Commonalities
By Dana Cook Grossman

What do an eminent faculty member and a clown have in common? No, that’s not a riddle. As it happens, both a recently deceased member of the DMS faculty and an honest-to-goodness, red-rubber-nose clown were the subject of communiqués I received within the past few months. And, coincidentally, both communiqués came from correspondents who asked that their names not be published.

The faculty member was Dr. Laird Myers, who died on April 1 at the age of 87. He’d retired in 1986 from Memorial Sloan-Kettering Cancer Center in New York, where he’d been chair of medicine for 34 years. For the past 23 years, he’d been a member of the Dartmouth Medical School faculty—very actively so for much of that time.

His career achievements are certainly worthy of note. But perhaps of even greater note is the fact that he was one of those individuals whose eminence was not in inverse proportion to his kindness and humanity.

I know that fact not only by reputation, but also from having had the pleasure of working with him on an essay for Dartmouth Medicine almost 20 years ago. The point of his essay was that doctors need to be honest with both themselves and their patients. He urged physicians to be aware of their own limitations and to truly listen to patients rather than condescend to know what’s best for them. Some doctors, he wrote, “believe they have all the answers and are too intent on maintaining that image to be bothered with listening.”

A few weeks after his death, I received an e-mail from someone who knew him well, who thought his passing deserved mention in these pages, but who wanted to remain anonymous. “Laird Myers was one of the most wonderful people in the world,” this person wrote. “He had a very full life—enjoyed many sports . . . raised four wonderful children . . . [had a] love affair with his wife Kathy [that] lasted right until the end. He loved his garden, especially his corn crop, and riding his tractor. He also loved watching Abbott and Costello videos. . . .

“He was,” concluded the e-mail, “a kind, gentle, funny person who really, really cared about patients and how they should be treated.”

One might sum all that up by saying that he was an uncommon individual with a common touch.

And what about the clown? I also got a letter from a former patient, who preferred that her name not be attached to this story but felt compelled to share it: “Seven months ago,” she wrote, “I was a patient at DHMC. At 5:00 p.m., the doctors told me that I would be having an operation at midnight. They came to take me up to the surgical area, and I was left outside the operating room. It was very quiet. All of a sudden, I felt that someone was beside my bed. I opened my eyes, and there was a clown—with a small, colorful umbrella for a hat and a full clown outfit. I was very surprised.

“He stood there and talked to me and then . . . took a bag off his shoulder and took out a small ukulele and . . . sang some songs. I chatted with him and told him that I have always loved clowns. He then told me that he was going to put a red heart sticker on my johnny, with a note saying ‘I met a clown today.’ I immediately said, ‘Please put it on my collarbone, because if my johnny becomes soiled during the operation, they will take it off and I shall lose the sticker.’

“I must have dozed off, and they did the operation. The next morning when I woke up, the sticker was still on my collarbone.

“I wish to thank the ‘special clown’ for seeing me in the middle of the night. That was the most wonderful surprise—someone caring to make an 82-year-old lady feel so very special. I still have the wonderful red heart with ‘I met a clown today’ on it. It is right on my desk, and I see it every day and think of the special clown that made me smile.”

I suspect Laird Myers would have approved of that “special clown.” Clowns may not yet be as common as doctors in the hallways of hospitals, but they’re not unheard of nowadays. More and more institutions are coming to see (and measure and prove) the value of bringing humor and a truly human touch—a common touch—to oftentimes scary medical encounters.

In fact, I daresay the eminent doctor had a lot in common with the humble clown. Both knew that a bit of wit could advance a serious purpose. Both knew that the heart is as important as the body in healing. Both cared about patients as people.

Those precepts may be only common sense—but that’s sometimes uncommonly hard to find.