

“I do give my phone number to some patients, which I guess is a little unorthodox. It’s not something that doctors usually do,” he says. “Sometimes patients may find they don’t know what to expect and don’t know where to turn and I think that’s when they need a more personal type of care. They need to ask if the way they feel is normal and what to expect after a surgery. They sometimes just need a bit of reassurance.”

Despite the extra mile that Coughlan goes for his patients, he will never find it easy to break the news to a parent that their child is critically ill.

“It’s a very stressful situation to be in. I guess you just have to be as sensitive as possible and talk very slowly,” he says.

“Some doctors can be overly blunt so I think being sensitive to their situation helps, but at the same time maintaining a sense of honesty. I try to think of it this way - How would I like someone to treat my parents in this kind of situation?”

While Coughlan tries to remove himself from the emotional aspect of dealing with sick children and their families, there will always be children that he cannot forget.

“The cases I remember more are difficult tumours and paediatric tumours that can take you the whole day to operate,” he says. “Patients that have either nearly died or died on the table – those you don’t forget. They can be pretty taxing emotionally and physically.”

Born in Cape Town, South Africa, Coughlan realised at the age of 12 he wanted to practice medicine.

“I was always interested in helping people and helping animals. I wasn’t too shy with getting my hands dirty and getting blood on my hands. So, at that time I thought maybe I would like to be a doctor one day.”

Despite studying at the University of Cape Town for six years, it was

his internship at a tiny rural hospital just outside of Durban that cemented Coughlan’s interest in surgery.

“It was a small hospital but it was really busy,” he says. “You do things like general surgeries so lots of trauma, people coming in shot and stabbed, and we’d be the only doctors on at night. So, even though we were only interns you’d just have to do what you can.

“We’d do all sorts of things, even burns. We started doing a lot of plastic surgery like skin grafts and even dealing with things like snake bites and people being attacked by hippos.”

Coughlan still has a strong affiliation with his home country. However, he admits that working in Sydney has allowed him the freedom to concentrate on performing minimally invasive surgery.

“South African hospitals are probably more poorly resourced,” he says. “Here they have better

resources, less trauma, more elective surgery and better facilities.”

His assistant Sandra Carter says Coughlan has an amazing rapport with his patients: “As a neurosurgeon, he has difficult things to tell patients, but he’s so caring. The father of a patient once said he felt lucky to have found Marc and that Marc made him feel more confident that everything would be OK.”

Every patient Coughlan meets affects him in some way, Carter says. “He’s so calm and composed, you don’t think anything fazes him. But it does. They touch him in different ways.”

For Coughlan, his job entails doing everything possible to save the lives of his patients.

“Seeing patients come back with their families – you can’t put a price on that. But as a surgeon you have to maintain the scientific side of things to make sure you can take the tumour out. It’s a combination of art and science.”

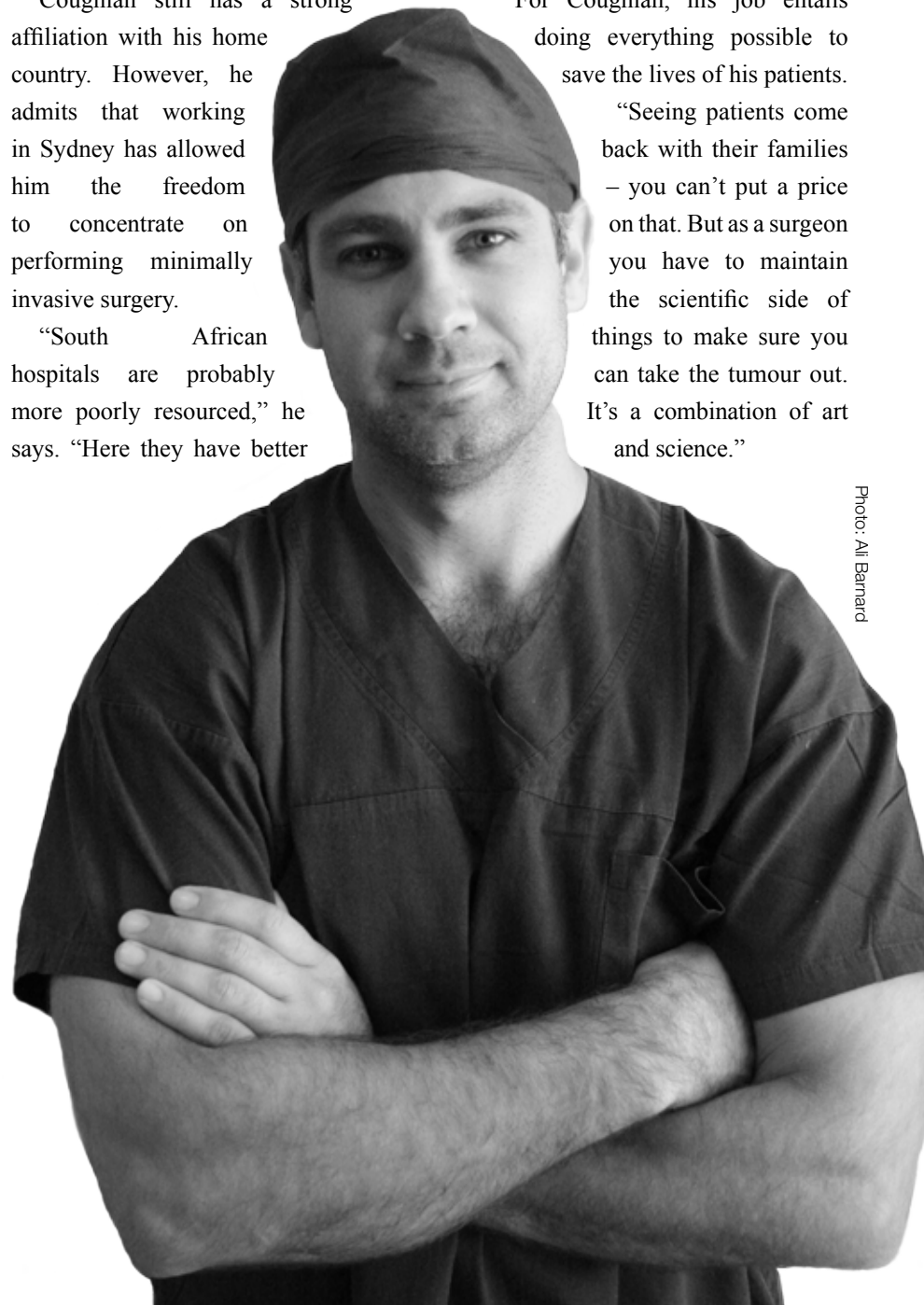


Photo: Ali Barnard