LITMED STUDENT FINAL PROJECTS 2014

SYLVIA PINA-PAZ

Sylvia, I am so very glad you made time in your schedule to participate in the litmed class. It was truly a pleasure to get to know you a bit better. Thank you also for your cleverly conceived and insightful final project. (I'm glad you handed it in, as I did not fully appreciate its "layers" when you presented it in class). In a way, it conveyed the same message as the Empathy video Neema and Joyce shared. All we see is that outer person. Anatomy peels back a layer to reveal knowledge that will be essential in patient care. But even deeper than that level, and at least as important, is the person who is the patient. Unless physicians excavate that level as well, they will not be able to provide optimal care. I also really liked what you said about having your "simplistic, idealized" view of medicine changed through the process of medical school. That shift will continue as you become more exposed to the practice of real medicine. The trick is to deeply understand the profession from the inside out, while still hanging on to your idealism and values, what brought you to medicine in the first place! Thank you again, and please stay in touch. I wish you all the best finishing up this year and into the future. Dr. Shapiro

Helen Shin

Helen, thank you for such a moving and insightful poem. It is well-crafted and very wellwritten. Seeing it visually really has a powerful impact. It tackles so well the disturbing phenomenon of how "we" become "them" – how the idealistic person who writes about how doctors should "care more, listen more," becomes the medical student who is too busy to do anything but "run, sprint, and pant." This issue of losing or (more accurately) compromising one's humanity is a pervasive concern in medicine, an occupational hazard unfortunately. As your poem suggests, the only antidote is "walking, breathing, smiling laughing," appreciating nature, shutting off the auto-pilot, opening the heart. Your writing is filled with memorable images that I hope inspired not just you but your classmates to stay the course of being a humanistic and caring as well as a competent physician.

Helen, it has been a special pleasure to have you in class. I hope you continue your involvement with the humanities. Please keep in touch, Dr. Shapiro

Jasmin Harounian

Jasmin, I thought it was very courageous of you to write on the topic of pain, following in the footsteps of one of the greatest American poets Emily Dickinson. Yet a foundational writing adage is "write about what you know," so you chose well (and, as someone who has also experienced my fair share of pain in my life, I'm so sorry that this should be so). Your poem really succeeded in capturing the ineffable nature of pain. I especially resonated to that line, "it comes and goes as it pleases/without/regard." The line breaks here were especially powerful, they conveyed so well just how cruel pain can be – entirely "without regard" for the life that is trying to be lived in its interstices. I also thought the phrase "noticeably unnoticeable" was a wonderful description of the anticipation of pain – the way it can creep up on you, while you are hoping and pretending it is not really there. Jasmin, pain is "a funny thing" and a horrible thing. Pain is such a large part of medicine the bone pain of metastatic cancer, the joint pain of arthritis, migraine pain, peripheral neuropathy, the pain of the drug addict, the alcoholic - yet it is still so poorly understood. I know that your own experiences will make you more understanding of all the pain you will see in your future patients, and better prepared to help them.

Thank you for making the time to take this elective. I wish you much luck in your future studies. Best, Dr. Shapiro

Audris Chiang

Hi Audris, and thank you for your meditation on your 7 year old experience in the hospital, contrasted with your experience as a medical student on rounds. The first poem showed very well the incomprehension, confusion, and fear of that little girl. It also showed how little attention was paid to her, although presumably "patient-centered" medicine means the patient is at the center! Yet, now on the other side, you see how easy it is to ignore or overlook the patient, to forget to listen. But you learned the essential lesson of medicine that will stand you in good stead for the entirety of your professional career – "resolve to do better next time." This means not beating yourself up for imperfections or shortcomings, but seeing them clearly (as well as clearly seeing what will be your many strengths) and then committing to remedying them. Self-forgiveness and self-compassion are essential attributes of the healthy physician – they are what allow you to accept being fallible while you try your best to become just a little bit better.

Audris, it was a delight to have you in class. I wish you much success going forward, and hope our paths will cross in the future. Best, Dr. Shapiro

Lisa Remington

Dear Lisa, thank you so much for your presence in the litmed class. You always contributed such good insights and thoughts to our discussions.

I was deeply touched by your final project sharing your grandmother's journey with lung cancer, even as she continued smoking her cigarettes. I shared your anger and helplessness, especially in hearing how other family members enabled this process. I was touched and admiring that, just as she cared for you as a child, you chose to move back in and care for her. I agonized with you when you wondered, "What if..." and "Could I have done more?" These are the questions many family members – and sometimes doctors as well – ask, and they rarely have clear-cut answers.

I think one of the lessons you learned – so painfully – is that when people are in the grip of addictions they behave in ways that are at times incomprehensible to others. I have seen men at the VA with end-stage emphysema sneaking a smoke next to their oxygen tanks. I have seen women lose their jobs, their families, their self-respect, and still seek solace at the bottom of a bottle. When you talk to smokers about why they keep smoking, sometimes it sounds like they are describing the only thing meaningful in their lives, the only joy they have. I'm sure you have heard that smoking is a harder addiction to break than heroin.

Sharing this story with your faculty and classmates was a brave thing to do and a generous gift. You helped us see that what seems straightforward (have lung cancer? Stop smoking!) is complex, overwhelming, and sometimes not possible. What seems easy from the outside can be impossibly hard from the inside. We'd prefer not to recognize this, but it's how things are. Knowing this will make you all better and more compassionate physicians.

I wish you all success as you proceed through your medical training. I hope our paths continue to cross. Best, Dr. Shapiro

Cody Bryant

Thank you for sharing with us about your sister, and the poem that means so much to her. I am *so* glad you brought to our attention the issue of "normalcy" and disability. This happens to be a special interest of mine, and sometimes I devote a session of litmed to this topic, but we just didn't have time this year – so thank you! You did a great job of reminding us that diseases have medical implications, but for the person with the disease they also (almost always!) have profound social implications. The world can be cruel to people who have differences (although I believe this is changing, and perhaps your sister will be the beneficiary of greater awareness of disability issues). Even physicians can make many unwarranted assumptions about persons with disabilities. By sharing your personal story, you got us all to think more critically – and more empathically – about what "normal" really is.

Cody, it was a real delight to have you in class. I was grateful for your perfect attendance, and more grateful for your thoughtful engagement with our readings and activities. I wish you the best of luck as you proceed with your studies. Please don't hesitate to get in touch if I can ever be of any help, or if you just want to say hello. Best, Dr. Shapiro

Mark Lin and Bao-Nhan Nguyen

Dear Ben and Mark, what an inspired collaboration! First, as I mentioned in class, Raymond Carver's poem is a classic in medical humanities circles because it is so ambiguous and open to multiple interpretations (kind of like life). Is the doctor caring or insensitive in his language? Is he right or wrong to bring up religion? Is the patient truly thankful or simply in shock? Of course, these and similar issues don't have straightforward answers. But what you do see is a physician and a patient in the late 1980s authentically wrestling with a terminal diagnosis. Ben, thanks for sharing your insights, and leading such a good discussion of this complex poem. Just fy, this poem is inscribed on Caver's gravestone:

LATE FRAGMENT And did you get what you wanted from this life, even so? I did. And what did you want? To call myself beloved, to feel myself beloved on the earth.

A good reminder of what, ultimately, we all seek.

Mark, your drawing of the figure (lonely? Independent?) and his shadow really captured the spirit of the poem. As you said, illness casts a large shadow, enveloping a person life. But, as you also pointed out, people have a choice about how they respond. They can walk away, or they can walk toward. I was caught off-guard that I hadn't grasped that ambiguity in the sketch. What a great question you asked all of us!

Thank you both for your participation in this class. Aside from your perfect attendance (no small feat!), you active engagement and thoughtful comments really made a great contribution. I wish you all the best as you move forward in your education. Dr. Shapiro

Sarah Smith

Sarah, I really appreciated your sharing your reactions to anatomy class. It was very interesting to learn your background – I will not soon forget the image of tiny Sarah swaddled in too-big scrubs watching her father operate on different animals. No wonder dissection did not seem horrifying to you. Your essay was a valuable reminder of the discussion we'd had earlier that there is no "right" way to respond to anatomy. Some students are fascinated, some are disgusted, some are guilty. Some see the cadaver as "their first teacher," some see it as a "learning tool." Most people don't feel "just one way" about the experience. Their feelings shape-shift over time.

Interestingly, however, the universal feeling is one you emphasized – gratitude. In the end, no matter what their feelings, students recognize that they have received a great gift from the donor, and they commit to using it for the benefit of future patients. They are filled with gratitude and they commit to learning. You have to do difficult things in medicine – inflict pain, deliver bad news, care for demanding or unappreciative patients. Having an overarching attitude of gratefulness for the privilege of being a physician and learning from *every* patient encounter will go a long way toward carrying you through it all with grace and even enjoyment.

Sarah, I was very glad to have you in this class. Thank you for the efforts you made to attend when I know you had a lot to juggle and for your interesting and well-reasoned comments. I wish you all success in the demanding but rewarding path you've chosen. Best, Dr. Shapiro

Neema Pithia and Joyce Sutedja

Hi Neema and Joyce, what an inspired idea to share the Cleveland Clinic empathy video. It is such a wonderful reminder of all the stories that exist behind the "patient" "doctor" "med student" "nurse" "family member" facades that we carry around in hospital and clinic. There is the role we see – and then all the other roles that are also carried. As you said so well, the whole video is simply an exercise in thinking about others. We can't know everyone's story, especially not in depth, but we can make an effort to glimpse the broad outlines. When we can't even do that, we can at least give them the benefit of the doubt. Difficult life circumstances do not excuse bad behavior, but they can make it more understandable. I especially liked the comment of all these people "meeting at the crossroads." Crossroads is an especially apropos metaphor for a situation that for many can be life-changing. I'm so appreciative your classmates had a chance to view this wonderful reminder.

Sending you all good wishes for the remainder of this year and beyond, Dr. Shapiro

<u>Diana Zhu</u>

Dear Diana, I loved your haiku. And, as many of your classmates commented, the presentation was really original and involving. It was fascinating to see each line emerge, almost as if you were composing them in real time (obviously, you put a lot more effort into them!). You are a good writer – you had many indelible images ("donning the white coat over our sins" stands out). You grappled with many core challenges in medicine, for example, the fact that patients don't understand all that goes into becoming (or being) a doctor. We talk quite a bit in medical education about trying to understand the patient's world, but it is also true that the patient usually has very little understanding of the doctor's world, and these mutual deficiencies of understanding can complicate the clinical encounter. Another issue you raise is how flawed and imperfect beings can have the audacity to try to heal others. I'd encourage you to read a bit of Henri Nouwen's The Wounded Healer. Although written for Catholic priests, it has some interesting ways of framing how we serve others.

It was a pleasure to have you in class Diana (thank you for your perfect attendance!), and I wish you much success as you proceed through medical school. Dr. Shapiro

<u>Neil Saez</u>

Dear Neil, as Dr. Nguyen said, your video was really impressive from a technical, craft perspective. The visuals, the voice-over narrative – everything combined to make an emotional powerful and affecting experience. It reminded me of those quotes about "roots to grow and wings to fly." You shared with us an important dimension of your life that has given you roots; and simultaneously offered wings to fly into your future as a physician. The video movingly captured the life force in these kids, even while facing difficult circumstances. As I understood it, one of the questions that you were asking was, how can you sustain the life force of love, joy, hope in yourself, so you can kindle it in others. Estado 29 is at least part of your answer.

I also enjoyed your essay on the CHC (I also loved Field of Dreams!). Perhaps the line should be revised in this way: "If they build it, they will come." In other words, if all stakeholders are involved from an early stage, the end result is more likely to be meaningful to everyone. This means the residents of a given community, the businesses and local government of that community. As you skillfully point out, it also means the people who work in the CHC. Sometimes these are individuals living in the community, but especially in the case of the doctors, they are people *driving* into the community (then driving home). As such, it may require more for them to see their involvement as more than a job. But with careful planning, a CHC can be a place of positive wellness (zumba sessions, cooking classes, health literacy training, counseling) as well as a place to treat illness.

It was a delight to have you as part of this class, Neil. You were always actively involved in discussions, and I found your comments to be consistently perceptive and sensitive. I predict you will be an outstanding physician. Much success in completing the year. I hope our paths continue to cross in the future. Best, Dr. Shapiro