Borrowing From the Future/Investing in the Present

By Daniel J. Bressler, MD, FACP

I AM WRITING THIS IN JANUARY 2024, IN THE month named for the Roman God Janus — who represented time, beginnings, endings, and passages. Apropos of that etymology, I'm reflecting on how we "inherit" our current health status from the entirety of our past: our genetics, our place in history, and our personal experiences. This is both trivial and deep. The errors, triumphs, and accidents of the past have led us precisely to this here and this now. What we do with this inherited present depends partly on how we take on the future.

In the 2002 sci-fi film *Minority Report*, Tom Cruise plays chief John Anderton, who works in the section of "pre-crime" in the police department, using clairvoyant humanoid mutants and artificial intelligence to see into the near future and intervene to prevent a crime's completion. In our modern science of medical "precrime analysis," we use data from a patient's physical exam, blood chemistry, hematology, genetics, imaging, and tissue sampling along with our knowledge of pathophysiology to assess the likelihoods of future diseases and then intervene to prevent them. Better the polypectomy than the future adenocarcinoma. Better the statin than the future MI. Better the CPAP than the future stroke. Better the laser photocoagulation than the future retinopathic blindness.

That said, we must admit that whenever we claim to be "preventing future disease" we are playing a little fast and loose with the facts. We can't prevent most diseases in an absolute sense any more than we can prevent an engine from eventually wearing out by changing the oil every 3,000 miles. What we can do is reduce the risk of certain conditions happening during a finite amount of time. I tell patients every day: If you get a heart attack when you're 100 years old, we have succeeded in "preventing heart disease"; if it's when you're 70, we have failed. The same might be said about cancer, stroke, or dementia.

There is an ongoing debate in health economics that is sometimes referred to as the "red herring hypothesis." It asks whether the increase in healthcare spending that occurs as a person ages is due to age *per se* or is rather due to that person's temporal proximity to death. The potential red herring (or misleading fact) is that healthcare expenditures go up with age, but when data on time of death is factored in, it is that factor that best explains the increased expenditure. The debate has not been resolved but is worth considering as we care for an increasingly aged population. To the extent that we can enhance healthspan, there is a chance that per capita healthcare expenditures needn't rise dramatically. With the most rosy interpretation of these data, one could claim that borrowing from the future in this way is actually a zero interest loan.

We can't know the future but we can make informed estimates and skilled interventions about it. By delaying the MI, the stroke, the cancer, or the dementia, we have in a sense borrowed from our patients' futures and invested in their presents. By delaying the inevitable, we might expand their opportunities for joy, love, and service. To me, this is a noble (if still ultimately tragic) framing of our profession's calling.✚

Borrowed Time

We live our lives on borrowed time
A law of nature, not a crime

Mending defects while we can
Still subject to the master plan

We live our lives on borrowed time
Descending once we pass our prime

The dream of our decline's reversal
Is still a scammy fake commercial

We live our lives on borrowed time
A truth both tragic and sublime

Built-up structures breaking down
We royals must concede our crown

We live our lives on borrowed time
A call to prayer, a church bell chime

The future's distant guiding fire
A flickering flame, a funeral pyre

Dr. Bressler has practiced outpatient internal medicine in San Diego since 1984. He maintains privileges at Scripps Mercy Hospital, where he served as chairman of the Biomedical Ethics Committee, and at Mission Hills Post Acute Care where he served as medical director. Dr. Bressler has been a member of CMA for 35 years.