Volume 7, Issue 1



A Message from the President Physicians as Writers

Greetings, fellow Oslerians!

"More doctors have achieved fame in literature than members of any other profession." —Sir David Waldron Smithers, This Idle

Trade: On Doctors who were Writers

Sir William Osler encouraged the physician to surround himself with books that informed his skill as a physician and also improved his mind, finishing each day with a half hour reading before "the plasma sets in the periganglionic spaces of his grey cortex." He also indicated that great ideas could be inspired from literature, and some ideas and questions were as relevant now as in the age of Pericles. He was referring to the way literature could inform the physician, but he was also aware of the many physician writers whose writing was informed by their medicine. Monro notes that Bibliotheca Osleriana has ninety poetphysicians, and there are many more physician writers in the collection.

It has been noted that an unusual number of doctors like to write and a surprising number have been distinguished in literature. Why would that be? I imagine that it has much to do with the kind of person attracted to medicine, the experience of medicine, and the daily involvement in so many human stories.

Although it sounds saccharine in its repetition, young people enter medicine because they like people and want to help them. They have to be good communicators and listeners. Physicians are practiced observers, trained to see the elements of the patient's story, and enjoy the interaction with patients and families. They are also part of the full gamut of life experiences and events, often in dramatic fashion. Smithers noted that "opportunities for the close observation of the great variety of men and women under conditions of stress, suffering, relief and bereavement has been theirs; indeed they have seen more of the triumph of the human spirit than most." It is no wonder that they might want to stand back and contemplate these issues and record them.

Although medicine can inform the physician's writing, literature can inform the physician's medicine. Smithers

points out that a reciprocal relationship with literature as involvement in literature and the humanities can improve the empathy, diagnostic skills, comforting and understanding of patients.1

It was perhaps more common in the eighteenth and nineteenth centuries to see physicians contributing to other fields because of their broad education in the humanities and general sciences. Monro collected hundreds of physicians who contributed to literature, science, and sports.2 It was also an era when many physicians had difficulty making a reasonable living in the practice of medicine and had to turn their hand to other endeavors just to support their families. We forget that the era of the affluent physician is primarily a phenomenon after World War II.

I include a short list of physician writers in the Table (page 2). Longer lists can be found in the books by Munro and Smithers as well as in the important annotated database of medicine and literature from the New York University College of Medicine.3

Some physicians write about medicine but others write

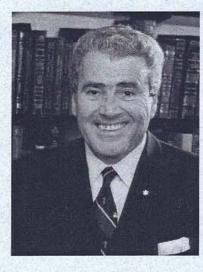
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Physicians as Writers (continued)

literature informed by their experience from their medical training and practice. Oliver Sacks, Richard Selzer and Clif Cleaveland write about the experience of medicine and patients. William Carlos Williams in his poetry, Anton Chekhov in his plays and Sir Arthur Conan Doyle in his Sherlock Holmes adventures have medicine as a background that informs their writing. But one might not guess from their writing that Somerset Maugham, John Keats and Oliver Goldsmith were physicians.

Medicine does provide a unique opportunity to share stories with patients, and to become a part of those stories. Being a good physician requires an understanding of the human condition and all the joys and courage that characterize the lives of so many but also the slings and arrows that lay them low. What better training for a writer.

-Jock Murray

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- Smithers DW. This Idle Trade: On Doctors who were Writers. Tunbridge Wells, Kent: Dragonfly Press, 1989.
- Monro TK. The Physician: as Man of Letters, Science and Action. Glasgow: Jackson, Wylie and Co., 1933 (second edition, Edinburgh: E & S Livingstone Ltd., 1951).
- On-line database of Literature, Arts, and Medicine, New York University School of Medicine. http://mchip00.med.nyu. Edu/lit-med/medhum.html.

Table Some Physician Authors

Danny Abse John Aiken Mary Aikenside Richard Asher Thomas Beddoes Robert Bridges Mikhail Bulgakov **Thomas Campion** Anton Checkov Clif Cleaveland Robert Coles Jack Coulehan Michael Crichton Erasmus Darwin Paul DeKruif Sir Arthur Conan Doyle William Drummond Macdonald Critchley Jacques Ferron Sir Samuel Garth Oliver Gogarty Oliver Goldsmith Oliver Wendell Holmes John Keats

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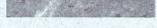
Harold Klawans Michael LacCombe John Locke Saint Luke Somerset Maugham Sir Andrew Macphail John MacCrae Jonathan Miller Silas Weir Mitchell Alel Munthe Sir William Osler Wilder Penfield Walker Percy Francois Rabalais Peter Mark Roget Oliver Sacks Richard Selzer Frank Slaughter **Tobias Smollett** John Stone Lewis Thomas Abraham Verghese Sir William Wilde William Carlos Williams Thomas Young

Halifax Meeting Draws Record Number of Medical Students

The recent meeting in Halifax was attended by two of our charter members (Alfred Henderson and Chuck Roland, whose photographs appear on page 4 of this issue) and by no fewer than sixteen undergraduate medical students (whose photographs appear on page 5 of this issue), which is surely an all-time record. Eight of the 51 papers were given by medical students, and opinion seemed unanimous that the caliber of these papers was high, indeed. There were, to be sure, several modifying circumstances. We had a backlog of William B. Bean Student Award Lectureships awaiting publications; we had a large contingent of students from the University of Texas Medical Branch in Galveston, home of the Osler Scholars program; and we had for our Local Arrangements chair a Pied Piper in the personage of Jock Murray. I should note that Jock (now our president), Claus Pierach (our immediate past president), and Frank Neelon (our president-in-waiting) have all been successful in their endeavors to encourage students toward the medical humanitiespositive role models for the rest of us. I was struck by how much the students seemed to enjoy the meeting, and I hope that others, like me, returned home with a new resolution: Sponsor a student!

Clyde Partin is researching Henry Gray of *Gray's Anatomy* and would like to hear from anyone with interesting information about this eponymous medical celebrity. He'd also like to hear any anecdotal stories you might have concerning your own memories of using this tome. Clyde's email address is: Clyde_Partin@emoryhealthcare.org





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Pictorial Highlights from the 2006 Annual Meeting



*You guessed it—that's not Jock, at least not yet! The statue is that of Joseph Howe (1804-1873), "the great tribune of Nova Scotia," who, as a defendant in a libel suit, paved the way for freedom of the press in Canada.

More Pictorial Highlights



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Still More Pictorial Highlights



*Front row (left-to-right): Simon Hanft (San Francisco, California), Chryssa McAlister (Halifax, Nova Scotia). Stephen Ratcliff (Galveston, Texas), Claire Hoverman (San Antonio, Texas), Ashley Gallagher (Galveston), and Jeffrey Cone (Galveston). Back row (left to right): Lee Hampton (Carrboro, North Carolina), David Diaz (Philadelphia), Chris Geddes (London, Ontario), David Rider (Galveston), Serena Tan (Durham, North Carolina), Brian Brendel, Jr. (Galveston), Zeline Ward (Galveston), David Ming (Galveston), Carla DeJohn (Galveston), and Margaret Wardlaw (Galveston).

AMERICAN OSLER

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Aequanimitas

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The American Osler Society has been founded for the purpose of bringing together members of the medical and allied professions who are, by their common inspiration, dedicated to memorialize and perpetuate the just and charitable life, the intellectual resourcefulness and the ethical example of **William Osler** (1849-1919). This, for the benefit of succeeding generations, that their motives be ever more sound, that their vision be on everbroadening horizons, and that they sail not as Sir Thomas Browne's Ark, without oars and without rudder and sails and, therefore, without direction.

Call for Abstracts for 2007 Annual Meeting in Montreal, Canada, 30 April-3 May

The Board of Governors will meet on Monday, 30 April. Assuming that we once again have a surplus of abstracts, we will meet through noon on Thursday, 3 May. We anticipate that the Thursday sessions will overlap with events scheduled by the American Association for the History of Medicine, and we are again exploring the possibilities for a joint session.

For several years we have received more quality submissions that can be accommodated. The Program Committee will be chaired by the First Vice-President, Francis A. Neelon. Please note the following guidelines for submission of abstracts (some of these are required for Continuing Medical Education credits):

- Abstracts can be sent by e-mail to: smitche@gw.mp.sc.edu or by regular mail. If sent by e-mail they must be received by 1 November 2006; if sent by regular mail, they must be received by 15 November 2006. Early submission is encouraged. Abstracts submitted by e-mail will be acknowledged. However, we will not be responsible for lost e-mail submissions.
- 2. The abstract should be no longer than one page. It should begin with the complete title, the names of all co-authors, and the corresponding author's mailing address, telephone number, FAX, and e-mail address. This should be followed by a two— to three-sentence biographical sketch indicating how the author would like to be introduced (This will probably be your entire introduction. Don't be modest!). The text should provide sufficient information for the Program Committee to determine its merits and possible interest to the membership. The problem should be defined and the conclusions should be stated. Phrases such as "will be presented" should be avoided or kept to a minimum.
- 3. Three learning objectives should be given after the abstract. Each learning objective should begin with an active verb indicating what attendees should be able to *do* after the presentation (for example, "list," "explain," "discuss," "examine," "evaluate," "define," "contrast," or "outline"; avoid noncommittal verbs such as "know," "learn," and "appreciate"), which is required for Continuing Medical Education.
- 4. A cover letter should state:
- Whether any of the authors have a potential conflict-of-interest such as direct financial involvement in the topic being discussed, and whether there will be any mention of off-label use of drugs or other products during the presentation.
- Audiovisual requirements for the presentation (e.g., computer and LCD or 35 mm projector).
- Optional: Whether the author(s) insist on a time slot longer than 20 minutes (Our experience
 at the 2004, 2005, and 2006 meetings indicates that 20-minute time slots, with the papers
 carefully rehearsed and timed to 15 minutes, work quite well for nearly all presentations).

Abstracts will be accepted by e-mail up until 1 November 2006 (smitche@gw.mp.sc.edu) or by regular mail up until 15 November 2006. If submitting by regular mail, please send five copies of the abstract, a computer diskette containing the abstract (ideally in Microsoft Word format), and a cover letter to: Charles S. Bryan, Secretary-Treasurer, American Osler Society, Two Medical Park, Suite 502, Columbia, SC 29203. Again, the deadline for receipt by e-mail is 1 November 2006 and by regular mail 15 November 2006.