



Louis D. Wright, Jr., MD, FCAP

Opportunity Found: Where Science and Circumstance Intersect

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Louis D. Wright, Jr., MD, FCAP, chairs the CAP Council on Government and Professional Affairs. He also cochairs three CAP groups deeply involved with new technologies (the Personalized Health Care Committee, Diagnostic Intelligence and Health Information Technology Committee, and Molecular Pathology Working Group). His professional experience includes 20 years as director of laboratory services for McLeod Regional Medical Center in Florence, South Carolina; 38 years as director of a large pathology practice company; and the founding of a business services company that supports 75 independent pathology practices in 23 states. In short, he has an informed opinion. And in Dr. Wright's opinion, there are phenomenal opportunities for pathologists at the intersection of personalized medicine and health care reform.

"There is opportunity in the science that we call molecular and genetic medicine, and in the Patient Protection and Affordable Care Act, inasmuch as it talks about coordinated care," Dr. Wright says. Pathologist should assume a central role, he says, in helping clinical colleagues meet the coordinated care mandate of health care reform.

"ACOs (accountable care organizations) are evolving through demonstration projects across the country," Dr. Wright says. "Pathologists will be drawn into them because their hospital systems and their medical staff organizations will have agreed to be a demonstration project and to support ACOs in an ongoing fashion. This all takes place between now and 2015. Pathologists are going to be brought into the administrative offices to talk about the fact that the hospital is going to do a demonstration project."

It would be short-sighted, Dr. Wright says, to think that these changes would be limited to major urban centers. "Around 80% of health care in the US is delivered in the community hospital system," Dr. Wright says. "If we are going to reform health care, we aren't just going to do it for the 20% who live in big cities and go to big health systems. The pathologists in small practices will be challenged just as those in larger groups will be challenged." It may be harder for smaller groups to have all the tools they need, Dr. Wright says, adding that in his personal opinion, members of smaller groups should take measure of where they are and start to talk to their colleagues in like groups about where they can share resources for the future.

"Health care reform, and all of the things that we are talking about in personalized medicine, lead to a need to change the mindset of how pathologists practice pathology today," Dr. Wright says. As more complex tools emerge, there will be more emphasis on direct communication with primary care colleagues, dialogue around diagnostic options, and discussion of test outcomes. All of this, he says, will

translate into a dramatic need for targeted CME, which the College will provide, starting with a plenary session during CAP '10.

“We don't think that all pathologists have to be experts in molecular and genetic pathology,” Dr. Wright says, “but we think that there is a baseline that we can get everyone to come to so that they can be conversant in this new science. Pathologists have to be willing to interface in clinical care settings with the attending physicians and certainly with primary care physicians, who in a coordinated care model will be the quarterbacks for the team,” Dr. Wright says. “Pathologists have to be able to feel comfortable about helping the clinicians understand what is going on.”

The primary care physicians, Dr. Wright says, “don't have time to learn all the daily-changing genetics; it's just too much. And that is the essence of our opportunity as pathologists. We will have the science, we will watch the changes as they occur, and we will be able to share what that means with the quarterback of the team, the primary care doctor.”

“What is really transforming health care is not the economics, it's the science,” Dr. Wright says. “It's ours to use or ours to lose. We have an incredible opportunity to be central to the transformation of health care.”

*The plenary session at CAP '10 on Tuesday, September 28, at 11:45 AM, will provide an overview of CAP transformation planning.*