



A.T. Still Memorial Address

The physician as humanist

Philip Pumerantz, PhD

Dr Pumerantz delivered the Andrew Taylor Still Memorial Address July 16 at the AOA House of Delegates meeting in Nashville, Tenn.

It is a high honor to have been asked to address this body today. I approach this privilege at a time when our profession and, indeed, all of the health professions are facing sweeping changes and enormous challenges. This is a time when many of us are questioning and searching for meaning in what we do. It is in the spirit of search that I offer my views and perhaps another dimension to our common endeavor.

More than 100 years ago, a man was born in Virginia, lived in Tennessee, and spent the rest of his life in Kansas and Missouri. He inspired a movement, indeed a revolution, in his field, which ultimately brought all of us here today. It is probably fate that we hold this convocation in the very state where Andrew Taylor Still spent some of his youth and began to shape his character.

This place touched the founder of our profession—a profession that has some of its philosophic roots in the ancient Greek physician society. Two thousand years ago Hippocrates taught that the focus of treatment must not be on the disease but on the patient.

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Sherwin Nuland, in his recent and brilliant book *Doctors: The Biography of Medicine*, summarized that insight by writing, "The Hippocratic physicians saw diseases as events that happen within the context of the life of the entire patient, and they oriented their treatment toward restoration of the natural conditions and defenses of the sick person and the re-establishment of his proper relation to his surroundings....By concentrating their treatment on the patient and his environment and by making him a member of his own therapeutic team, they achieved successes that eluded their rivals; in this can be recognized the seeds of...holistic medicine."

In this can be found the seeds of osteopathic medicine. It may be argued that I am preaching to the converted. Most of you endorse the point of view that persons are complex, that they must be seen and treated in their totality, and that the treatment of patients is most effective when it is based on an understanding of the total person and is aimed at restoring the body's natural equilibrium. Dr Still said as much, and Hippocrates anticipated many of Still's insights. You believe all of that.

What rests behind my reiteration of these basic convictions is the concern that in our business, we are in danger of having these incredibly important truths become nothing more than cant, historic shibboleths to which we occasionally bow as we hurry on

our way. My purpose today is to call for a broad and deep recommitment throughout our profession to the profound humanism that is at the core of osteopathic medicine.

Nuland has said that in modern medicine, "The microscope has replaced the clinician's scrutinizing eye, and molecules have replaced the patient."

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science."**

Certainly physicians are indebted to and participate in the findings of modern science. They rely, in their diagnosis and treatment, on the microscope, the X-ray and magnetic resonance imaging, and on all of the remarkable technologic paraphernalia of the time—and eagerly await the next breakthroughs. They need the understandings of organ pathology for their work and the knowledge of molecular structure.

But the profession to which they have committed their lives is not concerned simply with analysis—breaking down. It is also concerned with synthesis—putting together. It is the putting together, the wholeness, the totality that indelibly mark osteopathic medicine.

It is easy for me to say, "Let us recommit ourselves to the humanism which characterizes our endeavor." What is not so easy is to describe what that means in practical terms. How does such a commitment work? How does it help us do what we do on a daily basis?

Dr Still might answer that question this way: "Trust wisdom, practice medicine as an art, and resist science." That actually is an echo of the Canadian philosopher Robertson Davies, who has suggested that physicians often neglect the necessity of becoming reflective human beings. Too often they seem to view themselves as objective scientists rather than as fellow human beings who have much in common with their patients.

The evolution and the emergence of a physician from medical school through the practice years needs to include the commitment to develop into "reflective humanists." To resist science, trust wisdom and practice medicine as an art, physicians need to stand back and observe themselves, to think about their own lives and the roles they play in serving others. Doctors have to preserve their humanity and to discover the commonalities with their patients.

The American physician-poet William Carlos Williams wrote that physicians must come to terms not only with the disease but with a particular person. *This* patient, not patienthood. Not lungs in general or kidneys or

hearts but one person who has some trouble and is handling it in a way that may be different from anyone else's approach. Each patient, Williams recognized, is unique.

The person who presents himself or herself at the door of the physician must not be defined as "the cancer," "the hypertensive" or "the back." If that person is to be helped, the physician must understand more than physical diagnosis and prescription.

Dr Still knew that with remarkable clarity. The revolution in healthcare that he initiated and, to a large degree, personified more than 100 years ago came about not because he was "cranky" with the existing medical establishment but because he understood that health is more than the absence of disease. It must involve the whole person and that person's relationship to others and to the world.

Williams exposed this beautifully when he wrote: "No matter where I find myself, every sort of individual that is possible to imagine, in some phase of his development from the highest to the lowest, at some time came to me. I am sure I have seen them all and all have contributed to my life. All day long the doctor carries on his work, but if in addition to actually being an accurate craftsman, a man of insight, he has the added quality of a restless concern for his patient, he has been fulfilled."

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the mysteries of nature in dealing with the uniqueness of the individual, not just to focus on an interesting disease that happens to reside in someone's body. While medicine is a science and a discipline, it must be pursued as a passion.

It is said that after Williams visited the house of a sick person, he would go out to his car and quickly write down what he had heard the patient say. Then, he would use some of the human material he had gathered and put it all together to develop a greater understanding of his patient.

This was vintage Still. He knew very well the inherent affinity between the science of medicine and the humanities. He understood and wrote about the physician as humanist.

Williams' classic book, *The Doctor Stories*, comprises glimpses of the everyday challenges physicians face as they struggle not only with diagnosis and treatment but, as he says, with "our inevitably flawed humanity, our times of bitterness, our envy, our frustration, our greed, our passions and dreams, our extravagant hopes and eager expectations." And, of course, the melancholy of death and dying. Yet,

he says, we persist through these efforts.

Trust wisdom, practice the art of medicine and resist science are prescriptive for the osteopathic physician.

Resist science. Resist science! Does it seem that I'm overstating the case? We all know the importance of science to doctors. They need to know thousands of scientific facts to become competent in their work. But should the physician be only a scientist?

Davies observes that it is easy for the young physician to be lured by what he calls the "powerful God of Science." Indeed, how can a doctor possibly choose to be a humanist under these conditions?

Some of you may be shocked by the question, but you shouldn't be. We need to recognize that while science can cure disease, it might not confer health. Too many doctors confuse science with technology and then shower patients with tests, overload them with pills, talk to them less and less, listen less and less, and ask them fewer and fewer questions.

In his delightful book, *Medicine & the Reign of Technology*, Stanley J. Reiser takes physicians

to task when they consider themselves scientists. Their approach, he says, is to go after patients with instruments, gadgets and procedures in pursuit of findings; the more, the better. Reiser wonders whether they haven't been first captivated and then captured by technology; it becomes an answer and then a central controlling occupation. Meanwhile, they rely less on their eyes, less on their ears, and less on their ability to have a reasonable and revealing conversation with their patients.

Patients are human beings seeking help from their doctors. They are not conduits for laboratory centrifuges, X-ray machines, computers and whatnot. I think it is fair to wonder whether machines have replaced people. We all know doctors who know more about a patient's lab scores than about the patient as a whole, the patient as an individual. The doctor as humanist knows, as the poet knows, that the human race is characterized by variety.

As we function in our roles as professional leaders and as practitioners, we are called on to pay attention to the complexity of human affairs, to cultivate an interest in the ethical and to develop an awareness of one's never-ending contingencies. We must nurture an awe of the mysteries that cling to humankind.

This is the stuff of the physician as humanist. It must be a part of the doctor's education and part of the doctor's everyday practice in life. The information

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one garners in college and in medical school has its important uses, but it's finally worth little if it is not part of a morally sensitive and reflective tradition.

The art of medicine. So now, to balance the need for science, let's talk about the art of medicine. What has happened to that fine art, that exquisite communication and partnership between patient and doctor? We must realize that humanism historically has been the commitment behind the practice of osteopathic medicine. Our challenge is to perpetuate that commitment, to enhance the quality of medical care for the benefit of mankind.

Medicine cannot be limited to fixing broken parts; doctors must deal with the larger concern, which is part of the human condition. The art of communicating with a patient as a fellow human being, of forging a partnership, is at the heart of our profession and will remain so.

Nuland described such a partnership when he wrote: "There is a singular ingredient in the art of healing that should not be allowed to vanish. That ingredient, so basic and so changeless, is a re-

lationship; it takes place in the quiet surroundings of the sick room or the doctor's office. There occurs in those protected places a transaction which, in a most fundamental way, is an act of giving, and it has to do with such elemental things that pass between two people as listening and touching and talking. Whether it culminates in the transplantation of an organ or the transmission of a few encouraging words, it is something that I have never been able to approach with anything but awe, because the experience of healing is a joining between doctor and patient in which one human being is privileged to help another."

When we scan the possibilities within the patient for disease and work with the mysteries of nature, we deal with a person in his or her particularity. With great care, you work with the mysteries of the human condition as the sick are gently encouraged back to health. This relationship—this partnership—between physician and patient is a bond that is formed and sustained, one that can create health.

I have reread Williams in the days following our recent gradu-

ation ceremonies, and I was struck that the Osteopathic Oath our students take has meaning that should be renewed. In part it says, "I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and life of my patients, to retain their confidence and respect both as a physician and friend who will guard their secrets with scrupulous honor and fidelity."

There is a story about a soldier that I want to tell you that illustrates my point.

A young GI returning from the war called his parents from a phone booth in the bus station. He told them that he would be on a certain bus and that he would be home that evening. But he hesitated a moment and then added that he was bringing home a friend and he hoped that it would be OK with them because his friend was handicapped. The friend was wounded in action and had no legs. He asked for his parent's permission.

His parents told him that they felt very sorry for his friend but they were not really set up to help—this was not a good time for him to come. The mother worked; there were two floors in the house, which meant she would have to run up and down; money was tight; etc, etc. As it turned out, the young man did not get off that bus that night, because he was that handicapped soldier. It was their son who had been wounded in action. The parents never saw him again.

The physician as humanist understands that to be fully human means to admit our frailties and then commits himself to working with them.

I call your attention to the Rabbi Maimonides' *Prayer for the Physician*. "Let not desire for wealth or benefit blind me from seeing truth. Deem me worthy of seeing in the sufferer who seeks my advice—a person—neither sick nor poor, friend or foe, good man or bad, or a man in distress; show me only the man."

To be fully human means to admit our frailties.

Trust wisdom. I have been speaking about art and resisting science. Now, let's turn to wisdom. We teach thousands, perhaps hundreds of thousands, of bits of information, but there's a difference between knowledge and wisdom. Knowledge is information, wisdom is the ability to make good judgments with the knowledge; it is the ability to see through the obvious to the underlying.

Harold S. Kushner, in his book *When All You Ever Wanted Wasn't Enough*, suggests that the essence of wisdom is a respect for the limits of human intelligence and a sense of reverence for the vast dark reaches of reality that

reason cannot penetrate. He once told a group of students that if their education had developed their minds but had permitted their sense of humility and reverence to atrophy, they ran the risk of being the best and the brightest of their generation, smart enough to lead but not wise enough to know where they should be going.

Some of them, he continued, would be going on to medical school, where they would learn not only chemistry and biology but also a sense of reverence for the miracle of life and the wondrous complexity of the human body. They might learn that some ailments cannot be cured by brilliant diagnoses and elaborate machinery, but only by loving and caring. Without that humanism, they might end up practicing the equivalent of auto mechanics on the human being.

We should remember that intelligence unaided by sensitivity, the mind without the heart, rational decision making without thoughts, would lead us to do things that could hurt people.

When osteopathic medical graduates take the oath, they pledge to be caring, to be concerned for their patients and to be mindful of their responsibilities to their patients. But it is sobering to note that in some cases graduation is the first opportunity that the students have had to reflect on the nature of medical practice in the tradition of the Greeks and A.T. Still.

Perhaps it is the first time they have had occasion to think

about trusting wisdom. This is probably true, because our medical schools concentrate so much on cold tech. We overload our students with so much information that they are at risk of losing sight of the humanistic side of healing. We don't always teach the difference between knowledge and wisdom.

However, some schools are trying to address this problem. For example, at our institution the memorial service for the cadavers at the conclusion of our anatomy course offers a prayer that sums up our attitudes about life and death. It calls upon the Creator to help us learn something greater than science, to think about the dignity of life and the gift of opportunity the deceased individuals have offered to the students.

Isn't this what should be taught to our medical students? There is no doubt that we prepare them well for the scientific and practical skills they need, but we need to be more conscious and committed to preparing them to be humanists.

The public is searching for a humanistic physician. They have a right to insist that the physician be technically and scientifically competent, but they also have a right to ask whether he or she knows himself or herself.

Students enter medical school with sound scientific backgrounds and with good MCAT and GPA scores and recommendations. We attract good science students who will become good scientists and good "science doc-

tors." But are they good doctors, complete physicians? Can they treat anything from a broken heart to a broken bone? Therefore, ask: What makes one a great physician? I think the answer is to be found in the balance between science and wisdom.

The doctor can indeed be a humanist. The mass of scientific data that they memorize over the years will serve them well, but the wisdom they develop will help them use what they've learned.

Davies tells us that wisdom is the inner humanistic voice, a mystical force that binds healer and patient. Let us vow to trust wisdom and not just acquire information.

Don't be too hard on yourself.

My last piece of counsel for the humanistic physician is: Don't be too hard on yourself. Most of us

want to ignore this little gem. Whether or not we are physicians, we tend to take ourselves quite seriously, and we are exasperated at the suggestion that we do otherwise. This is especially true of doctors, who deal daily with matters of life and death. Most of us want to be revered, to be seen as the expert, to be acknowledged as greater than life.

We are humans and not gods. I say that with compassion and not with accusation. From time to time, physicians are criticized for the superhuman traits that, on occasion, are attributed to them. I've found that no humanistic physician pretends, for patients or community, that he or she is omniscient or omnipotent; indeed, the contrary is true—humanistic physicians go out of their way to ensure that those with whom they come in contact understand



After delivering his lecture, Dr Pumerantz (left) receives the A.T. Still Memorial Address Plaque from T. Eugene Zachary, DO, the AOA speaker of the house. (Photo by Sandra M. Williamson)

both the limitations of the healing art and their own limitations.

I have observed, however, that many humanistic physicians expect too much of themselves. They want so much to do good for patients that they blame themselves or accept blame when they cannot provide the desired cure. The caring physician, the humanist, deeply feels the failures that go with the practice of medicine. He or she never becomes inured to suffering and death. I have seen some of you and your colleagues shed bitter tears over the death of patients and friends, over devastating illnesses, over the ravages of old age. And I revere your sensitivity.

We need to understand anew, however, that medicine at its best, which is osteopathic medicine, has its limitations. Humans are mortal. When illness has triumphed over health, when death has vanquished life, when the physician has exhausted understanding and applied with care all of the craft of the art, that physician must not conclude that he or she has failed.

Guilt has no place in the soul of the physician who has exerted his or her best efforts, used the most comprehensive treatment available to modern medicine, and stood alongside patient and family with conviction.

You have a right to your regrets for efforts that have gone unrewarded, but you need also to set yourself free from blame. As medicine has limitations, so too have you. Even as I celebrate your skill, dedication and commit-

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ment, I celebrate your recognition of your own limitations. Give yourself permission to be limited, to be human.

I have called for a recommitment in our profession to persons, for a profoundly humanistic posture toward the practice of medicine. It is not easy to fly the humanist flag. There are those who have made humanism a dirty word. They assert that to be a humanist is to be antireligious, or irreligious.

Not so! What I have tried to show is that to affirm humanity is to affirm, among other things, the spirituality of humans; we are more than flesh and bones, molecules and bacteria. We have about us a spark of the eternal. And that's the point.

Trust wisdom, practice medicine as an art and resist science. If we can use science without losing the art of medicine, if we can know the difference between knowledge and wisdom and encourage the use of both, if we can retain our humanity, if we can become reflective, if we can form a healing partnership with patients, if we can communicate and listen without thinking ourselves heroes, then we will have approached the idea of the phy-

sician as humanist.

During World War II, there was an unusually gifted young French writer who was also an aviator, Antoine de Saint-Exupery. In his book *Flight From Arras*, Saint-Exupery anticipates a reconnaissance flight from which he is unlikely to return.

He writes: "And as I sat there longing for night, I was for a moment like a Christian abandoned by grace. I was about to do my job honorably, that was certain. But to do it as one honors ancient rites when they have no longer any significance, when the god that lived in them was withdrawn from them."

There are those today who would argue that the gods have fled from medical practice, that the clinician is nothing more than a journeyman mechanic or carpenter. The osteopathic physician who truly values persons, who seeks to understand them and serve them in all their complexities and differences, knows that is not true. He knows that he is one with them and, thus, with eternal truth.

May that kind of physician, the humanist, continue to be the hallmark of our profession. *QA*

Dr Pumerantz is the president of the College of Osteopathic Medicine of the Pacific.

John Gingrich, PhD, dean of Arts and Sciences at the University of LaVerne in LaVerne, Calif, helped extensively in developing the text of this speech.

