious time. Supplies of Lidocaine, for local anesthesia, ran out. Time was running out. I explained to the patient that we have no anesthesia available and the surgery needs to be performed immediately. He told me to go ahead and do whatever I need to do and promised not to move. I cut the abdominal wall and searched for bleeding points and the integrity of intestines. I stopped a couple of brisk bleeders and pushed his guts inside and stitched up the abdomen. He did not move. Next day, when I came back for rounds, I saw him sitting up and reading a newspaper.

Theodore Roosevelt said that in any moment of decision the best thing to do is the right thing. The worst thing you can do is nothing.

Thank you for your attention.
