

“Take Two Poems and Call Me in the Morning”: Poetic Remedies to Soothe Physician Stress and Burn-Out

**Johanna Shapiro, Ph.D. Orange County Association of Family Physicians
August, 2005**

I. INTRODUCTION

- A. Thank you for inviting me here today.**
- B. It’s nice to see some familiar faces. Some of you are colleagues at UCI; a few of you are former residents, which makes this opportunity particularly delightful for me**
- C. For those to whom I am a stranger, let me just say that I am a psychologist by training, and have spent almost 30 years in the UCI Department of Family Medicine, teaching about the doctor-patient relationship. For the past 8 years have directed a program in medical humanities at the UCI School of Medicine, which uses literature and the arts in medical education to help students develop empathy and compassion for patients. My special interest is poetry written by patients, and poetry written by doctors, and it is this latter – the poetry of physicians - that I’ll be talking about today**
- D. Before getting started, I want to say that I do realize not everybody loves poetry. In fact, when I thought about this talk, I remembered a cartoon I’d seen several years ago in the *New Yorker*, in which a bunch of guys in ski masks, wielding weapons, burst into a crowded bank. The caption read: “Everyone stay where you are, and no one will get hurt. We just want to read you some of our poems.”**
- E. I hope that what follows is not too painful for any of you, and that by the end nobody will feel held hostage – by a poem.**

II. POETRY AND MEDICINE

- A. Despite the widespread suspicion with which many people regard poetry, it is in fact the case that surprisingly, medicine and poetry share some things in common**
- B. For example, what are some commonalities between doctors and patients?**
- C. If we think about doctors and poets, we realize that both:**
 - 1. confront mortality and death**
 - 2. create order from chaos**
 - 3. seek to provide relief from suffering**
 - 4. are concerned with healing**
 - 5. combine emotional distance with emotional engagement**
 - 6. There is a venerable history of physician-poets, including Keats, Chekhov, Somerset Maugham, William Carlos Williams, and many contemporary physician-poets as well**
- D. There are also interesting similarities between patients and poems: Can you think of any offhand?**

Stone-poems
full of slippery
words, but then
so are patients

E. Both –

1. should evoke intense feelings when we encounter them, as opposed to a purely intellectual appreciation
2. are sometimes mysterious, allusive, and indirect, rather than straightforward and easy to understand
3. pack complexity and multiple meanings into a small space (the 10 minute visit, the 14 line sonnet)
4. require careful, empathic attention to truly understand

III. PHYSICIAN STRESS AND BURN-OUT

A. I spend most of my time teaching medical students, but I think poetry may have most to offer the physician in practice

B. For many of us in our careers, and although I'm not a physician, I speak from personal experience...

1. There comes a point where we long to pause and take a breath
2. When what used to invigorate and uplift us seems quotidian and boring
3. When our work, and perhaps our lives as well, lose a little of their luster, and maybe their meaning ~~as well~~

C. Maybe it's not exactly burn-out (SLIDE)

D. But in the words of Dante Alighieri

Midway in the journey of our life
I came to myself in a dark wood,
For the straight way was lost
the opening lines of the Inferno.

IV. HOW CAN POETRY HELP?

A. There are plenty of strategies to address ^{physician} stress and burn-out

- stress management and relaxation techniques
- efficiency restructuring
- cognitive reframing
- communication skills
- these are, for the most part, very helpful

B. I would like to suggest that poetry may be of help as well... but how?

C. Poetry can't cure your patients' diabetes or cancer

D. Poetry can't hire good staff or straighten out billing problems

E. Poetry can't find a way out from under the masses of paperwork

F. Poetry can't fix the ills of the current healthcare system

V. SO WHAT GOOD IS POETRY, REALLY?

A. Poetry can help us reflect on our professions and our lives

B. It can help change the way we see things, the way we *understand* things

C. It can help us transcend the suffering of our patients and our own

D. In doing so, poetry may help us heal

VI. WHAT DOES POETRY HAVE TO OFFER THE BUSY CLINICIAN?

- A. Poetry has some unique things to offer busy clinicians who may feel at times that, like Dante, they too have lost their way:
- B. It's short – 19th c., medicine was more slow-paced and doctors had time to sit around and read 1000 page novels by Dickens or Dostoyevsky; now we have the 10 minute hour, and a 5-7-5 syllable haiku may just hit the spot (SLIDE)
- ~~C. It doesn't have to be inaccessible or confusing~~
- D. Its reliance on metaphor and imagery stimulates our own imagination and creative thinking *helps us see many ways of looking at things*
- E. Its ambiguity encourages multiple interpretations that
 - restimulates our curiosity about people, things, the world around us
 - reminds us to feel genuine empathy for other voices and other perspectives
- F. Poetry often is concerned with questions of suffering and meaning, things at the center of medicine but hard to access in textbooks or many CME talks
- ~~G. Poetry encourages sensitivity to the meaning of the patient's experience of illness, and to the physician's understanding of that meaning~~
- H. Poetry helps us develop emotional connection and engagement with ourselves and with others
- I. Its unique perspective can help rekindle a sense of awe and wonder both in terms of our professions and our lives
- J. All of these qualities are powerful antidotes to the feelings of stress and disillusionment that can occur in practice

importance of creativity, by imagination in practice
learning to be comfortable w/ ambiguity to listen carefully to other voices essential in good diagnosis

VII. WHAT DO PHYSICIAN-POETS WRITE ABOUT?

- A. Physicians write pretty much about everything; they write about all the things that perhaps they don't talk about readily with colleagues
- B. They write a lot about their patients, the ones they love and the ones they hate, the ones they can't forget about
- C. They write about their addictions, their own illnesses, their loneliness
- D. Their fears, limitations, mistakes, and guilt
- E. They write about their families
- F. They write about the joys and sorrows of their profession

VIII. WHAT CAN POETRY BY PHYSICIANS TEACH US? *Specifically?*

- A. Old Folk Proverb
 1. Question: What is truer than the truth?
 2. Answer: A good story (or poem)
 3. A good poem can give us insights and teach us truths that mere reality cannot
 4. I don't have time to share all the "truths" that poetry has to offer, but I would like to share a few examples

5. These are all poems by physicians, about the practice of medicine, and they are a good place for physicians to start in the exploration of poetry; but they are by no means a place to stop.
 6. There are wonderful poems written by patients, from which we can learn to enter more deeply into the patient's experience of illness
 7. And there are of course just wonderful poems generally
- B. Poetry by physicians can help us see familiar clinical experiences in new ways ("Walking the Dog")** *berry diabetes - residents*
1. There are a few things I really like about this poem
 2. One is the commitment of this primary care physician to his patient – he is obviously worried about her, he thinks about her, and he comes up with an out-of-the-box solution to help solve her medical problems
 3. The other thing I like is that the solution doesn't work, at least not the way the doctor thought –
 4. But the final beauty of the poem is that the doctor's gesture toward the patient does work because it expresses his love and caring
 5. Wright's poem helps us accept that patients do not always follow the doctor's directions precisely; but also helps us see that, within a context of care and commitment, things **usually** *3 medicines* work out *better than we could have hoped*
- C. Poetry can help us resolve frustrations with difficult patients ("The Knitted Glove")**
1. Jack Coulehan, a professor of internal medicine at SUNY, has written several poems about this patient, who apparently often *drove him to distraction*
 2. In this poem, he describes the patient's migrating pain and his helplessness in the face of it
 3. He acknowledges his desire to use aggressive interventions (wrestling the pain to the ground and slaying it), but also sees the futility of such an approach
 4. Ultimately, he recognizes that all he can do is be present with this difficult patient – and listen to her story
- D. Poetry can help us be reinspired in our work and our lives ("Night on Call")**
1. Rita Iovino wrote this poem after a night on call
 2. In the poem, there occurs a moment of grace – the gift of a minor epiphany when the ordinary burdens are lifted and the narrator remembers why she does what she does
- E. Perhaps most miraculously, poetry ("I Stepped Past Your Room")**
1. Allows us to face our own vulnerabilities and limitations
 2. Gives us the courage to continue to care for others
 3. Helps us find the grace to forgive ourselves

4. In this poem, the family physician commits a cardinal error – he emotionally abandons his patient, he avoids entering the room of a dying patient

5. Yet by reflecting on his avoidance, by reflecting on the person of the patient with whom he has taken this terrible journey, he is able to move past his own fears and, as so often happens, find solace in the courage of his patient

6. The phrase I like best is this line, “If I can hold you clear enough...”

7. To me, this sums up the meta-task of the family physician, in life and in death, to “hold,” to contain the patient clearly and lovingly

6. In doing so, the physician is able not only to avoid abandoning the patient, but to avoid abandoning himself

IX. WRITING POETRY?

- A. I haven’t even mentioned the possibility of writing your own poems, as a way to make sense of your lives, as an act of healing
- B. I suspect some of you already are either closet scribblers, or out-in-the-open poets. If so, keep writing!
- C. Others may be contemplating taking pen to paper, and if, do it, try it.
- D. Finally, there may be some of you thinking right now that this “poetry thing” just doesn’t speak to you, and that’s all right; poetry is not for everyone
- E. What everyone needs is not necessarily a poem, but a way of re-inspiring their lives and re-finding the meaning in their work. This is what you must find

X. THE DOCTOR

- A. I’d like to close by showing a final slide, not of a poem, but of a famous painting
- B. This is The Doctor, by Sir Luke Fildes, a successful painter of royalty and high society in 19th c. England
- C. The painting is based on a real-life event in the life of Sir Luke, when his young son fell ill with typhoid fever.
- D. As you can see, the physician sitting at the side of the child is portrayed as a person of integrity and caring
- E. What has always intrigued me about this painting is that the outcome in this case was not a happy one – the little boy, the precious son of the painter, died. Yet instead of suing the physician, Sir Luke painted this portrait of gratitude and respect
- F. To me, it is an emotionally compelling reminder of what lies at the heart of doctoring – connection between doctor and patient and family.
- G. Like all good art and literature, it helps restore our faith that it is out of this connection that the art of medicine emerges.

and joy

XI. CONCLUSION

- A. Cause us to reflect on our lives**
- B. Reinvigorate our daily pursuits which have become dull and even oppressive**
- C. Provide patience and insight into situations and people who we find frustrating and exasperating**
- D. Remind us of the joy and meaning to be found in the practice of medicine**
- E. Allow us to forgive ourselves and seek forgiveness**
- F. In these ways, poetry can reconnect us to the heart, and art, of doctoring**