

INVITED COMMENTARY

“Paper Teachers:” Towards a True Postgraduate Education

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ABSTRACT

Physicians spend many years immersed (drowning?) in their professional literature. There is no way one can keep up with it and most of it is forgettable and sadly inaccurate. This paper’s thesis is that the arts (literature, music, fine art, film) are vitally important to one’s personal and professional development. They provide the Continuous Medical Inspiration that trumps Continuing Medical Education. Although they may not realize it, each of them has personal canon comprised of those works of art that guide them in their daily lives. Herein, thoughts on documenting one’s personal canon are provided.

Keywords: Canon, Fine Art, Literature, Medical Education, Medical Literature, Music, Personal Canon, William Osler

Each week physicians and other caregivers peruse their professional literature. We also gather regularly in Grand Rounds to hear visiting firemen talk about their research. Sometimes, these articles and talks are heady and stimulating. However, most of what one reads or hears will be proven wrong and most will not be remembered. What talks did you hear six months ago? Which recent articles are sticky? One expert tells us that the incidence of melanoma is up; while another opines that the death rates from melanoma have not changed in the past thirty years. Too many “experts” turn out to be key *opinion leaders* (KOLs) who are paid handsomely for their proclamations by pharmaceutical companies even though their conflict of interest statements do not reflect that. Too many articles have been ghost-written by PhRMA. (Moffat B. 2007)

Recently, there was a front page article in the New York Times: “New Drugs Stir Debate on

Basic Rules of Clinical Trials” by Amy Harmon. (Harmon A. 2010) It talks about PLX4032, a potent inhibitor of oncogenic B-RAF kinase. This drug has been developed by Plexxikon, a biotechnology company headquartered in Berkeley, California. Plexxikon is evidently adept at getting unsuspecting journalists to write front-page articles about medical “breakthroughs,” thus bypassing the peer-reviewed “scientific literature.”

The National Library of Medicine (NLM) indexes over 5000 medical journals. In my specialty of dermatology, NLM receives greater than 120 dermatology journals; it indexes 58. Who could read these even if all one did was pore over skin journals? And how valuable a use of our time would that be? John Shaw Billings, the architect of the NLM and creator of MEDLINE wrote: “There is a vast amount of effete and worthless material in the literature of medicine. Our preparers of compilations and

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compendiums, big and little, acknowledged or not, are continually enlarging the collection, and for the most part with material that has been categorized as 'superlatively middling, the quintessential extract of mediocrity.'"(Leonard K, 1967)

John Ioannidis, an infectious disease specialist at Tufts Medical School and the University of Athens, goes one step beyond Billings. His 2005 paper in Public Library of Science – Medicine (PLoS Medicine), "Why most Published Research Findings are False," is the most downloaded article in the history of PLoS and has been described by the Boston Globe as an instant cult classic. (Ioannidis JP, 2005) Ioannidis estimates that 90% of the research reported in the medical literature will be proven false. "There is increasing concern that in modern research, false findings may be the majority, or even the vast majority, of published research claims. So, will PLX4032 prove to be a panacea for patients with advanced melanoma? Does its maker, Plexxion, have any conflicts of interests in the Nature article "Clinical efficacy of a RAF inhibitor needs broad target blockade in BRAF-mutant melanoma?" (Bollag G, 2010) This remains to be seen. And what will PLX4032 cost? How will it be paid for? For more on why researchers keep getting it wrong, see: David H. Freedman's book, "Wrong: Why Experts Keel Failing Us – And How to Know When Not to Trust Them." (Freedman D, 2010)

According to Ioannidis' work, most of the material published in the medical literature is, or will be proven, false and according to John Shaw Billings, most published articles are forgettable and not worth our time. In addition, many of our most "respected" leaders are have been co-opted by lavish perks from Big PhRMA. That's the depressing reality. So how does the sentient physician proceed? What is worth her time?

2400 years ago, Hippocrates said:

*Ὁ βίος βραχύς,
ἡ δὲ τέχνη μακρή,
ὁ δὲ καιρὸς ὀξύς,
ἡ δὲ πείρα σφαλερὴ,*

*ἡ δὲ κρίσις χαλεπή.
Life is short,
[the] art long,
opportunity fleeting,
experiment fallible,
judgment difficult.*

This still rings True. We will consider how health professionals might better spend their time in the pursuit of continuing medical inspiration (CMI), which is different from continuing medical education (CME).

Dr. Jonathon Hullah, the protagonist of Robertson Davies' novel, "The Cunning Man" proclaims, "More humanism and less science; that's what medicine needs. But, humanism is hard work and a lot of science is just Tinkertoy." (Davies R. 1995) While extreme, this is accurate.

In a similar vein, the English teacher, John Keating, in the movie, Dead Poets Society, tells his students, "We don't read and write poetry because it's cute. We read and write poetry because we are members of the human race. And the human race is filled with passion. Medicine, law, business, engineering, these are noble pursuits and necessary to sustain life. But poetry, beauty, romance, love, these are what we stay alive for." Over the years, this has almost become a mantra for me.

In his essay on John Keats, William Osler quotes James Russell Lowell: "We reward the discoverer of an anesthetic for the body and make him a member of all the societies, but him who finds a nepenthe for the soul we elect into the small academy of the immortals." (Osler W. 1909)

On the 100th anniversary of Keats' birth, Osler delivered a talk on Keats to the Johns Hopkins Historical Club. He began with: "We have the very highest authority for the statement that 'The lunatic, the lover, and the poet/Are of imagination all compact.'" (Osler W. 1909) Six years earlier, Osler wrote, "Literature has often been enriched by those who have deserted medicine for the muses. But to drink deep draughts at Peirian springs unfits and when the thirst is truly divine should unfit a man for

the worrying rounds of practice. It is shocking to think had Goldsmith secured the confidence of the old women in Bankside, Southwark, we should probably never have known the Vicar, Olivia or Tony Lumpkin. Still worse, to think of what we should have lost had Keats passed on from a successful career at Guy's to obtain even a distinguished position as a London Surgeon! Happily, such men soon kick free from the traces in which the average doctor trots to success." (Cushing H. 1940)

And the physician-poet, William Carlos Williams in his long poem *Asphodel* wrote:

*Look at
what passes for the new.
You will not find it there but in
despised poems.
It is difficult
to get the news from poems
yet men die miserably every day
for lack
of what is found there.*

Around twenty years ago, I asked myself "will you spend your life lost in a sea of minutiae, most of it unremarkable, or do you try to find some Truth on this planet? Truth handed down over the millennia by mentors culled from the Academy of the Immortals, not from my professional societies!

This is not a new idea. The Roman poet, Horace (65 BC – 8 BC), wrote: "omne tulit punctum qui miscuit utile dulci, lectorem delectando pariterque monendo. (*He wins every hand who mingles profit with pleasure, by delighting and instructing the reader at the same time.*)

Great literature is sweet in that it delights our senses, but it is also pregnant with meaning. William Osler, befitting the times he lived in, was more controlling than today's professors, and so he directed his medical students at the new Johns Hopkins Medical School to read certain books for a half hour before retiring in the evening. This was the genesis of his *Bedside Library*. Today, his list, while worth perusing, is sadly dated. My colleague, Mike LaCombe and I recently edited a book on Osler's *Bedside*

Library. (Lacombe MA & Elpern DJ, 2009) It is as an introduction to the world's great literature for physicians with essays on the books in Osler's *Bedside library* plus twenty other works about which Osler wrote or spoke. LaCombe and I recruited leaders in the medical humanities to discuss why these works appealed to Osler and why the modern medical reader should consider reading them.

The internist Nicholas Davies wrote a fine piece for the *British Medical Journal* in 1989, confessing his "Reading Binges." (Davies NE, 1909) It is well worth perusing. In this essay, Davies wrote: "It has come to pass during the past 19 years that I have developed the wonderful habit of annual reading binges. Despite being an avid reader all my life, there are literally hundreds, perhaps thousands of books that I want to read but never seem to get around to. Therefore, each summer I reserve a week to acknowledge my bondage to reading and to indulge myself in the pleasure of becoming immersed in the world's great literature."

He goes on to relate that that while having "dinner one evening in Atlanta with Stephen Lock, then editor of the *BMJ*, we were talking about reading for pleasure and I said that I usually stayed with the classics or with books that seemed likely to become classics. He agreed with this plan and said something to this effect, 'Yes, Nicholas, you might have five hundred more books that you can read in your lifetime. Stick with the best.'"

Sadly, Davies, only a few years later in 1991, when President-Elect of the American College of Physicians, was tragically killed in a small plane crash while on official College business. The ironic running head of *Reading Binges* is: "If there is nothing to read in heaven, I am not sure I want to go." (Aristides, aka Joseph Epstein)

There are many of books that can help one choose what to read. Harold Bloom wrote, "The *Western Canon*." The novelist, Francine Prose, whose mother and brother are physicians wrote "Reading Like a Writer." Robert Coles has a fine book, "The *Call of Stories*." The novelist Pat Conroy recently published, "My *Reading*

Life.” For me, the most important work in this area is Mark Edmundson’s seminal book, “Why Read?” (Edmundson M, 2009) In it, he writes:

This book is written for the student and potential students of literature—to all those who might dream of changing their current state through encounters with potent imaginations.

Much of what teachers can offer, you can provide yourself. It is often a simple matter of knowing where to start.

He goes on:

Two related activities are central to a true education in the humanities. The first is the activity of discovering oneself as one is in great writing. The second, and perhaps more important, is to see glimpses of a self, and too, perhaps, of a world that might be, a self and world that you can begin working to create.

“Universities have become sites not for human transformation, but for training and for entertaining. Students read to enjoy but not to become other than they are.” Edmundson tells us that the goal of our reading is to become “better than we are” as healers, as physicians and as individuals.

A few years ago, after studying Edmundson’s book, I decided to evaluate my own “postgraduate education” at the feet of the masters I’ve selected as my Immortal Mentors and came up the idea of generating my own personal canon. Gradually it dawned upon me how idiosyncratic one’s canon is and how it can change over time. While Osler prescribed for his students a Bedside Library, it would be hubristic today to mandate my canon to others.

So, what is a personal canon (PC)? Simply put, “it is the choice of books, essays, poems (or other creative works) that we carry around with us as our teachers.” This is not Nicholas Davies, Mark Edmundson, Francine Prose, Harold Bloom or my canon. A PC is that which you as an individual reader have chosen from

all that has been transmitted to mankind over the millennia by members of the Academy of the Immortals.

This is reminiscent of the 12th C Japanese monk, Yoshida Kenko who wrote:

To sit alone in the lamplight with a book spread out before you, and hold intimate converse with men of unseen generations - such is a pleasure beyond compare. (Kenko Y, 1998)

Each of us will generate from her or his own “Academy of the Immortals” a core library, which will be one’s PC. Each of us incorporates the wisdom from a finite number of books, pieces of music, art masterpieces, and/or movies into our personas. Each selects her favorite mentors at whose feet we sit in awe.

Freud is supposed to have said, “Everywhere I go I find that a poet has been there before me.” Emily Dickenson expressed what I have just penned about a PC better.

*The soul selects her own Society --
Then -- shuts the door --
On her divine Majority --
Present no more --
Unmoved -- she notes the Chariots -- pausing --
At her low Gate --
Unmoved -- an Emperor be kneeling
Upon her Mat --
I’ve known her -- from an ample nation --
Choose One --
Then -- close the Valves of her attention --
Like stone --*

Who will you select as professors in your own personal academe? The works you choose, to paraphrase Harold Bloom, “will not make us better, and not make us worse, but may teach us how to overhear ourselves when we talk to ourselves. Without such a Canon, we are in danger of ceasing to think.” (Bloom H. 1995)

I had been reflecting about a “PC Project” for a number of years and now charge you to start thinking about creating your own canon. In Appendix 1, you will find samples of canons by

William Osler, Nicholas Davies, Walter Shelley David Biro and me.

The Brooklyn dermatologist-writer, David Biro said this to me about a PC:

I'd like my physician to have read all the great works of literature that have moved me in the past. And I say this not because I necessarily believe that reading will make a physician more caring and sympathetic but because it can't help but enlarge him or her; broaden his perspectives -- so that his only focus is not just the disease and its treatment and that perhaps he may come to possess an inkling, maybe even an understanding of, the bigger picture.

Over time, the composition and format of my PC has changed somewhat. Presently, I envision it as including those books, essays, poems, works of art, musical compositions, and movies that one keeps turning to, and that are constant companions in our daily lives. Regarding his own immortal mentors, Osler said in a 1905 address to the students at Guy's Hospital:

Carefully studied, from such books come subtle influences which give stability to character and help to give a man a sane outlook on the problems of life. Sealed early of this tribe of authors, a student takes with him a compagnons de voyage, lifelong friends whose thoughts become his thoughts and whose ways become his ways. Mastery of self, conscientious devotion to duty, deep human interest in human beings – these best of all lessons you must learn now or never...(Cushing H. 1940)

Perusing the PCs listed on our Personal Canon website can help one appreciate the heights to which the thinking giants who created the works we esteem can transport us. (Personal Canon Blog, 2014)

What will your PC look like? What works of literature, art, music are key to the enrichment of your own life. What helps guide you over the rough places. The PCs we are proposing here addresses the contributors' ideas of what

constitutes “creative reading, listening, viewing” for the physician, nurse, future caregiver or other health care professional. It is taken from the great smorgasbord of the world's literature and art. In Emily Dickinson's words, “the soul selects her own Society.”

Like her, each of us selects a few boon companions from the known and unsung treasures we encounter. My thesis is that spending time with great minds, through their writings, art, and music is essential to being a complete physician, healer, care giver, patient.

The Exercise

I would like to ask you to select ten books, poems, essays, articles, movies, musical compositions, works of art that quickly come to mind as those that have greatly influenced you or that you would want your students, trainees or colleagues to have read. These do not have to be classics (indeed our lists contain contemporary books and essays that are inspirational as well as works that have been in existence for hundreds or thousands of years). The distinction Horace makes in *Ars Poetica* fits here. He divides good authors into those who simply delight and the great ones who mix the useful with the sweet: “qui miscuit utile dulci.” This is where the Canon Project is aims.

To date, I have collected over fifty personal canons. Some respondents have listed individual poems. Others have included movies. One student submitted a musical canon – and it was amazing!

I have placed these canons on a web site and made them available to all medical libraries.¹⁷ They will form a core humanities library of sorts for health profession students who wish to look further than their science and technology.

“He that would bring home the wealth of the Indies, must carry out the wealth of the Indies. (Emerson) There is then, after all, creative reading as well as creative writing.” This is what we are looking for: your idea of what ‘creative reading’ for a physician, nurse or other health care professional should comprise.

The Canon Format is as follows:

Author. Name of Book. One to two sentence as to why it was selected

Example:

1. To Kill a Mockingbird by Harper Lee
Harper Lee's guide to maintaining and relearning perspective in life
2. Man's Search for Meaning by Viktor E. Frankl
One of the most influential works of the 20th C. From the horror of Auschwitz, a psychiatrist's discovery of why and how we survive.

Your Canon should have 10 entries. If you want, you can include a lagniappe.

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