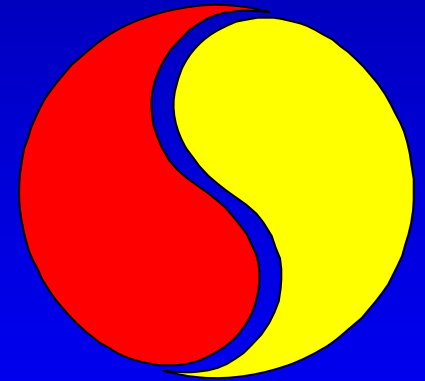


# Poetry for Medical Students: Can Humanities and the Arts Make You a Better Doctor?



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# Two Ways of Knowing

- Logico-scientific
- and
- Narrative

# LOGICO-SCIENTIFIC

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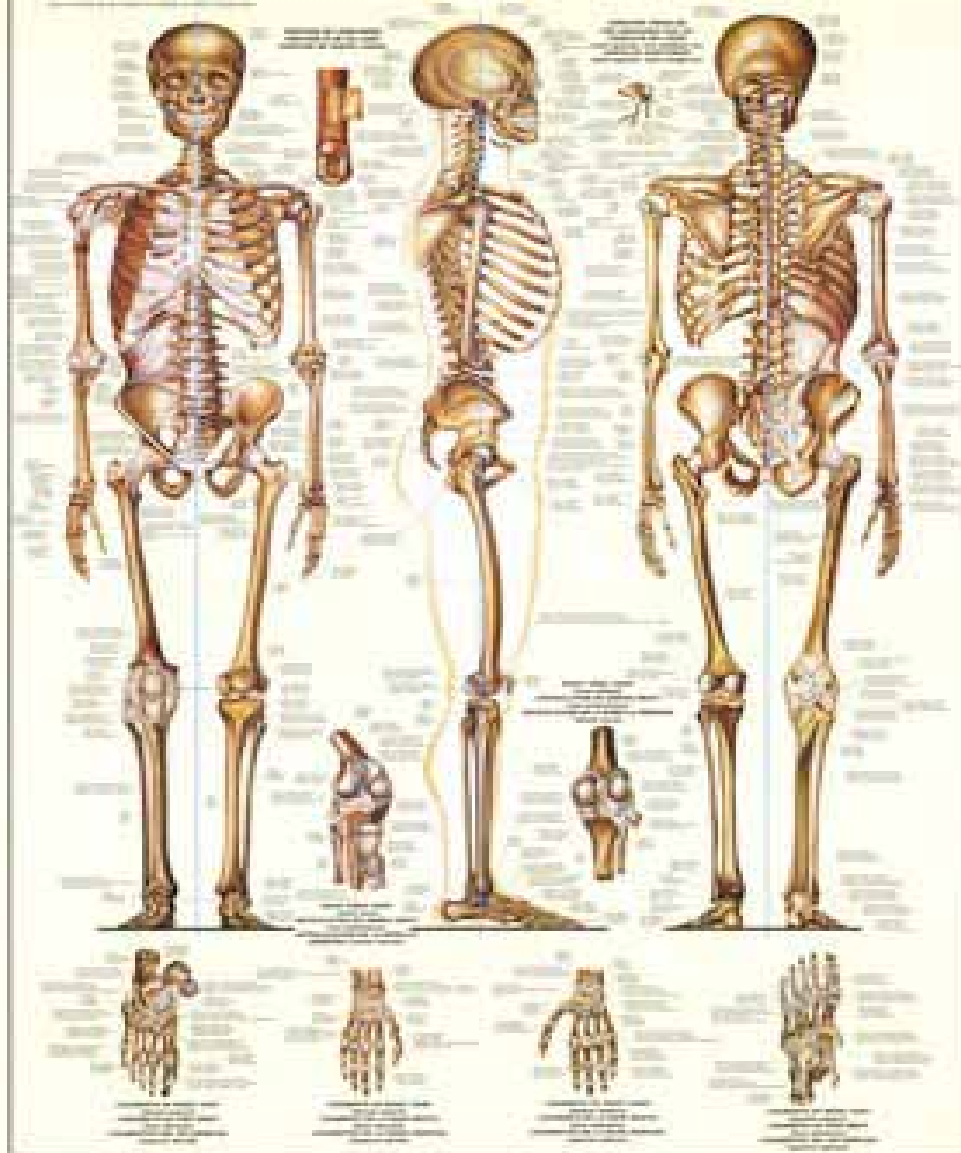
- Objectivity
- Facts
- Replicable procedures
- Universal rules
- Generalizability
- Biophysical understanding of disease

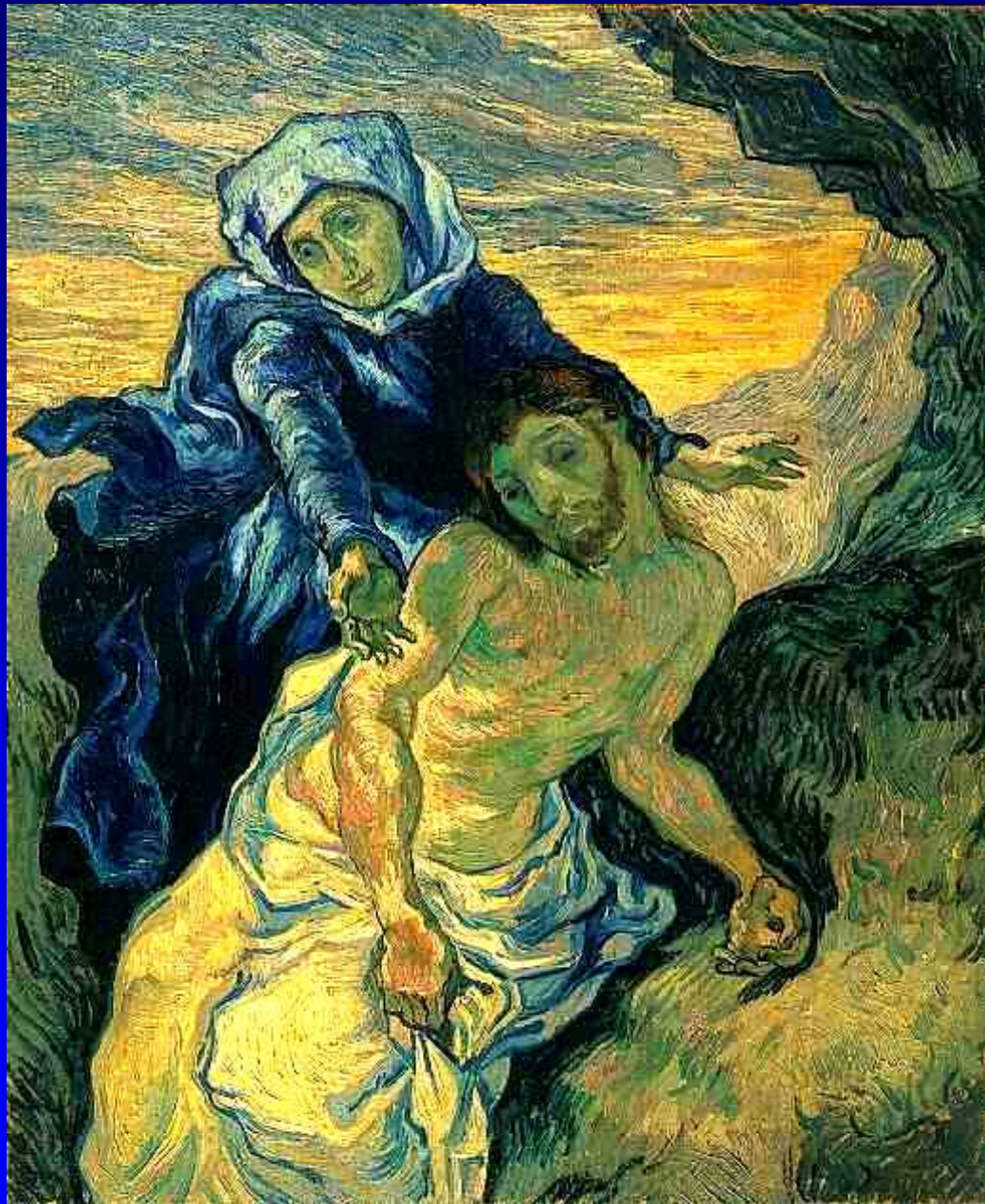
# NARRATIVE

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- Derived from reflecting on and sharing stories
  - How we make sense of experience
  - How we explore questions of suffering and meaning
- Multiple truths can exist simultaneously
- Biopsychosocial/cultural understanding of illness

THE SKELETAL SYSTEM  
LE SQUELETTE  
EL SISTEMA ESQUELETICO





Vincent  
Van Gogh

What is it exactly that  
the Humanities and Arts  
can teach us?



- Pablo Picasso



# Old Folk Proverb

- *Question:*

- What is truer than the truth?

- *Answer:*

- A good story (or poem)

# A Good Poem...

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- Gives insights and teaches truths that mere facts cannot
- Encourages engagement with situations – and people – emotionally as well as intellectually
- Helps us see familiar experiences in new ways

# Walking the Dog

– *John Wright, M.D.*

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She weighed  
Three hundred pounds.  
Fat and high sugars  
were killing her  
I thought.

So,  
I thought.  
So,

I gave her a puppy  
with dark curly hair,  
nothing else  
had worked

Walking the dog  
twice a day  
I thought  
might persuade,  
might motivate.

She was pleased  
with my prescription  
she laughed,  
she rocked  
from side to side.

She lived  
for twelve years  
hugging  
that little black dog  
While her lean husband  
walked it faithfully,  
twice a day.

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**You can miss a lot  
by sticking to the point  
- Hmong saying**

# Enlarging our Perspective

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- Medical education teaches what the point is and how to stick to it
- Sticking to your point may mean missing the patient's point
- Literature and art remind us we can learn a lot by not being so quick to judge what belongs and what doesn't belong in the patient's story

# THE KNITTED GLOVE

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You come into my office wearing a blue knitted glove with a ribbon at the wrist.

You remove the glove slowly, painfully and dump out the contents, a worthless hand.

What a specimen! It looks much like a regular hand warm, pliable, soft. You can move the fingers

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**If it's not one thing, it's another.**

**Last month the fire in your hips had you down,  
or up mincing across the room with a cane.**

**When I ask about the hips today, you pass them off  
so I can't tell if only your pain**

**or the memory is gone. Your knitted hand**

**is the long and short of it. Pain doesn't exist**

**in the past any more than this morning does.**

**This thing, the name for your solitary days,  
for the hips, the hand, for the walk of your eyes  
away from mine, this thing is coyote, the trickster.**

**I want to call, *Come out, you son of a dog!***

**And wrestle that thing to the ground for you.**

**I want to take its neck between my hands**

**But in this world I don't know how to find**

**the bastard, so we sit. We talk about the pain.**

**- Jack Coulehan, M.D.**



**SCIENCE CAN ONLY  
ASCERTAIN WHAT *IS*,  
BUT NOT  
WHAT *SHOULD BE***

- Albert Einstein

# Paying Attention to Values

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- Doctors need help figuring out “what should be”
  - In their patients' lives and deaths
  - In their own lives
- Literature and the arts can help us explore conflicting or competing values in ways that engage our emotions as well as our intellect

# I Stepped Past Your Room Today

- Gerry Greenstone, M.D.

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I stepped past your room today  
Rushed to a crammed office  
Rather than endure  
The eerie calm of Palliative Care  
It's been three days now  
Since I visited you  
And that's not good.

I was there from the beginning  
When we split your belly  
To find cancer  
Erupting everywhere  
The liver's glistening surface  
Ridged and spotted as the moon.

Then came the radiation  
Malignant clusters beamed with cobalt  
Bombarded with pions  
In a cellular explosion.  
And chemotherapy  
Specialized molecules  
To invade you like tissue  
And work their complex chemistry.

But in the end  
Our white-coated arsenal  
Was powerless  
Against the long trajectory  
Of disease.

Now you lie there  
Shriveled husk of a man  
So pale and trembling  
With barely enough weight  
To press against the sheets.

In the harsh glare  
of those white sheets  
I see the impotence  
Of myself as a physician  
Whose energy is aimed  
At cure and renewal.  
Can you understand  
What it means to face you  
Like this,  
Your courage against my fear?

Let me not lose sight  
Of what you once were  
And still are  
A man and a father  
Who did the things fathers do

Watched your daughter at ballet  
Her leaps and pirouettes  
Cheered your son at his soccer games  
Stood shivering in the rain.

To respect your humanity  
To preserve your dignity  
Because if I can hold you clear enough  
There's nothing more to fear.

---

I have always seen medicine as a spiritual path, a way of life that is characterized by harmlessness, compassion, generosity, service, a kind of an awe or reverence for life, a sense of mystery.

- Rachel Naomi Remen, M.D.

# Reminding Us of Awe and Mystery

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- The meaning of medicine isn't science.
- The meaning of life isn't science either.
- Science defines life in its own way, but life is larger than science.
- This takes nothing away from science, but allows us to enlarge and expand on what science can tell us

# Twisted Smile from *Mortal Lessons*

Richard Selzer, M.D.

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I stand by the bed where a young woman lies, her face postoperative, her mouth twisted in palsy, clownish. A tiny twig of the facial nerve, the one to the muscles of her mouth has been severed. She will be thus from now on.

The surgeon had followed with religious fervor the curve of her flesh; I promise you that. Nevertheless, to remove the tumor in her cheek, I had to cut the little nerve. Her young husband is in the room. He stands on the opposite side of the bed and together they seem to dwell in the evening lamplight, isolated from me, private. Who are they, I ask myself, he and this wry mouth I have made, who gaze at and touch each other so generously, greedily?

The young woman speaks. "Will my mouth always be like this?" she asks.

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"Yes," I say, "it will. It is because the nerve was cut." She nods and is silent.

But the young man smiles. "I like it," he says, "It is kind of cute."

All at once I know who he is. I understand and lower my gaze. One is not bold in an encounter with a god.

Unmindful, he bends to kiss her crooked mouth and I am so close I can see how he twists his own lips to accommodate hers, to show her that their kiss still works. I remember that the gods appeared in ancient Greece as mortals, and I hold my breath, and let the wonder in.



# Logico-Scientific and Narrative Knowledge Revisited

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- The pathology report

and

- The human experience

# Pathology Report

**Reason for Admission:** 55 yo white female admitted to XXXX hospital to undergo surgery

**HPI:** Irregular vaginal bleeding; pelvic ultrasound demonstrated a heterogeneous mass consistent with myoma. A 6.3 cm. right ovarian mass was appreciated

**Social History:** She does not smoke and consumes alcohol rarely

**General:** Well-nourished, well-developed female in no acute distress

**Operative Procedure:** Total abdominal hysterectomy, bilateral salpingo-oophorectomy

**Findings:** 8 cm mass that arose from the right side of the uterus; Frozen section of the mass revealed cellular leiomyoma; no evidence of sarcoma at this time

**Final Pathology Report (2 weeks later):**

Morphologic and immunophenotypic features are consistent with endometrial stromal sarcoma

# Waiting

You scream, you rage

It hurts like hell

Morphine gives you a headache

And makes you nauseous

But at least you'll know

Or not

The first pathology report

Is pretty positive

We think you have a

Leiomyosarcoma

(are you kidding?)

Is that a real medical name?

It sounds like a bad country lyric)

Which hardly ever comes back

And which we can't really do much about anyway

So – you might as well forget about it.

But you'll have to wait a week

Till we know for sure.

The bad news is

You might have ovarian cancer

The good news is

You might not

Wait two weeks

We'll do surgery

To find out.

You scream, you rage

You revise your will

But you wait two weeks

Which seem like two years

Then surgeons split you

Down the middle

Peel you apart with retractors

Plunge in, snip and cut

Being a good patient,  
You forget about it for a week  
You have the occasional nightmare  
And the less-occasional panic attack  
(What if it's not country & western?)  
but you wait  
Then they call you with the real path report  
Oops! It's not lie – oh- my-oh  
(Although it was a kind of lie)  
Instead, we think you have  
Endometrial stromal sarcoma  
(this one doesn't even sound fun)  
only it could be either the high-grade  
which kills almost everybody in  
about two years  
or the low-grade, where you have  
a fighting chance  
to stick around awhile longer  
we have to consult with a superlab  
so you'll have to wait two more weeks

You rant, you rave, you sob,  
You are a crazy person  
When the two weeks are up  
They're pretty sure it's the good kind of  
Bad kind  
And they wish they'd known that  
When they did the surgery  
Because they would've done  
A different kind of operation  
But it probably won't affect  
“your outcome” anyway.

**So now you know.  
There is nothing more to wait for.  
When they pass out these diagnoses  
They should pass out the xanax and  
The prozac as well  
They should give you the number  
Of a suicide hotline  
They should schedule you for therapy  
Five days a week  
They should look at your face,  
Look in your eyes  
And say, this is going to be really, really tough  
They should give you a hug  
They should say,  
Call me if you need to cry.**

# So What Are the “Truths” that We Can Find in Literature and Art?

- *They help us remember to...*
- Pay close attention to the richness, particularity, and nuance of patients
- Acknowledge the important role that creativity and imagination play in medicine
- Maintain empathy for multiple perspectives in patient care
- Place patients in the context of their lives; be sensitive to the meaning of patient's experience
- Develop self-awareness of our own psychological processes
- Not to be afraid of emotional connection and engagement with patients (join in suffering)
- Leave room for awe and mystery



# Literature and Medicine

## Elective

- **Use literature to reflect on medicine**
  - anatomy as initiation into medicine
  - becoming a doctor
  - being a patient
  - taking a history
  - doing a physical exam
  - breaking bad news
- **10 short sessions a couple of times a month over lunch**
- **No outside reading - all in-class**
- **Contact: Dr. Shapiro ([jfshapir@uci.edu](mailto:jfshapir@uci.edu))**