



READING SURGEONS, READING PATIENTS

THE LATE EDMUND PELLEGRINO, MD, a pioneering bioethicist, famously characterized medicine as “the most humane of the sciences, the most scientific of the humanities.”

Were Pellegrino still living, he’d surely approve of Reading Surgeons, an initiative at Dartmouth-Hitchcock (D-H) led by Kathryn Kirkland, MD (Med’86), a professor of medicine at Geisel and interim chief of palliative medicine at D-H. Funded by the Arnold P. Gold Foundation, Reading Surgeons aims to promote empathy, compassion, and communication skills among D-H surgical interns.

“You need to be able to ‘read’ patients, basically,” explains Kirkland, a torchbearer of the emerging discipline called narrative medicine. Too often, “doctors approach patients the way you might read a book for plot or might pull out the Cliff Notes and say, ‘I just need to know what happens.’”

Instead, Kirkland believes, doctors should “listen for the metaphors and imagery patients use, the silences and body language . . . all the things that can lead to a deeper understanding of who a person is.”

“If you can train doctors to ‘read’

patients for more than just plot,” Kirkland continues, the doctor’s medical knowledge can be truly integrated with the patient’s verbal and nonverbal input, with what’s important to that particular patient. In turn, Kirkland says, that leads to better diagnoses, better treatment plans, better outcomes. The hope is it may also make doctors more engaged and less susceptible to burnout.

Kirkland has led a number of narrative medicine groups at D-H. Most involve reading and discussing a brief but profound text, then responding to a writing prompt. Several studies show that such practice makes clinicians more attentive to and compassionate with their patients.

Reading Surgeons was developed “to try to intentionally create compassionate surgeons,” Kirkland explains. In the funding proposal to the Arnold P. Gold Foundation, Kirkland and her colleagues noted that “to our knowl-
edge, there are no reports of narrative

Kathy Kirkland, MD (Med’86), believes that by studying literature, physicians can become better, more compassionate listeners.

medicine series for surgical residents such as the one we propose.”

Several quantitative assessments of the program are in process. In the meantime, Lael Reinstatler, MD, now a second-year resident in urology, offers a qualitative assessment. “It was refreshing for me mentally,” she says, to attend these sessions “where they weren’t asking me anatomy, they weren’t quizzing me on medications. It let me forget about everything else I’d been doing and refocus.” And, she adds, “It reiterated that I need to be patient with families and patients — always remember their perspective.”

“Humanities is one of the basic sciences of medicine”—says Kirkland—“if you think of science as a way of knowing.”

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