PEDIATRIC HUMANITIES PROJECTS 4/21/06

Hi --. Just wanted to say again that I loved your project and I hope your little son does too. Turning a traumatic hospitalization into a manageable, even humorous, story is a great way to both revisit and to heal. Too bad about the little bear --, but on balance it sounds like he more than served his purpose. Thank you for participating. Dr. Shapiro

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Hi --. How nice to cross paths with you again. It's hard to believe you're already a third year (almost 4th!). I liked the complexity and symbolism of your project. The baby was both neglected yet poised on the edge of hope. The crib was a jail and an unfolding flower. The mother was withholding, but herself broken (unintended symbolism, but symbolism nonetheless!). The way you used your art to process this difficult and distressing encounter was quite impressive. Thank you for coming through once again with a project that provoked much interest, thought, and reaction. Best, Dr. Shapiro

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Terrific poem, --. I wanted to say this in class, but we were running out of time... in any case, I found the whole "transgendered" imagery very powerful. It's a unique insight into another aspect of childhood obesity, especially among boys. The mother's simultaneous enabling and cry for help I also found credible. That's how people are – complicated, inconsistent, even irrational. Finally, the last stanza was a kicker. It suggests both that the little boy *does* have a voice, *does* have feelings about his obesity, but is prevented from even participating in the discussion because of the food that is inhibiting his life in so many other ways as well. You remain a fantastic writer, --. Thanks for sharing this work. Best, Dr. Shapiro

Hi --. I thought it was very tactful of you not to mention the humanities project when Dr. X asked you for surprises and differences between the U.S. and Norway ②. This session may have seemed a bit strange, and I appreciate your participating and doing such a nice job. Your poem was saturated with concern and kindness for your little patient, and his terribly tragic situation. No wonder it was hard to leave him behind when your shift in the PICU ended. As I mentioned in class, I liked the way the poem the poem asked all the hard questions, and didn't provide any easy answers. Medicine isn't always about giving answers. It is also about being able to tolerate the pain of questions that have no answers.

I hope you've enjoyed your time here. Much good luck on your path toward becoming a physician. Dr. Shapiro

--, thank you both for your poems, and for your observations about the American health care system. You are so right that the ones who will truly suffer from our neglect of the planet are the children, the ones who will inherit our mess. I hope your classmates were listening!

Your other poem was really cute. Kids think it's fun to be sick because they think of all the indulgences they get. But when they're actually sick, all that fun stuff doesn't seem fun any more. You know, I've occasionally heard harried third year students wish they could change places with their patients in order to get three square meals a day and as much sleep as they wanted. Like your poem, it's worthwhile to remember that no matter how hard it is to be a medical student, it's worse to be a patient. Thanks for participating in this project. Dr. Shapiro

Hi --. I remembered your song (about God and faith) from last year, so I knew you'd come up with an interesting take on this project and you did not disappoint. Your conceptualization of the circle, and who is inside and who is left outside, is insightful in its honesty and simplicity. Most of us draw those circles, even though we're not always aware of it. I don't think it is about caring equally exactly – I don't know that that is possible. But thinking back on the faith you mentioned before, I wonder whether it is not about learning a kind of love for *all* our fellow human beings, no matter how weird or mean or incomprehensible they seem. It is from that foundation of *agape* love that we can begin to learn how to demonstrate more care for people whom we initially define as "the other" and therefore unworthy of our caring. Please don't mistake me – this is a task that probably takes a lifetime, and the first step is recognizing that the circle is there. Thank you for sharing. Dr. Shapiro

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Hi --. You did a very interesting project. Most of us, myself included, probably don't have much respect for teen magazines. By actually looking inside one, you were able to rid us of some of our stereotypes and demonstrate that such magazines can serve an important function by reaching that notoriously hard to comprehend population – the adolescent girl © - regarding various health care topics of significance to teens. I also liked learning about your family tradition of passing *Seventeen* magazine from mother to daughter. Once again, your research proves that usually, mom knows best! Thanks very much for participating in this exercise. Dr. Shapiro

Hi --. Sorry you couldn't be with us today, but thanks for turning in your haiku. I wonder if you discovered what many poets already know – it's hard than it looks to write haiku! In any case, yours is very good. It reminded me of many kids brought into clinic – not that sick (but doing his or her darnedest to get the hapless medical student as sick as possible), pretty happy about an outing with mom, but going stir-crazy after close to an hour in the tiny exam room (maybe a little ADHD thrown in?). Ah, pediatric outpatient... nothing quite like it, especially in terms of getting sprayed with every imaginable byproduct of the human body! Thanks for completing this project. Dr. Shapiro

Rolling (egg-related pun intended) off Easter as we are, your collage was particularly appropriate. It's really too bad that every holiday becomes an excuse for loading up on cookies, candies, and carbs. As your project suggests, by making this association for kids at such a young age, we almost guarantee that they will grow into teens and adults who look to junk food for both pleasure and consolation. You identified a looming healthcare problem in American society for which we have no simple answers. When so much advertising money is expended promoting unhealthy eating habits, it's hard to believe that a pediatrician's warnings will be that effective. Hopefully, this is an issue that society as a whole will have the will to tackle, parents, schools, and physicians working together to bring up a healthy new generation. Thanks for your work, --. Dr. Shapiro

--, I really am glad you chose to reflect on this particular topic. The more deeply you become immersed in the world of medicine – including its language – the easier it is to forget just how strange and baffling it seems to outsiders, including patients and their families. From one perspective, it is quite ironic that the people whom the medical system is intended to serve – the patients – have absolutely no input into how that system functions. Language is just one example of the way in which the healthcare system bewilders the people whom it is designed to assist. Like X, many patients do not really understand their medical conditions, despite their doctors having "explained" things. Like X, they are too shy or embarrassed or sick to ask for clarification, so they mull over the mysterious words they've heard, trying to bring some sense to them. Very nice work, --. Best, Dr. Shapiro

--, you created a wonderful portrait of a vibrant and very much alive little boy, despite his cystic fibrosis. It's easy to see why you fell in love with him. I very much agree with the conclusion you drew, i.e., that kids are kids first and patients second. Being able to see that in patients of any size will help make you a more humane and compassionate physician. As we discussed in class, I also liked your ability to accept the gift of this little patient to free you from your own cares and worries. When you think of patients only as a drain on your resources, it's easy to burn out. When you are sensitive to the many ways that patients can help you replenish and renew, you are on the path toward figuring out how to make medicine a sustaining and rewarding career. Thanks for a lovely essay. Dr. Shapiro

This was a well-written and very well thought-through poem, --. I liked that you chose to write it from the mother's perspective. You captured her feelings of guilt and remorse very accurately and very movingly. Each one of the questions, doubts, and fears you incorporated rang true. As we discussed in class, because the causes of autism remain largely unknown, it is a condition that lends itself particularly easily to paroxysms of self-blame in parents. Your poem led us all into a valuable discussion about how to respond to parental guilt, a complicated emotion which people sometimes have great difficulty relinquishing. Parents' feelings always deserve respect and understanding, even when we disagree with them. In this case, perhaps by normalizing such feelings and encouraging a focus on the future rather than the past, the pediatrician can begin the process of releasing parents from the stifling grip of their guilt. Very well done! Dr. Shapiro

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--, your picture and narrative were quite touching. For me, they evoked a precious moment between patient and (student) physician. In contrast to the usual hustle-bustle of the hospital, the busy people moving up and down the corridors, this is a moment of quiet and stillness. I can readily imagine this adorable, big-headed baby just opening his eyes and looking at you, completely vulnerable, completely trusting. To think that such innocence could meet with violence is almost unbearable. I agree that the image of this little child simply gazing up at you will be a compelling motivation to do what you can to ensure the safety of all children under your care. Thanks for raising the painful topic of child abuse in an unusual, and unexpectedly tender way. Dr. Shapiro

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You did a clever job of incorporating lots of pediatric medical language into your rap song – that's something you don't see every day. I liked the way you turned a hospital ward full of sick kids into the "hood," filled with sick but still feisty "homies." You

almost convinced me that all these diagnostic zebras could be, well, cool. Anyway, your rap was a creative take on pediatrics. Thanks for contributing this piece. Dr. Shapiro

--, this poem was strong work (I'm consciously trying to change the connotation of that term, so that we can honorably apply it to doing stuff other than refusing admissions, turfing patients, etc. :-)). The repetition of the title throughout the poem was an excellent device for communicating the mother's fixation on the period right before her delivery as an explanation for all her son's subsequent problems. The last line also conveyed powerfully just how trapped she has been for the last 15 years. From her doctor's view, this is probably the most important problem now, regardless of what happened in the past. One thing we did not have a chance to discuss in class is a possible approach focused not on changing this mom's belief, but helping her to release some of her rage and resentment. In other words, rather than try to persuade this mom with facts and education (or more likely just informed opinion, because who really knows the relationship between the extra gestational time, c-section, and the kid's developmental disabilities), maybe she can begin to entertain the idea of forgiveness. Maybe it is time for this mom to say, whatever happened 15 years ago, I am ready to begin to let go of my blaming of that ob, not because he doesn't deserve (at least a little of) it, but because who it is harming is myself and my son. Just another spin for your consideration. Thanks for sharing this excellent poem. Dr. Shapiro

You came up with a great topic for our consideration, --. Many parents do seek alternative remedies for their children, including going to chiropractors for otitis media, and other things about which we might have questions. Some of these practices are dangerous or injurious, many are benign, and a few may be helpful (whether from placebo or other active effects). In any case, as you suggested in your presentation, the key element is to be respectful and focused on understanding in eliciting a history of alternative medication use, rather than judgmental and disapproving. This does *not* mean you should not express your views forcefully, particularly if you feel a given practice might do harm. However, as Dr. X so ably demonstrated for us, by first clarifying the parent's motivations and expectations (My mother told me these herbs would help my child), then finding common ground (both parent and doctor want the best for the child), it is easier to negotiate a beneficial compromise. Further, whenever possible, I think it's a great idea to get to know the alternative practitioners in your community, so that you know which ones are spewing "Miss-Information" and which you can begin a dialogue with about healing. I'm so glad you raised these issues. Much food for thought here. Best, Dr. Shapiro

Hi --. It was very nice to see you again after all this time. I remember how intelligent and knowledgeable you were in PD, and it was great to see your empathic imagination at work as well. Sometimes a fantasy, a metaphor are all that sustain us through tough times (think Don Quixote and you'll see what I'm getting at). Casting yourself as a young wizard dealing with witches and magical hammers, levitating beds and backfiring spells is a much more enchanting (pun intentional) way of framing a hospital stay than mere reality. And don't forget, adult patients and even medical students sometimes need to dip into the world of the fantastical to endure their lives. I hope this exercise was as much fun to write as it was to read. Best of luck to you in finishing out the year, and on to 4th! Dr. Shapiro

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--, it sounded from your write-up as though you conducted a really thorough interview with this mom. This was a great idea! It is a perfect example of allowing the patient (in this case, patient's mom) to be your teacher. I was impressed with how much you learned from her. And I was further impressed that you were sufficiently interested to go to the research literature to determine what effects a child's chronic illness can have on the well-being of the family as a whole. As you discovered, it can have a very significant impact. I agree wholeheartedly with your conclusion that a biopsychosocial approach is necessary to adequately respond to the multiplicity of problems that can arise in the presence of chronic illness. We often see this most clearly in pediatrics, but in my opinion, it is equally true, although not always as immediately apparent, in almost all medical specialties. Thanks for this excellent work. Dr. Shapiro