

their pain. Frank writes, “people tell the stories they need to tell in order to work through the situation they are in.... When experience becomes an object for what is now a mutual involvement, the teller gains some distance between what is being lived and what is being told. Only at this distance can actions — including interpretations — be perceived as possibly having alternatives, thus making change imaginable.”⁴

So I pulled up a chair beside Helen. I sat and I listened. Being half her age, I did not have her life experience or knowledge of her perspectives as the basis for making assumptions about how she might feel or ought to feel. It was important to accept her story and in doing so, honour and validate her suffering. I encouraged her to share her thoughts on meaning and purpose, spirituality, supports and hope.

Over time, I have become aware that a humanistic orientation benefits not only the patient, but the physician as well. In truly listening, in suspending our own perspectives and agenda, we are offered the privilege of learning how others deal with, and make sense of, suffering. Frank believes that “humans do have to suffer; call it our existential destiny. But there are better ways to suffer; call those ways grace.”⁴

In medicine, we often bear uncomfortable witness to the reality of what experience has in store for many of us. In listening to our patients, we learn invaluable lessons from those making their journey ahead of us.

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Poem

Imperfect knowledge

My toes wriggled, skeletal
within new shoes —
big toe, little ones —
as x-rays passed through me,
no worry of roentgens or rads.
I stepped off the pedestal, laughed,
and the shoe salesman smiled,
said “Look again, if you like,”
and we both watched
the goodness of the fit.

My father, a general-all-around doc,
made use of x-rays too.
How many chest films did he perform,
set fractures under fluoroscopy,
not realizing danger of overexposure,
no lead to shield his body.

In the end, did it matter?
Heart disease caught up with him,
his hundred-patient days,
not cancer.
After the first coronary,
his face a fractured moon,
grey within the mist
of a plastic oxygen tent,
I thought he would break apart,
never return to us.

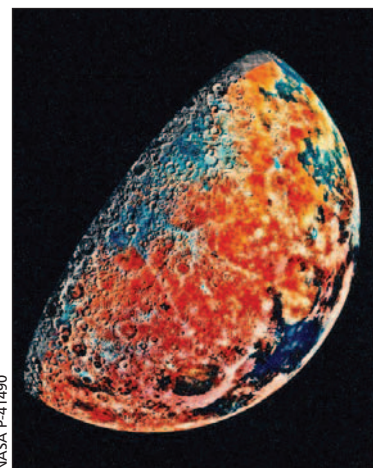
Before the lethal second blow,
I saw him in the kitchen,
taking red pills from the fridge.
“Estrogen,” he said.
“They tell me it’s good
for my heart.
“I’d grow breasts, if I had to.”

Yes, yes, I hoped then —
but now know
it wasn’t so.

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Dr. Bronson’s father, a general practitioner, was the inspiration for this poem; others are gathered in *Search for Oz* (Padishah Press).



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