

## REVIEWER COMMENTS

- 1) **The anonymous reviewer noted “there is nothing quite like it [the book]”. It could “easily serve as a course text, unlike the current gold standard, *On Doctoring*. Their opinion was that the book could engage learners and teachers alike. Their opinion was that the book could engage learners and teachers alike. The reviewer also liked “the sustained metaphor” used as “the spine of the book (i.e., medical education as the journey of ordinary heroes into unknown lands)” and called this a “novel and unique feature.”**
- 2) Johanna Shapiro has written a book specifically about medical student poetry, *The Inner World of Medical Students: Listening to Their Voices in Poetry*. She describes a number of different narratives and functions that medical student poems can take: chaos stories (crying for help), restitution stories (self-reassurance), journey stories (self-discovery and identity formation), witnessing stories (examining suffering), and transcendence stories (healing), (12-33). One of Shapiro's concerns is how the acculturation process in medical education affects the humanity of the student. She writes that students may "internalize the message that actual parts of who they are - perhaps their sensitivity or their tender-heartedness - no longer have a place in their professional persona," (5). Shapiro notes the restriction and distortion that medical education can have in regard to the whole person of the patient and the student. She sees a parallel process occurring in which the essential humanity of both the student and patient are molded to fit into a biomedical paradigm focused on the most superficial of human realities: observable symptoms and observable behaviors. She observes that medical training "attempts to order the world by relying on knowledge that can be obtained by reductionism, objectivity, and essentialism, as well as logical, rational thinking, and relationships that can be controlled by hierarchy, authority, and power. This leads to models of understanding and relationships that are excessively formulaic, rule-bound, and lacking in human connection," (6).

Shapiro speaks of "preformulation," in medical thinking, a kind of conditioned response in which experience and human reality is objectified "into predetermined categories and interpretations," (8) for instance listening for diagnoses rather than listening to a person. The student learns to interact only through diagnoses, categories, and flow charts, and loses the more complex aspects of human interaction. Shapiro writes that experience, "becomes formulaic and loses its dynamism and organicity...the person of both patient and student - is all too easily lost," (8). Shapiro's critique of the medical student acculturation process dovetails with those of other authors who have been considered in this chapter. There is a common thread which cautions against the unopposed use of contemporary biomedicine. These perspectives also illustrate other essential dimensions of human being that cannot be understood through reductionist biomedical views of humanity.

Shapiro's book has not only has a lot of great examples of poetry by medical students, but she also makes a convincing argument that using poetry in medical education helps medical students become better human beings, and thus better doctors.

- **David Kopacz MD**