

## Hearing the patient's voice

■ Cite as: *CMAJ* 2020 January 6;192:E13-4. doi: 10.1503/cmaj.191535

“I wanted something that wasn't tied into my practice,” Dr. Michael Schweitzer says about his decision to delve into fantasy writing. “Something separate to give me escape, as opposed to just being consumed by medicine.” In fact, the Hamilton-based family physician began writing fantasy fiction during medical school at the University of Toronto and his family medicine residency in Hamilton, which he completed in 1997. The fruits of his fictional fantasy writing eventually emerged as his *Unending War* trilogy, composed of *The Curse of Garnel Ironheart* (2003), *The Ashes of Alladag* (2004) and *We, the Living* (2005). The books draw on various passions. *The Curse of Garnel Ironheart*, for example, riffs on the Dungeons and Dragons game, with multifaceted characters on a quest to save the world.

The long hiatus since this initial publishing success is about to end. Schweitzer has reprioritized his practice and community; new stories are now resurfacing.

### Does the writer's voice infiltrate the doctor's office or influence your outlook with patients?

There's an old saying I follow: *develop a hobby or grow old and boring*. If you're writing about what you did in real life, you're bringing your real life into your hobby.

### How do you prioritize writing?

In medicine, you learn about balancing priorities. I always wanted to write a bigger story, but I never had the time with all the schooling. My practice has always been my priority. My head needs to be in the game, for my patients' sake. When it came to free time, if I had a choice about how to spend an afternoon, then sitting down and writing was something I was happy to do.



Dr. Michael Schweitzer: “Really good fantasy tackles a concept and explores our issues in colourful and imaginative ways.”

Photo courtesy of Michael Schweitzer

### Did you simply sit and write? How did you learn to compose novels?

I'm imitative. I've read widely and I mimic the styles that appealed to me.

### What writing skills can you apply to your practice, even though you try to separate those worlds?

There's some kind of humanizing effect behind storytelling that you learn as you write. It teaches you about other people and how to empathize with another person in other situations. In practice, I'm hearing the patient's voice, when they're telling the story. I'm looking for details, how they describe things, and then I try to relate to it, becoming part of their story.

### Do you imagine yourself as the narrator in their lives?

You're not the narrator. You're just another character.

### That seems like a profound link between your art and your profession.

The dirty truth of writing fiction is that there are only so many stories to tell. Most stories have similar plots. So why do we read so many of them? It's because of the characters. We remember the stories we like for the characters. That's one of the brilliant parts of *The Lord of The Rings* trilogy. J.R.R. Tolkien focuses on the hobbits — the regular, powerless and timid folks who are swept into world-changing events and keep company with incredible heroes while confronting terrible villains.

The whole time we can relate — *what if that happened to me? Would I handle it like them?* These heroes are struggling to succeed, but they're regular, like me. The well-drawn, unique personality makes a story memorable.

Now, look at the medical side. A gallstone is a gallstone is a gallstone. Why do I remember some patients and not others? Why do some cases feel interesting or fulfilling and not all of them? Because to an extent, the patient is a character, too. We have to look at our patients not as diagnoses, but as full people with unique personalities. Each patient offers a new story to become part of, hopefully in a good way. Relating to patients, finding common ground so that we can understand them, is a huge part of medicine and one that's underemphasized.

### What about your own characters? Any favourites from your trilogy?

Donal Quickhands, because he was having fun through much of the story (except for the parts when he wasn't). Not easily enthralled, he stayed grounded, giving the story a lighter air.

### Can you further explain your attraction to fantasy?

Fantasy and sci-fi are great ways of taking modern-day problems and ideas and putting them into a fantastic setting. Really good fantasy tackles a concept and explores our issues in colourful and imaginative ways. Tolkien and dark fantasy writer Stephen R. Donaldson were my two biggest

inspirations while writing the trilogy. Tolkien in particular opened my eyes to the potential of the genre. The idea persists that, in the end, good wins. In the end, even if there's a setback, good wins, and the hero emerges. In the end, we have a good future.

### Can you share advice for writers hoping to balance a profession and writing?

Don't procrastinate; just dive in. Doctors should never forget that the patient is why we do what we do. That's the ultimate thing for me. It's not the gallbladder in room 14. It's a human being. They have a story, a background. You never forget that we are here for them.

\*\*\*

The intersections between medicine and art often evade acknowledgement. But Schweitzer detected and cultivated a beneficial relationship between them, linking, as though through symbiosis, the duties of doctor and writer. Enriched by the fellowship between healing and storytelling, Schweitzer's planning a return to writing. As he informed me, "There are only so many hours in a day, but the books are in my head." This time, his novels will be better equipped with the insights of the characters he encounters daily, in print and practice.

#### Robert Pasquini PhD

Kwantlen Polytechnic University,  
Surrey, BC