



## Beyond the Scope: From Starting Practice to Lasting Impact

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Completing gastroenterology training in the Philippines is a defining milestone. It may feel like the finish line—but it is actually the beginning of a greater responsibility. After years of long hospital duties, sleepless on-calls, countless procedures, research deadlines, and examinations, young specialists finally begin independent practice.

The early priorities are practical and necessary. Build a patient base. Establish referral networks. Improve procedural efficiency. Achieve financial stability. Learn how to manage a clinic—including taxes, insurance processes, and staff concerns. These are real and foundational responsibilities. Starting practice requires not only clinical competence, but also business sense, time management, communication skills, and emotional resilience. Yet if our goals stop at having a full endoscopy schedule or a busy clinic, we limit the broader meaning of our work.

Being a gastroenterologist today means more than performing procedures well. It means advocating for patients, helping train others, contributing to research, and strengthening digestive health care in our country. Making a difference does not begin years from now. It begins early—through steady, thoughtful actions.

### Starting Strong at Home

The Philippines faces many digestive health challenges. Colorectal cancer continues to rise. Chronic liver disease remains prevalent. Metabolic liver disease is increasing alongside lifestyle changes. Inflammatory bowel disease patterns are evolving. Screening uptake remains inconsistent, and access to specialized care varies across regions. These realities call for doctors who think beyond individual cases.

Building a meaningful practice means looking beyond volume. Are my quality indicators optimal? Am I tracking adenoma detection rates? Do I review complications regularly and honestly? Are my patients receiving clear and understandable instructions? Am I contributing to data that reflects Filipino outcomes?

Research does not need to begin with large international trials. It can start with reviewing hospital outcomes, conducting quality improvement projects, or collaborating on local registries. Even systematically tracking post-polypectomy bleeding rates or bowel preparation adequacy can generate insights that improve care. When we publish Philippine data, we ensure that our patients are represented in regional and global discussions. Generating our own evidence strengthens our national voice. Improving systems even in small ways creates lasting value.

## **Teaching While Growing**

Many young consultants quickly find themselves mentoring residents and fellows. Teaching early in practice can feel intimidating, especially when confidence is still developing. Yet teaching is one of the fastest ways to grow. Teaching forces us to think clearly. It reveals what we know—and what we still need to learn. More importantly, it shapes the next generation.

Improving training does not require sweeping reforms. It can begin with structured case discussions, more deliberate procedural feedback, and strengthening simulation-based and competency-based assessment already embedded in fellowship training. Small improvements in how we teach can influence how future specialists practice.

When we take time to explain clearly, listen patiently, and provide constructive feedback, we help cultivate a culture of professionalism and continuous learning. Small actions shape culture. Culture shapes institutions.

## **Engaging Beyond the Clinic**

Professional societies provide another avenue for growth beyond daily clinical work. The Philippine Society of Gastroenterology, the Philippine Society of Digestive Endoscopy, and the Hepatology Society of the Philippines all offer committees, educational initiatives, and advocacy programs where young members can participate.

Contributions need not be large. Reviewing research papers, serving on a committee, or helping organize meetings already makes a difference. These experiences teach teamwork, planning, and respectful dialogue. They provide insight into how healthcare standards are developed and how programs are implemented. Participation broadens perspective. It reminds us that gastroenterology is not only about individual practice—it is also about improving care collectively.

## **The Digital Dimension**

The Philippine medical community is highly connected. Webinars, virtual conferences, and professional social media discussions are now integral to everyday practice. Digital platforms allow young gastroenterologists to share research, discuss cases, and connect across institutions.

Online education reduces travel costs and bridges distance across our archipelago. Hybrid programs—combining virtual coaching with focused face-to-face workshops—demonstrate how learning can adapt to local realities.

At the same time, digital visibility must be paired with responsibility. Evidence-based communication, patient confidentiality, and professionalism remain essential. Used wisely, digital platforms expand collaboration and education. Used carelessly, they erode trust.

## **Looking Toward the Asia-Pacific**

Growth should not stop at national borders. The Asia-Pacific region shares similar disease burdens and healthcare challenges, making regional collaboration increasingly important. Conferences, observerships, training programs, and research grants are available—but young physicians must actively seek them.

Presenting research, joining regional initiatives, and participating in multicenter studies ensure that Filipino experiences are included in broader discussions. Exposure to other healthcare systems can inspire practical improvements at home. Seeing how neighboring countries implement screening programs or manage endoscopy services may offer ideas adoptable to our own setting.

Often, meaningful collaborations begin with a simple conversation at a meeting. Expand your network during conferences. Connect with experts—whether in person or through professional digital platforms. The relationships built early in practice can shape opportunities for years to come.

## **A Mindset Beyond the Endoscope**

Starting practice can feel overwhelming. Financial pressures, administrative demands, and daily patient care can narrow focus to short-term survival. It becomes easy to concentrate only on the next case, the next clinic day, the next bill—while balancing responsibilities to family and personal life. Every day feels full. But mindset shapes direction.

Self-motivation drives continuous improvement and the discipline to keep upskilling for our patients. Perseverance sustains research efforts despite rejection. Humility keeps us open to learning. Integrity builds long-term trust with patients and colleagues.

The endoscope is central to our work—but it is not the limit of our influence. Our impact extends to how we teach, how we improve systems, how we contribute to knowledge, and how we collaborate with others.

The early years of practice shape our professional identity. They define not only how we work—but why we work. Success in gastroenterology should not be measured solely by procedural numbers or clinic revenue. It should also be measured by the patients we serve well, the trainees we guide, the systems we introduce, and the knowledge we help build.

The journey begins in a clinic room in the Philippines—but it does not end there. The next generation of Filipino gastroenterologists is not simply starting practice. It is steadily building lasting impact—at home and beyond.