## PEDS REFLECTION PROJECTS 8/7/17

### Sartaaj Walia, Carlin Lee, Allen Wu

Dear Sartaaj, Carlin, and Allen, you wrote really lovely haiku for the Peds reflection project. Haiku seem easy to write, because they are so short, but they take a lot of thought. I was quite struck by the way mundane, even tedious didactics about the high sugar content of juice (Sartaaj), or healthy eating and exercise (Allen), suddenly became transformed into something vivid, witty, and memorable through poetry. It occurs to me that interspersing a little haiku in the standard patient admonitions to eat fewer carbs, cut down on the sugars, and exercise more would not be a bad thing (the "cube" also seemed like a great idea for engaging patients as well as medical students in a little spontaneous exercise <sup>(D)</sup>.

Carlin, the anti-vax parent haiku cleverly made a good point about sources of mercury other than vaccines; and successfully captured the frustration so many physicians and medical students feel at parents' illogical and ill-informed assumptions about immunization that put not only their own kids but also entire communities and especially vulnerable other children at risk. Yet as we discussed, it is only by maintaining attitudes of curiosity rather than judgment; and keeping the door open to dialogue that you may be able to change minds.

Finally, Sartaaj, I actually loved the bonus haiku. It expressed very well the (perhaps somewhat naïve) hope of the medical student that once they become real doctors, they will acquire both patients and patience. They will certainly have the former, but whether they also are able to develop and maintain the latter is debatable. Now is the right time to start cultivating the invaluable attribute of patience... and the patients will come <sup>(2)</sup> Best, Dr. Shapiro

#### Tobias (Xiao) Dong, Scott Refugio

Wow, this was an incredibly ingenious, creative, and potentially truly useful project. Creating a website that could enroll patients and (when appropriate) parents to receive personalized reminders about vaccination schedules and as well as more detailed information about immunizations and the diseases they present is such a valuable idea. The name – VacTrac – is clever and catchy, and I think would appeal to adolescents. A personal message from one's physician shows real concern and caring. I agree that, while this approach would not persuade adamant anti-vaxers, it might well exert a positive influence on the much larger group of ambivalent parents in the middle. I hope you continue to pursue this concept, including seeking a small grant to develop the idea further. Thank you for coming up with something so intriguing and practical, Dr. Shapiro

#### Graham Stephenson, Victor Tran

Dear Graham and Victor, Sometimes a picture really is worth a thousand words <sup>(2)</sup>. Your drawings were quite evocative and effective in conveying your message. The student with the suitcase and all the "baggage" that accompanies him or her to medical school which you presented Graham struck a chord with your classmates. It expressed a subjective experience that everyone could relate to. Just

because you become a medical student doesn't mean you stop having to deal with all the rest of your life! And Victor, I so appreciated your honesty about the "fingers crossed" sketch - sometimes just wishing patients wouldn't show up so that you could study and catch up on paperwork. I also liked how you transformed this initial thought into a more nuanced thought – i.e., hoping that patients wouldn't come in because they were feeling well and happy! This was a really lovely progression – first, recognizing your very natural desire for more time and a less hectic pace; then, working with your cognition to shift it from vaguely resentful to wishing good things for your patients. This was really very skillful, and an excellent example of how we are not at the mercy of our feelings but can modulate them in ways that promote patient benefit and wellbeing. The final drawing – shaking or grasping hands – was actually quite moving. Graham, your interpretation reminded everyone of the importance and the privilege of connecting with other human beings. It also made the point that the patient-doctor relationship is in fact not a one way street, but a mutual interaction that can benefit both people involved. What a humane and perceptive insight. Best, Dr. Shapiro

#### Cynthia Enrique, Oscar Hernandez, Lauren Wichey

Dear Cynthia, Oscar, and Lauren, I loved your choice of metaphor: children are indeed like trees. They are hardy and resilient. With proper watering, nutrition, and sunlight, they grow and thrive. They are beautiful and the world couldn't survive without them. See how great a metaphor is? It makes us think of all sorts of associations and illuminates new facets of the things we are comparing.

Cynthia, I liked your idea that the pediatrician is the "core" of the tree around which the growth of the tree is organized. It is a lovely way to think of the stabilizing contributions the doctor makes to the children under her care. Similarly, the parent "birds" play a vital role in nurturing and safeguarding their little babies, until it is time for them to fly. (Again, metaphors are so very rich in deepening our understanding!).

Lauren, your story about your transgender patient was really instructive. Not only did the team treat this patient with nonjudgmental respect and sensitivity, but you also opened my eyes as to how important the acceptance, recognition, and even validation from doctors can be in reassuring patients about gender identity issues. This was a great example of how the medical community can support rather than undermine.

Oscar, you made excellent points about balance both between parent and child, and between physician, child, and parents. Your observation that even upset or skeptical parents will often, in the end, listen to the doctor's opinion, is a valuable insight. The ultimate common ground between doctors and parents, no matter how "difficult" they may seem, is an unswerving commitment to the child's wellbeing. This can overcome a lot of barriers.

All in all, a sweet and hopeful project that emphasized wellness, education, and relationship. And, as Dr. Murata pointed out, glitter is just so Peds, so it was the perfect final touch <sup>©</sup> Best, Dr. Shapiro

# Nicole Zawada, Jose Covarrubias

Nicole and Jose, you chose one of the most fundamental issues in medicine to focus on – how to win the trust of patients. Lack of trust undermines almost every aspect of clinical medicine. As you noted, adolescents are particularly mistrustful and uncommunicative; how to reach them is often a challenge. Your poem was quite poignant. I particularly liked your use of the second person "you." This made the poem very personal and intimate. You conveyed beautifully the anguish, loneliness and fear of this young patient, whose trust was impaired by her unfortunate experience of the medical treatment actually worsening her condition. What I appreciated so much was how you persisted with the patient, going to interact with her every day, even when she didn't remember your name. This steadfastness was so admirable! And the way you transformed your (completely understandable) desire for personal recognition and appreciation into gratitude that the patient began to recover was for me a wonderful example of putting patient about self. Your "rap" delivery was also quite engaging! Best, Dr. Shapiro

#### Michael Ghijsen

Dear Michael, thank you for the ethical dilemma with which you engaged the class. You did an excellent job – lucid, well analyzed – of presenting the valuable distinction between best interest (always a slippery concept) and serious harm. There are so many tensions operating in this quandary – between parental rights and the state's obligation to protect its most vulnerable members; between children's rights and parental rights; and even whether rights is the best way to frame these questions. As you pointed out, some of these cases seem rather self-evident (and harm pushes in this clarifying direction); but sometimes the lines are more ambiguous. As we discussed, when the child has capacity, their voice should be heard and weighed. Even when this is possible, sorting out harm (let alone best interest) can become messy. When it is not possible, the ethical burden is even heavier.

In the case of Baby Charlie Gard, parents clearly thought that they were acting in the best interest of their son by attempting to transfer his care to an experimental intervention in the U.S.; and similarly thought that the harm inflicted would be negligible or justifiable. The British doctors, on the other hand, were convinced that the harm would be considerable and the benefit would be nonexistent. In this case the physician expertise trumped the parental love and devotion. This is a hard thing to accept because when it is your child, logic is a small part of the decision-making process. I think that, although logical reasoning plays a crucial role, finding ways to respect and value the parents' perspective must also be part of the equation. Thank you for getting us all to think and wrestle with these questions. Best, Dr. Shapiro