

PEDIATRIC HUMANITIES ASSIGNMENTS COMMENTS 10/03

Hi --. Thanks once again for sharing your feelings as well as your words. You took the risk of allowing yourself to be emotionally vulnerable to the tragedy of innocent suffering and death. Good for you. Your poem really gets close to what it might be like to have a disease like MD, and that is a tough thing to look at. But it's a harder thing to live, and I think perhaps we owe it to our patients not to turn away from what they can't turn away from. It's also the case that sometimes we cry about a particular patient, and sometimes that patient opens the door to all the pain and difficulty in life, and we cry about that too. I hope you always have the courage to let others see your heart, including your patients and your colleagues. You were a great role-model for all of us.

Hi --. I'm glad to see you're still keeping up your interest in literature. I loved your little skits – they were clever and perceptive. You know, the amazing thing is that those various conflicting point-of-view agendas that you captured so humorously really are in operation during almost every patient encounter. It's something to think about!

--, you picked a poignant and emotionally very painful topic to highlight. You were absolutely right to emphasize the importance of patient (parental) education in this area of child safety. The other aspect of this story that made it so unnerving is that secretly we all like to think these things can't happen to us- because we're educated, we're conscientious, we're good parents, whatever. The tragic situation of this university professor brings home that no one is immune from making mistakes with terrible consequences.

Wow! I loved this photograph, it works on so many levels. And your interpretation of it, to help us understand the metaphor of health as balance, was elegant. Thank you for reflecting so deeply on this point. You are probably aware that many CAM philosophies overtly incorporate the idea of physical, emotional, and spiritual balance as essential to good health. I also admire that you took the emotional risk of trying to imagine yourself in the position of the parents whose kids you cared for. That can be a scary and painful exercise, but it can also help you maintain a caring attitude when parents behave in difficult ways. I hope that, no matter what specialty of medicine you go into, you'll

always remember that the families of the patients also are suffering and in need of your compassion.

--, although I'd read your essay in Plexus, it wore well on a second exposure. I formed a really sweet picture of you and your wife and X washing the dishes. Now, whenever I teach medical students, I will superimpose that teaching onto this other image of X and the dishes. I hope it will make me a better teacher! The other thought that occurred to me is that, in a family, the best teaching occurs when it stems from a context of love and caring. Ah, something to think about for UCIMC!

Hi --. Nice to see you again. I hope you are surviving – even thriving? – in third year. Your sketch was really funny. All the errors we make in communication – in other languages, and not infrequently in English! Thank goodness at least a few of them are humorous. I also enjoyed the way this example gently reminded us that, although the physician is an impressive and knowledgeable figure of authority on his or her own turf, in a bewildering, unfamiliar environment, he/she can be pretty awkward. Might give us a little more empathy for what our patients experience every time they come to the hospital. A cute project that makes a deep point!

--, as always, I so admire your passion, your commitment, and your tenacity. I'm glad I got to hear your presentation on nurse-interpreters. As usual, you got it exactly right, and brought to the attention of your peers an intriguing study with direct, daily clinical relevance. Plus, your poem was really good. When you reversed the image of the child interpreter, it hit home in a very visceral way what a morally wrong situation this is. Keep up the good fight, it is doctors like you who will make a difference.

Hi --. Nice to see that you survived me and Dr. X ☺, and are well-launched into third year. I liked the personal story you found of the kid living with HIV. The internet has been an effective way to bring us many previously unheard and unimpovered voices, especially those of seriously sick children. This essay is like hundreds of others I've read written by kids: it states in simple yet poignant language how frightening and confusing it is to be sick. That's a message we should all be able to relate to.

--, you did a great job with this project. Your poem is really well done, witty, and it even rhymes! You captured a truly unique point of view – that of baby Jesus, remembering that in addition to being the Son of God (at least in some eyes), he was also the son of Mary and Joseph. Your poem (like the attached) is a beautiful and touching way to humanize the Christ child. Hope you enjoy this one as much as I enjoyed yours.

The idea of having us sit in the dark for 24 seconds was inspired – very creative, and an extremely effective way of making your point. It was a wonderful topic to address, one that we rarely pay attention to: how much uncertainty, lack of understanding, and “darkness” surrounds our patients and their families. From this realization we can learn two lessons: 1) We must make sure that we do what we can to provide clear and *meaningful* explanations to patients 2) We must be willing to “be with” our patients when their “darkness” is unavoidable and cannot be lifted.

Hi --. Thank you for your cute essay on how language intersects with health care. It made delightful use of self-deprecating wit. We need reminders of our limitations to keep us humble! And you’re right that, if you keep on stumbling along, with persistence, humility, and good humor, you’ll be pretty fluent at the end of three years. You express a great attitude and a big heart.

--, this is a very well-observed and well-written essay. It tells us something important both about the resource limitations that confront the health care systems of so many other countries, as well as the ingenuity and determination of the medical staff who chronically labor under such conditions. I hope somehow you can figure out how to get Dr. X those Jamshidi needles.

--, thank you for tackling the very emotionally traumatic and all-too-frequent occurrence of child drownings and near-drownings. Your poem helped us feel something of what a terrible tragedy this must be, and the statistics you cited I’m sure reinforced the commitment of your peers to adequately educate parents on this issue.

--, I very much appreciated your comments expanding the definition of “who’s got culture.” One of my favorite docs over at FHC always tells our residents to approach every patient interview as a cross-cultural encounter. I’m glad you had the courage to speak out of your own experience to remind us that social injustice is directed against all ages and colors. I’m also glad you’re able to draw on that experience to help you understand the fears, frustrations, and confusion of parents who don’t have the “social capital” to easily navigate the dominant society’s norms and conventions, including those of the health care system.

--, thanks for sharing this story with all its complicated nuances. It sounded like in this one encounter you saw both the best and the worst in medicine. The best is that medicine gives you the privilege of making amazing (although not always simple) connections with other people at difficult, but core, moments of their lives. The worst is that you will encounter limitations all the time in medicine – sometimes of your own skill and knowledge, sometimes of the field itself, sometimes because of societal inequities, sometimes because of patients’ (or your own) ignorance or indifference. Medicine, like life, is often bittersweet, but the ability to care and reach out to others is never futile. Thank you for sharing so thoughtfully and insightfully, --. Regards, Dr. Shapiro P.S. I very much hope your father is doing better. It can be especially difficult for people in medicine to see their loved ones struggling with serious disease, because they can feel a special responsibility to guarantee a positive result. If they can’t save the ones they love, then medicine may well seem, as you say, a futile exercise. I’d like to believe that, although doctors can’t always control the outcome of illness events, they can always contribute a dimension of healing to the suffering of their patients.