

## FM REVIEW 2015 17 COMMENTS

**COMMENTS TO EDITOR:** This essay is a first person account of a physician's brush with mortality. The reviews are split - one reviewer saying it is beautifully written and moving, the other commenting that it is surprisingly uninvolved. As a result, I sent it out for a third review, which also recommended accept. I am recommending a major revision. I think the essay could be more than it is - more personal and more insightful about what it means, as a physician, to face one's mortality.

**COMMENTS TO AUTHOR:** Thank you for your moving essay about a difficult encounter with your own mortality. Especially at the beginning and the end of the essay, you succeed very well in acknowledging your own vulnerability and how your experience helped remind you of the value of relationships and emotional connection in healing. The use of the classic Capra movie as a parallel to your own experience is very effective. We'd like you to address the following concerns in a revision of the essay:

1) At points you adopt a clinical tone that contrasts in a jarring way with the personal style of the majority of the essay. Avoid using the passive voice and language that sounds like a chart note (see attached text for specific examples).

2) Similarly, at certain points (e.g., summarizing your surgical note) too much detailed medical information is provided, which again detracts from the personal tone of the essay. We recommend that this information largely be eliminated.

3) The paragraph in which you describe your devastating depression and certainty that you would not survive the surgery seems out of place chronologically. Please consider inserting this before you describe the operation itself.

3) Can you reflect a bit more on how the fact that you are a physician influenced your response to the diagnosis and pending surgery? Were you more afraid of the possible negative outcomes because you understood them more clearly than most patients? Did the diagnosis challenge some sense of a "divide" between doctors and patients that suddenly had been crossed?

4) You write eloquently of the truths of which you were reminded as a result of this experience - the importance of relationship, connection, and social support in the healing process. Can you say something about how this awareness affected you as a physician and a teacher? Just a sentence or two would suffice.

Please revise the ms keeping in mind the 1000 word limit.

On a personal note, I am very glad that you recovered from this event and that you and your family, patients, and colleagues can all benefit from your insights.

**COMMENTS TO EDITOR II:** This essay describes a family physician's personal brush with mortality. The author has done a fine job of revising to reduce medical details and excessive chronology. Instead, he now reflects openly on how this experience provided an existential challenge; and how he needed not

only the technical skills of his surgeon and medical team, but also the compassion of his doctor and the emotional and spiritual support of his family, friends, and community (including his patients). I am attaching a revision of the manuscript that includes two minor grammatical and spelling corrections, but I do not believe these require authorial approval. I recommend that the manuscript be accepted.

**COMMENTS TO AUTHOR II:** Thank you very much for this thoughtful and honest revision of your original essay. The tone of the essay is much more consistent and, even better, more human/personal. You've done excellent work reducing your reliance on detailed medical information and discussing yourself as a case presentation. The chronology makes sense now and does not detract from the narrative flow. Most importantly, you've incorporated some invaluable self-disclosures (I particularly loved the line about others seeing clinical depression, whereas for you it was an existential crisis threatening your "wonderful life"). You've allowed yourself to be vulnerable in this brush with mortality, and that will enable readers to move closer to their own vulnerability. You've also provided wonderful links between this personal experience and your role as a family doc (another terrific line is when you acknowledge that you've seen your own despair and terror on the faces of patients, but until now have never truly understood it). Finally, making explicit that full healing necessitated not only the technical skill of your surgeon and medical team, but also your willingness to experience empathic connection is another beautiful point that I'm sure will speak to readers in a profound way.