

PEDIATRIC HUMANITIES FEEDBACK 8/03

Hi -- and --. Thank you for the effort you put into creating your pediatric humanities project. You came up with a deliciously ironic title, since this case of possible child abuse was in fact far from “black and white.” Your comments on the ambiguities and complexities of the case were both thoughtful and insightful. Finally, choosing to explore this difficult topic through the format of a photo album – usually associated with positive, pleasant memories – was another excellent way of underscoring that the documented “facts” may not always lead us in the direction we expect. Nice work, you two! Thanks for your participation. Dr. Shapiro

--, you chose a really important pediatric topic, as childhood obesity and its attendant medical complications are mushrooming. Your flow-chart is comprehensive and helpful. Equally important to having a plan of action is to have a plan of “attitude.” In other words, no matter how efficiently it’s mapped out, weight loss is a long-term challenge, and the physician must also bring an attitude of patience, flexibility, encouragement, tolerance, and hope to support his or her patient. Regards, Dr. Shapiro

--, I really liked the issues you raised in the commentary accompanying your sketch (the sketch was cool too – it reminded me a bit of the surrealist art where incongruent images are juxtaposed: what is a child doing with a detachable skull? And why is she surrounded by fish?). In a way, you’re asking what makes a person a person. (If you’re ever interested in exploring this question further, take a look at Oliver Sachs, *An Anthropologist on Mars; The Man Who Mistook His Wife for a Hat*). You’re also still seeing medicine with fresh enough eyes to be struck by the mysteries, scariness, and incongruities. Your eyes will adapt, and all that you describe will begin to seem normal and routine, which is okay. Just remember to the patient, it’s always strange, frightening, and surreal. Good work! Dr. Shapiro

--, your point of view poem from the perspective of a peds patient was lovely. The way I read it, it gives voice to the trust patients place in their physicians. It sees beneath the cries, kicks, and screams (typical not only of kids, but also of a lot of adult patients, at least metaphorically, when they get sick) to the gratitude for the steadiness, attentiveness, and caring of the physician. It’s not the kind of thing many kids express (or adults for

that matter), which makes it particularly important that you made it explicit. Thank you, --. Dr. Shapiro

I'm still laughing! Your pediatric "monologue" was simply hilarious, and your delivery, impeccable. Thank you for such remarkable creativity. On a serious note, you proved that, with sufficient empathy, it's possible to enter into the world-view even of a newborn. Don't lose this ability, it's precious. Great job! Dr. Shapiro

Hi --. I was so pleased you chose to explore the parent perspective in your humanities creative project. It's interesting how parents are often perceived as the enemy on pediatrics. Sometimes parents are indeed difficult, but usually it's a case of worlds colliding. By being willing not only to think about the mother's experience, but actually speak in her voice, you allow yourself to both understand and sympathize deeply(although not necessarily to agree) with her concerns. In my experience, outstanding pediatricians have learned to effectively balance the best interests of their patient with the fears and needs of the parents. Your project was a great way of reminding your classmates of this lesson. Thank you! Dr. Shapiro

--, your reflections on both the joys and tribulations of pediatrics was an excellent way to "memorialize" significant events in your journey toward becoming a physician. Believe me, as your career progresses, the ability to pay attention to such "key" occurrences will become more, not less, important in helping you stay in touch with the meaning of doctoring. You are clearly a sensitive and astute observer into the heart of medicine. Thanks for sharing your thoughts. Dr. Shapiro

--, thank you for your lovely essay on the joys of parenthood. You took a risk in commingling the worlds of parent and physician, and I commend you for it. Doctor and dad are not separate spheres; each influences and informs the other. You beautifully modeled for your classmates how the personal is the professional and vice-versa. This ability to be a person as well as a physician will be greatly appreciated by your patients. You also are clearly a sensitive and aware father. Good luck in your doctoring career, and continue to enjoy and appreciate your little son. Regards, Dr. Shapiro

Hi --. I really liked the way you recognized that being the kind of doctor you want to be is partly a matter of conscious choice. It's easy and understandable to feel exhaustion, boredom, frustration, as well sometimes even more problematic emotions – anger, disgust, dislike. These are normal human emotions, but when we indulge them they can leave us cynical, burned-out, and hostile. You've created a wonderful mantra for the rest of your professional life – simple to remember, amazingly hard to implement: “View *each new encounter* as an opportunity to learn something new.” If you continue to follow this wisdom over the course of your career, you'll be a great physician. Regards, Dr. Shapiro

--, thanks for a poem *and* a sketch! They were both touching and evocative. You're asking such good questions, especially the importance – and difficulty- of honestly looking down the road into the unknowable future. I don't know how to answer your question, but I think it is possible to get so caught up in the possibility of action that we don't pay enough attention to the implications of that action. Parents in particular may be particularly vulnerable on this point, and we have an obligation to help them understand where their choices may lead. Your work raises really good issues in a thoughtful and feeling way. Regards, Dr. Shapiro

Dear --, you used the creative project to really reflect on what parents (and patients too!) understand about the diagnoses – and the implications of the diagnoses – that we throw at them. You ask so many sensitive, and ultimately unanswerable, questions! But that's okay – good doctoring is as much about questions as answers. And the more you are able to intuit the questions that lie unasked in the hearts of your patients and their families, the more you'll be able to support and comfort them. Very perceptive and thoughtful. Regards, Dr. Shapiro

Hi --, thank you for providing a voice for little X. What a heartbreaking story she tells! I'm glad you chose to reflect on her plight because it showcases the insoluble dilemma of undeserved suffering. Everything you write about is so unfair... except the kindness and caring shown by the medical staff. What you describe is what the essence of doctoring is all about. Nice work. Dr. Shapiro

Your thoughtful, honest essay addresses a pervasive risk of medical training – the deterioration of caring and compassion in the third year. As we discussed in class, the way to counteract this danger is, first, through awareness; and then by developing counter-measures which reconnect you emotionally to your patients. In the situation you described, you accomplished this by praying with your patient. Prayer in its literal sense may not always be the answer for every patient, but finding ways to comfort and sustain all patients is never misplaced. The conclusion of your essay is simple, yet profound. Emotional detachment may seem to protect you in the short run. Over time, it will lead to dissatisfaction and burn-out. Risk emotional connection with patients, and you will rediscover not only their humanity, but your own as well. Thanks, --, for bringing this important issue to our attention. Regards, Dr. Shapiro