

CAPD of good hope

Ashok Muzumdar, a semiretired specialist in rehabilitation medicine, has been gradually losing his vision over the past 20 years. Now he can see only outlines and can't appreciate detail. He founded the Canadian Association of Physicians with Disabilities (CAPD) in August 2000, and, at that time, it was the first association of its kind in the world to represent disabled doctors. The CAPD now has 72 members across Canada, with different physical and mental disabilities, and it is an affiliated society of the Canadian Medical Association (CMA).

After graduating from the University of Indore, India, in 1964, Ashok moved to England to train before finally settling in Canada. In 1985 he became the director and head of the department of physical medicine and rehabilitation at the Queen Elizabeth Hospital in Charlottetown, Prince Edward Island.

When did you first realise that you were having problems with your vision?

I had called a [telephone] number a couple of times but was told that it was out of service. When I asked my secretary to call, I was surprised that she was able to get through. I then realised that I had read a 5 as a 6. I assumed that I would only need glasses.

When did you eventually seek help?

With no family history of eye disease, it took me a while to seek medical help. After a visit with the ophthalmologist, I had the shocking news that I was showing signs of early retinal degeneration in both eyes. The news was especially difficult because I was told that there was "no treatment, no surgery, no laser, no pills, nothing" to treat my condition. It was a shock. My wife was very upset, but I put my thinking cap on and decided I would do everything that I could do, within a safety margin, and when I needed help, I would ask for help.

What kind of help was that?

I sought advice from the Canadian Medical Protective Association (CMPA) and was advised that my ability to take history, carry out investigations, diagnose, and treat patients, would not change but that it may have some influence on how I examine patients. I was told to tell all new patients, "I don't see very well," practise safe medicine, and "if there's anything that you feel is not safe for you to do, do not do it." No patient ever refused my care.



How did you manage to continue practising medicine?

My loss of vision was gradual, so I was able to adapt and deal with the changes. I also worked in a field that could accommodate such a disability.

I altered certain aspects of my practice. For example, I stopped giving intra-articular injections because I felt that this move was in my patients' best interest. I was able to modify certain tests, such as the Babinski sign. I would lightly place my thumb on the inner aspect of the patient's hallux to determine an upgoing versus downgoing toe. I also relied on x ray reports from the radiologist for interpretation rather than analysing the films myself. When my declining vision limited my ability to write, I dictated my notes.

For many years I worked with a trained rehabilitation nurse, and she was helpful during certain parts of patients' examination, such as commenting on the accuracy of finger to nose test and describing features of a decubitus ulcer, while I examined using my sense of touch rather than my vision.

How did your colleagues and patients react?

I was very fortunate. My colleagues and staff were wonderful and very helpful. Also, patients were very understanding. However, I know that this is not necessarily the experience of other doctors with disabilities. I may be in the minority, but I think that how you relate to other people influences how they relate back to you; disability is in the eye of the beholder.

When I'm in familiar places, people may not be aware of my disability because I am able to get around without any difficulty, but I walk fine only because I know where things are. I walked on my own in the hospital, and I did not use a cane, so people who did not know me often didn't realise that I was losing my vision.

Why did you establish the Canadian Association of Physicians with Disabilities?


I wondered how other doctors with disabilities fared in their careers, and, after making a few inquiries, realised that there was no organised group representing doctors with disabilities, so I founded one.

How do you cope with your vision loss?

I don't complain about things but I don't minimise them either. I used to be a voracious reader, and this was one of the greatest challenges for me after I started to lose my vision. I also used to be a pilot, and when people ask me, "Do you still fly?" I reply, "If I could see the plane, I would consider it."

My wife knows my needs, and without her there are many things I wouldn't be able to do. For example, when we go to art galleries she reads the descriptions next to each painting and tells me about the subjects in the paintings, the dominant colours and style.

What are your interests now that you are semiretired?

I do medical writing. My most recent book, *Powered Upper Limb Prostheses*, was published earlier this year. I am heavily involved in professional activities as I serve on six different committees of the CMA along with my continuing involvement with CAPD. My wife and I travel a fair bit and enjoy the company of our three married children and a precious granddaughter. 

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