The Voices of Neurosurgeons: Doctors' Non-Medical Writing

Mark Bernstein

ABSTRACT: Biomedical publishing is an integral part of medicine – both to those who produce it and those who consume it to improve the care of their patients. Non-medical writing by surgeons usually takes the form of creative non-fiction, generally reflective essays on moving and emotionally charged situations such as working in the trenches in war-time or in natural disasters, or dealing with individual patients. Such writing is both creative and cathartic for neurosurgeons, and can help educate patients thus improving the doctor-patient relationship. The purpose of this article is to encourage fellow neurosurgeons to pursue this enjoyable and valuable endeavour, to utter a call to arms so to speak.

RÉSUMÉ: La voix des neurochirurgiens: les écrits non médicaux des médecins. La publication biomédicale est une partie intégrale de la médecine, tant pour ceux qui la produisent que pour ceux qui l'utilisent pour améliorer le soin de leurs patients. Les écrits non médicaux de chirurgiens prennent généralement la forme d'essais livrant leurs réflexions sur des situations bouleversantes et pleines d'émotions comme le travail dans les tranchées en temps de guerre ou lors d'un désastre naturel ou sur le soin de patients particuliers. Ces écrits sont créatifs et ils sont également cathartiques pour les neurochirurgiens. Ils peuvent également aider à informer les patients et ainsi améliorer la relation médecin-patient. Le but de cet article est d'encourager mes collègues neurochirurgiens à poursuivre cette activité agréable et utile : c'est en quelque sorte un appel aux armes.

Can. J. Neurol. Sci. 2007; 34: 121-123

No one questions the importance of neurosurgeons and other medical practitioners publishing biomedical papers in medical journals. It imparts useful and novel information to our colleagues and peers that can help us all better understand the diseases we treat, and/or change the way we practice, to the benefit of our patients. Biomedical publishing is also extremely satisfying for authors to see the tangible product of their hard work, whether it be basic laboratory or clinical research. It is also an important and necessary ingredient for career advancement for those who have chosen academic positions. Finally, even if one takes a cynical approach and questions what direct benefits accrue from biomedical publishing, no one can dispute that it is a testimonial to the fact that we neurosurgeons and neurologists are inquisitive and will never stop studying the diseases that hurt our patients until we win as many rounds as we can in our fight. It empowers our profession and us practitioners of it to know there is an unstoppable force expanding our knowledge base.

So what is the value of doctors writing *non-medical* pieces? Some neurosurgeons have written historical fictional novels, and some have written biographies of other neurosurgeons.^{2,3}

The "father" of our specialty wrote a Pulitzer Prize winning biography of Osler⁴ and also penned a less well-known collection of stories about neurosurgical, hospital, and army life.⁵ A small number of neurosurgeons have written autobiographies.⁶⁻⁹ Arguably the best writer from within the medical profession, and coincidentally within the neurological sciences, is Oliver Sachs, who has helped bring the complex world of neurology to curious lay readers through his books and has ultimately produced a compelling book of memoir and autobiography.¹⁰

Most non-medical writing by neurosurgeons and other doctors ends up being in a genre combining memoir, journalism,

From the Division of Neurosurgery, University of Toronto, Toronto, Ontario, Canada. Received January 8, 2007. Accepted in Final form February 11, 2007. Reprint requests to: Department of Surgery, University of Toronto, Toronto Western Hospital, 399 Bathurst Street, Room 4W451, Toronto, Ontario, M5T 2S8, Canada.

and creative non-fiction, narrative pieces describing challenging or life-changing experiences working in the setting of natural disasters¹¹ or war, and with individual patients. ^{12,13} It is often done from our reflective perspective as embedded reporters. ¹⁴ A riveting recent example of this is the moving description of working during hurricane Katrina by David Kline, ¹¹ a neurosurgeon in New Orleans. However it was published in a neurosurgical journal ¹¹ and I sincerely hope he has written another version for a lay publication so the public can learn about the experience of a neurosurgeon working in the foulest and most tragic of trenches.

The place to start is the short story, generally up to 1000 words. The value of this type of writing has been recognized by medical publications which dedicate some of their pages in each issue to doctors' creative works; 15 these pages are available to neurologists and neurosurgeons. 16 Some medical tabloid type publications, generally aimed at family physicians and internists, have done likewise in an attempt to recognize and actively encourage doctors' creative writing. 17 Some newer periodicals' sole mission is to address the humane side of medicine, and secondarily to give physicians an outlet and venue to publish reflective pieces about their work. 18

A few contemporary neurosurgeons have succeeded in publishing full-length books reflecting on the trials and tribulations of neurosurgical life¹⁹⁻²¹ and I applaud them for their efforts. My attempt at such a book (titled Demons in the Operating Room: The Joy of Neurosurgery) was returned to me by a New York publishing house with a friendly but direct note suggesting I keep my day job. Years later it still collects electronic dust inside my computer but I have come to recognize that a full-length work is probably not for every aspiring writer. Other non-neurosurgeon doctors have written honest and revealing examinations of the human side of being a doctor^{22,23} and some have collected and edited shorter narratives from a diverse group of physician contributors.²⁴ Some have succeeded in writing fictional books firmly planted in the world of medical practice; such a book by a Toronto emergency room physician recently won a prestigious literary award.²⁵

There are numerous benefits to writing non-fiction short stories. First and foremost, this type of writing provides a wonderful outlet for the creative juices which flow through all of us. Every physician is a person with some creative potential, whether it is painting or acquiring in-depth knowledge about great art, ^{26,27} sculpting, ²⁸ photography, ^{29,30} mastering a musical instrument, ³¹ or maybe more passively as an avid reader or listener to music. However, most neurosurgeons and other clinicians have a demanding mistress/master which does not allow as much free time to develop our creative side as we would like. If and when we do pursue an artistic hobby, many of us turn to writing to help find our creative voice.

There appear to be two kinds of writers. There are great writers, and there are writers who have great material to write about. Most medical writers are in the latter category; some talented ones are also in the former. Most of us are not gifted writers but if we are prepared to be taught, and there are lots of great books on writing, 32-34 as well as university and college courses, and are persistent enough (a trait hardly lacking in neurosurgeons) we may be able to find generous editors at newspapers, newsmagazines, and specialty magazines to provide

us an opportunity to publish material that is perhaps not up to standards of The New Yorker.

Secondly, we can capture unique experiences that non-physicians and especially patients cannot experience the way we do, and that they might appreciate learning about from our perspective. How did we feel when we couldn't help that unfortunate young athlete with acute traumatic quadriplegia? What was going through our mind when that tricky aneurysm burst in the young father of three, his wife waiting nervously outside while we were waging all out war with a land mine in the form of an arterial blister 8 mm big? What was it really like to be in the mud and the horror, trying to care for patients under unimaginable conditions during a natural disaster?

Because of our consummate professionalism we often do not allow ourselves the luxury of reflecting on such events. We don't do a celebration dance after a tough operation goes well and we don't ruminate or flagellate ourselves when the intended good outcome is not achieved. But maybe giving ourselves permission to engage in these most human of activities might minimize the dehumanizing effect our difficult and tiring work can create. In fact, writing about something negative that has happened in the course of caring for a patient or many patients may provide valuable catharsis and therapy just through having relived it by writing it down.

Such pieces can find an important home in lay publications. Sharing our experiences with our patients outside of our clinics can help them understand the trials and tribulations we go through, perhaps helping them as patients through the ordeal they might face. It might also help our profession by having more informed and perhaps more sympathetic patients. Sharing these intimate and difficult experiences with patients may help show the human side of neurosurgery and clinicians, and may even improve the doctor-patient relationship. Possibly the added support from the lay public that communicating with them in this way could produce, might even help us achieve our altruistic agendas and crusades like securing more and better resources.

Finally, publishing non-medical work has a high impact partly because it reaches a large audience. When a neurosurgeon or neurologist publishes a biomedical paper in an excellent journal like The Canadian Journal of Neurological Sciences, several thousand people see it, (albeit the targeted audience the writer wishes to reach). When one publishes in a general medical tabloid usually read by family physicians and internists, perhaps 100,000 see it; in the opinion section of a city's newspaper probably over 100,000 see it; and if one were lucky and gifted enough to have something published in The New Yorker, millions of people could possibly be touched by it.

The opportunity to express ourselves creatively is not only intensely satisfying but perhaps it should be seen as a responsibility of our profession to attempt to bridge the gap of knowledge and understanding between us and our patients. It is not for all of us, but I respectfully suggest there's a great story or possibly 50 in many of you. Writing is another one of the ways we can help patients everywhere – public education through writing for them. Let people be educated and let them inside our amazing world by giving them easier access to our inner voices.

REFERENCES

- 1. Penfield W. The torch, Little, Brown, and Company; 1960.
- Findlay M. William M. Lougheed and the development of vascular neurosurgery at the Toronto General Hospital. Can J Neurol Sci. 1993: 20:337-40.
- Morley T. Kenneth George McKenzie. Fitzhenry & Whiteside; 2004.
- 4. Cushing H. The Life of Sir William Osler. Oxford: Clarendon Press; 1925
- Cushing H. Consecratio Medici. Little, Brown, and Company; 1928.
- Carson B, Murphey C. Gifted Hands: The Ben Carson story. Zondervan; 1996.
- Penfield W. No man alone: A surgeon's life. Little, Brown, and Company; 1977.
- 8. Sharpe W. Brain Surgeon. Viking; 1952.
- 9. Turnbull FA. Operating on the frontier: Memoirs of a pioneering Canadian neurosurgeon. Capilano Publishing, 1995.
- 10. Sachs O. Uncle Tungsten. Knopf; 2001.
- 11. Kline DG. Inside and somewhat outside charity. J Neurosurg. 2007; 106:180-8.
- 12. Bernstein M. A good addiction. The Globe and Mail. 2005 Apr 1; p. A22.
- 13. Bernstein M. Neurosurgical nausea. Maclean's. Vol 116, 2003 Oct 20; p. 64.
- Jefferson G. On being happy and liking it. Br Med Soc J. 1951;
 6:3-4.
- Verghese A. The physician as storyteller. Ann Int Med. 2001; 135:1012-17.

- 16. Bernstein M. The drop attack. Can Med Assoc J. 2005; 172:668-9.
- 17. Bernstein M. Her little hands. The Medical Post. Vol 39, 2003 Sept 30; p. 27.
- 18. Bernstein M. \$250. cell2soul, Vol 1, Number 4, 2005.
- Firlik K. Another day in the frontal lobe: A brain surgeon exposes life on the inside. Random House; 2006.
- Flitter M. Judith's Pavilion: The haunting memoirs of a neurosurgeon. Warner Books; 1998.
- 21. Vertosick FT. When the air hits your brain. Fawcett; 1997.
- 22. Gawande A. Complications. Metropolitan Books; 2002.
- 23. Hilfiker D. Healing the wounds. Creighton University Press; 1998.
- 24. Goel A, Editor. Doctors do cry. Paras Medical Publishers; 2005.25. Lam V. Bloodletting and Miraculous Cures. Doubleday Canada;
- 2006. 26. Johnston P. On the trail of Leonardo. Can Med Ass J. 1998;
- 158:777-9.

 27. Salcman M. The cure of folly or the operation for the stone by Hieronymous Bosch (c. 1450-1516). Neurosurgery. 2006;
- 28. Woodford G. Sculpting neurosurgeon breaks the mould. National Review of Medicine. Vol 2, Number 18, 2005 Oct 30.
- 29. Mendez I. Bolivia. Glen Margaret Publishing; 2006.
- 30. Siddiqi J. In their hands. Thieme; 2002.
- Popp AJ. Music, musicians, and the brain: an exploration of musical genius. J Neurosurgery. 2004; 101:895-903.
- 32. Berton P. The joy of writing. Anchor Canada; 2003.
- 33. Burnham S. For writers only. Ballantine Books; 1994.
- Rand A. The art of nonfiction. A guide for readers and writers. Plume; 2001.