

The Star Physician

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My beloved brothers and sisters, once I saw a sign that said boastfully, "The difficult we do immediately; the impossible takes a little longer." The assignment that you have given to me today I might put in the second category—of the impossible. I doubt if any of us here today, your speaker included, ever felt as though this balance has been achieved. A physician's work may approach the dimension of the work of a housewife and mother; namely, that it is never done. So, every night we have gone to bed with a sense of some frustration—that someone or something has been slighted to some degree.

Nevertheless, if I had it to do all over again, I would still choose the practice of medicine for my life's challenge, for I regard it second only to motherhood as an opportunity to practice each day the commandments that the Lord said were the two most important ones: to love God and to love your neighbor as yourself. For me and for many of you, motherhood is out, so you have to choose the best career of the choices that remain.

In the musical "Man of La Mancha" the song tells us to "dream the impossible dream—to reach the unreachable star." With that in

mind, I'll share a few ideas with you that might assist us in such a quest: to reach the unreachable star—to become a star physician and honored citizen, in favor with God and with man.

The stars have been used to inspire men to greater heights from the first days of history. The Lord taught Abraham about the stars in the heavens before he went into Egypt, that he might teach the Egyptians about astronomy. But even more important than that, Abraham had to be taught that the Abrahamic covenant included eternal increase with a posterity as numerous as the stars in the heavens or the sands on the seashore. So the Lord made of Abraham an authority on the stars.

In our day, we use a word from the Greeks as we speak of an astronaut, meaning literally "one who sails the stars." Next week as we watch the summer Olympics, we will hear the words "star" athlete, or we may hear the word from the Latin, "stellar" performer.

A star is left, a goal, a model; it symbolizes the heights to which our aspirations and accomplishments may reach. Emerson said, "Hitch your wagon to a star." Let us look at five points that might comprise the

1. Communication

The first point is that of communication. The word doctor comes from the latin *docere*, meaning "to teach." Above all, a doctor is a teacher. His crowning responsibility is to teach the patient about his problem and what the natural course of that condition is likely to be. Then, the doctor teaches what medical science may have to offer, along with an explanation about the risks and the possible benefits of that medical intervention. Having taught those two concepts, the doctor then should be available to answer questions and clarify his teaching on the nature of the problem and the risks and possible benefits of treatment. The duty of the doctor is to teach; it is not to make the decision for the patient. The patient is the sovereign; the doctor is the servant. The patient is the principal; the doctor is the agent.

Our record as competent communicators has not always been the best. In the book, *A Private Riddle*, Cornelius Ryan recounted his conversation with the urologist who had recommended a prostatic biopsy, but was reluctant to explain the details of the procedure. He wrote: "It is my belief that every patient has a right to know as much as he wants about the medication or medical services that are prescribed for him. To be fair, I suppose that comprehension, intelligence, and the capability to absorb a doctor's information without developing grave misgivings or morbidity should be taken into account. But I think if a patient questions something, it's a doctor's obligation to explain within those limits. It was clear that this doctor felt so such compulsion."

Subsequently, the doctor was hesitant in giving the result of the prostatic biopsy, and Ryan continued: "I was familiar with such practices. What was unfamiliar was that

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this was happening in a situation where my right to know the specialist's information should not be subject to debate. What knowledge he possessed about the outcome of my tests concerned me more vitally than it could every matter to him."

I don't mean to suggest that Ryan's book is not generally complementary to the medical profession. It is. Yet these selected passages reveal how critically important communication can be. Adequate communication is the keystone of doctor-patient relationships. Patients and families hang on your every word!

Sadly, communication for a physician may be better with patients than it is with his wife. I know in my own situation, when the pressures of work mounted and the involvement seemed overwhelming, that is when Sister Nelson and I would need to leave town, even leave the children, just to be together and talk. Where we went was of secondary importance. But that we went was of primary importance for us, for we could do nothing more important in our lives than assure that

our lines of communication were up and working well.

Even sadder is the fact that communication for some physicians may be better with patients and partners than it is with their Father in Heaven. Prayer is so crucial for balance in one's life. Every father longs for expressions of the heart from his children. How his heart aches when, for some reason or another, there is silence instead of speech. Can God our eternal Father feel any different? A prayer needn't be long or eloquent. A simple "good morning, Father" or "good night, Father" would be so much sweeter than silence! I'll confess that my prayers may have at some time erred in the other direction. When a rare or unusually difficult challenge faced me in the operating room, my daily prayers might even have included a detailed rehearsal of the intricate steps of the procedure planned. Occasionally, revisions thereby came to mind that improved the procedure. Communication benefits both the speaker and the listener.

Show me a star physician and I'll show you a star communicator, with his patients, with his wife and family, and with his Father in Heaven.

2. Compassion

The second point on the star is that of compassion. This was nicely put by the patient who told the doctor: "I don't care how much you know until I know how much you care."

Norman Cousins wrote: "The art of medicine means to show patients we truly care for them."

This takes time, and we all have so little of it. The discipline and art of medicine are means to the end, and not the ends themselves. Medicine constitutes an expression by a highly informed and trained segment of society—an expression of compassion and caring for an individual. All our initiatives, research, educa-

tion, administration, writing, editing, hospital committee meetings, and long hours of exhaustive and intensive labor at the operating table or in the clinic have inherent and fundamental transcendent value only in this respect—it is an awareness of a simple single mission—to love and to care—to have compassion for him or her whom we serve! This expression may provide hope and example to all of humanity.

Erroneously in the minds of some patients, the motivation of the physician is thought to be a financial one. While it is true that he needs to be paid for his services, he is not engaged in a business. He earns money so that he may serve his patients; he does not serve his patients to earn money.

The physician touches the life of his patient in a private and a personal way. This relationship may involve invasion and manipulation of one individual's body by another with the human touch. The tenderest component of that human touch is compassion.

3. Competence

The third point on the star is that of competence. In working with physicians throughout the world whether it be in Asia, Africa, Europe, South America, or on the Islands of the seas, it has been my observation that there is universally a basic drive for competence. This is of great importance.

To digress a moment, I am reminded of the story of a gentleman farmer who cared for his pigs. One day, a friend visited this farmer and found him with a large pig under his arm. He was holding the pig high while the pig ate apples directly from the branches of the tree. The friend inquired, "What in the world are you doing?"

"I'm feeding my pig," he replied.

"What a peculiar way to feed a pig," he said. "Isn't that a time-

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consuming task, holding a pig while he eats that way?"

The farmer replied, "What is time to a pig?"

Competence includes the struggle for efficiency. This farmer may have had more competence than efficiency, which suggests a factor of time in the work we have to do. A competent physician will do only those procedures that he can do as well as or better than others available. Wise referral to others with special expertise is a crucial component of competence. Furthermore, a competent physician knows when his skills should not be administered to the patient. For such a patient the physician should still remember his charge: "To cure sometimes, to relieve often, to comfort always."

I am grateful that we live in a country where good medical care is available to the elderly. This is not so in all nations. To me, the benefits of competent medical and surgical care should not categorically be withheld from an individual simply because he or she is old. In our day, we have seen the remarkable accom-

plishments of Pablo Casals, Dr. Albert Schweitzer, and President Spencer W. Kimball in their later years. Dynamos in their eighties, they have become legendary in their own time.

The prudent use of time is critical to competence. While the admonition to do "one thing at a time" is generally applicable, I find that some things can be done "two or three at a time." I have utilized the time driving on the highways to study foreign languages using the cassette tape player in the car. The stack of correspondence requiring signatures can be signed during intervals that occur while returning telephone calls. Time is conserved if each piece of incoming correspondence is handled once, at once, and not saved for disposition at a later time. One can shave while reading the paper, even while listening to the news on television.

The star physician is a competent one; he shepherds his time frugally and spends that time enlarging the scope of his competence.

4. Character

The fourth point on the star is that of character. Someone once defined reputation as what people think a person is, and character as what a person really is. Reputation and character may not always be superimposable, but I believe they tend to converge the longer a person lives.

A scripture states, "As a man thinketh . . . so he is." As one thinketh, he does. As he does, he becomes. This linkage is well expressed in the words of C. A. Hill:

"We sow our thoughts, and we reap our actions; we sow our actions, and we reap our habits; we sow our habits, and we reap our characters; we sow our characters, and we reap our destiny."

Those traits of character—integrity, honesty, charity, trust, and dependability are so important. Fidelity to contracts written or implied is

understood among physicians of character. Shakespeare said, "This above all to thine own self be true, and it must follow as the night the day, thou canst not then be false to any man."

A physician true to himself, true to his wife (or her husband) and family will be true to those whom he would serve. By the same token, physicians who are contract breakers, at any level, are a blight on our profession.

Character cannot accurately be self-assessed by the physician listening to the plaudits of grateful patients. It is best assessed in solitude—as one measures actions and evaluates thoughts when all alone, when no one else is watching. Here is where character is forged, in the commitment to self-improvement and self-discipline that can only come when one is alone. Honesty, honor, and integrity are part of character and are not unreachable on this point of the star.

5. Cognizance

The fifth point on the star is possibly the most significant. It is cognizance. It is an awareness, a recognition, a knowledge of who we are, why we are here, where we are going. It is cognizance of our relationship to him that created us and to his laws to which we are all subject. For a physician to behave in defiance of these realities is to invite failure and unpredictability that will undermine one's own effectiveness. Or, to state it positively, to harness the power such cognizance conveys will augment the effectiveness of the doctor greatly.

As a physician ponders a patient's problem, one crucial question needs an answer: Is the patient's condition one that will improve with the passage of time, or will it become worse? For example, in time, a fractured rib will heal. It needs only supportive care. On the other hand, fractured chordae tendinae of the

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mitral valve cannot heal. With time, the problems of the patient will deepen. Active intervention is required early to convert the process from one that will not heal, to one that will heal with the passage of time. This distinction can more readily be made by the physician or surgeon who is cognizant that, in himself, he has no healing power to dispense but can alter the course of disease by appropriate intervention. He must depend on the healing powers that are divinely endowed and that are timelessly dependable.

Herein lies the flaw of those who aver that the doctor of today should focus more on providing health care than care of the sick. In truth, even for one's own spouse and children, a doctor cannot maintain health; certainly he cannot provide health. The blessing of good health is a gift from God! The physician is balanced who has faith in his Creator and in the divine laws that pertain to that creation. The star physician will study these laws and be obedient to them—not only in his personal conduct, but in the application of those laws to the benefit

and blessing of the lives of his patients. Then, and only then, is he in partnership with The Great Physician. He who authored the law, healed the lame and the blind, and raised Lazarus from the dead, will be our advocate and our ally, but only upon our cognizance.

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William Faulkner captured the spirit of the star physician, the faithful physician, as he penned these lines: "I believe that man will not merely endure: he will prevail. He is immortal. . . . He has a soul, a spirit capable of compassion and sacrifice and endurance. The . . . writer's duty is to write about these things. It is his privilege to help man endure by lifting his heart, by reminding him of the courage and honor and hope and pride and compassion and pity and sacrifice which have been the glory of his past."

The star physician achieves balance in his service to patients, to community, to church, and most importantly to his wife and children as he shapes his own personal refinement and sharpens the five points on his star. He strives for communication, compassion, competence, character, and cognizance. His quest is to reach the unreachable star. **I**

Notes

1. Cornelius Ryan and Kathryn Morgan Ryan, *A Private Boy* (New York: Simon and Schuster, 1976).
2. Norma Cousins, *Anatomy of an Illness as Perceived by the Patient: Reflections on Healing and Regeneration* (New York: W. Norton and Company, Inc., 1976).
3. Proverbs 23:7.
4. C. Hill, *The Home Book of Quotations*, ed. Boston Stevenson (New York: Dodd, Mead and Co., 1936), 845.
5. William Shakespeare, *Hamlet*, act 3, sc. 2, Polonius's speech to Laertes.
6. William Faulkner, *Essays, Speeches and Public Letters* (New York: Random House Inc., 1965), 119. Address upon receiving the Nobel Prize for Literature, Stockholm, Dec. 10, 1950.



Challenges of the Faithful Physician

Balancing Community, Family, Church, and Practice

Illustration by Mark Roberts

Cecil O. Samuelson, Jr., M.D.

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The title of this presentation implies the existence of challenges and potential problems for the physician in the juggling of the responsibilities attendant to the spheres mentioned. While there are many interesting ways to look at the process of being "faithful," I like the notion of being loyal to one's ideals or values in these important areas. The Bible dictionary in our new scriptures tell us that "Faith is a principle of action and power." Thus, being faithful or loyal to anything should mean that we support, pursue, and defend our areas of interest and involvement in affirmative, active ways. Since "true faith must be based upon correct knowledge or it cannot produce the desired results" (Bible dictionary), our loyalty and faithfulness must be directed to those things that have true value and worth.

The demands and expectations placed on the shoulders of the current LDS physician who is trying to maintain superb citizenship in family, church, profession, and community are heavy, and often potentially conflicting. Before we become buried in self-pity or consumed in wrenching self-analysis, however, let us remember that not everyone may appreciate our plight.

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At the beginning of my academic career, I had the privilege and heartaches of service as the assistant dean for admissions at our medical school. I spent countless hours with wonderful young people who quite literally would have given anything for the blessings of grappling with your problems. In this sense, the unemployed miner or trucker has an advantage: Everyone can relate to his plight and frustrations. Few find much pity for the financially comfortable, socially respected (or envied) physician even though, like everyone else in life, he or she has concerns, disappointments, and worries.

My thesis is that we should try to see ourselves as others see us in terms of capitalizing on the increased, broad privileges and opportunities that are afforded us as physicians by society, rather than allowing ourselves to be trapped in the negative frustrations of over-commitment and unfulfillment.

James N. Kimball, a noted local author, businessman, and social commentator has made some observations that we may find amusing if not insightful. He contrasts physicians with himself and almost anyone else and feels maligned. If the doctor works late, he is dedicated to his patients. If the businessman misses dinner with his family, he is "moneymongering" or has troubles at home. If the physician misses a church meeting or comes late or sleeps through the service, it is evidence of his devotion to the sick. If anyone else does any of the above, his testimony or seriousness is questioned. If his beeper goes off and kills the spirit of a meeting or disrupts the concert, the poor doctor never has a minute to himself and so forth. In short, the honored profession of medicine provides the opportunity, in socially sanctioned ways, for the physician to essentially neglect virtually all other areas of responsibility in his life if he but makes the modest effort to practice

medicine well.

While these observations reflect the status and opportunities of physicians in most of our societies, they also hold keys for some of the insidious traps in which we may find ourselves if we are not careful and well grounded in our values, philosophies, and actual practices of daily living. Milton Mayer made the following comment, that unfortunately may contain more than a grain of truth: "One of the things the average doctor doesn't have time to do is catch up with the things he didn't learn in school, and one of the things he didn't learn in school is the nature of human society, its purpose, its history, and its needs. . . . If medicine is necessarily a mystery to the average man, nearly everything else is necessarily a mystery to the average doctor."

We as Latter-day Saint physicians have excuse for neither global ignorance nor ignoring the rest of life. We now have many examples of those in our midst who have sensed the opportunity and responsibility for excellence in multiple involvements and have not paid the unacceptable price of mediocrity in profession, family, or other spheres. Some still hide behind the armored cloak of our professionalism and have earned the same description made by Voltaire of Charles XII of Sweden: "He carried his virtues to such an extreme that they were worse than their contrary vices." Few seriously doubt the desirability of balanced concerns and activities. The difficult question for most of us is how to accomplish all that we wish to do and achieve proper balance in our lives.

In my judgment, balance does not mean equal emphasis on everything we care about all the time. For most of us, our internship year was not only the most intense, but also the most productive medical learning experience of our lives. We could not be where we are today without it, yet so one would accuse

it of being a balanced social or emotional experience. Much could be said in a similar vein about full-time Church missions, for those of us who have the privilege of serving, or even for the short, but intense, experience one has in the labor and delivery room as either a new mom or dad! Thus, being faithful or loyal to those things that we honor means giving them proper attention and emphasis at the proper times in our lives. The chief of staff of a hospital spends time differently than does the physician/bishop. A doctor member of the Tabernacle Choir has different activities occupying his time than does the young physician with several small children who is involved with Pinewood Derbies and polishing shoes for Primary. A key to remember is that there is "a time to every purpose under heaven" (Ecclesiastes 3:1), and that purposes may change even as times change.

A problem for many of us is that as times here changed, we have not yet been able to fully focus on what should be our present, primary purposes. We have achieved our basic goals for which we have worked for many years and are now searching. We have graduated from school and finished our training. We have married the beautiful girl or handsome man of our dreams and may have the precocious children we once dreamed of having. We have a little money in the bank, a nice car, two Sunday suits and find ourselves humming the Peggy Lee song, "Is that all there is?"

That question really holds its own answer for those of us who subscribe to the truths of the Savior's message, but it does provide for us the strong hint that we need to expand our horizons and evaluate what Jesus described as the "thing thou lackest" (Mark 10:21). One of the exciting, yet frustrating, truths of life is that once we get beyond the basics of good citizenship in the home, church, hospital, and town square, that which we lack or should pursue

may be very different for each one of us. My circumstances and opportunities to grow and contribute are certainly different in some substantive ways than yours. Not better, not worse—only yours and mine—distinctive and individual.

Because part of the great challenge before us is to succeed, contribute, and grow, we each need to develop some standards by which to chart not only our directions but also our progress. Many of these measurements such as degrees, specialty certifications, awards, publications, temple recommendations, sandbags stacked, children educated, parents cared for, and so forth, are external and properly so. However, we must never forget the importance and privilege that we may have of internal direction and confirmation of feelings that come from proper conduct and prioritization of our aspirations and values (Doctrine and Covenants 9:7-9). Also, all that we do must be within the confines of the standard set for those claiming discipleship of the greatest physician, Jesus Christ, when he asks, "What manner of men ought ye to be?" (3 Nephi 27:27).

Within the realm of our basic socialization, the promptings of the Holy Spirit become primary and vital because each of us has his own talents which differ quantitatively (Matthew 25:15) but also qualitatively (Doctrine and Covenants 46:11-12). Gratefully, I will not be judged based on Elder Russell Nelson's talents and, therefore, I should not judge myself by them. Soberly, I will have the opportunity to account for Cecil Samuelson's possibilities and, therefore, should keep careful and continuing account of how I am doing.

Assuming that we can agree on the above assertion, how do we wrestle with the multiple pressures, opportunities, frustrations, and potential conflicts we encounter in a productive, progressive way, and not become what Dr. Hal Cole so color-

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fully describes as our own private "guilt and shame committee"? Let me share some notions that I find personally helpful.

We need to remember that most of us are a little like Naaman the leper who sought an audience with Elisha and was resistant to the little or routine things that ultimately are of the greatest importance (II Kings 5). The old parable of the tortoise and the hare should remind us that fits, dramatic starts, and big splashes that lead to unrealistic expectations of ourselves and impossible self-imposed requirements are never so successful as consistent, committed constancy in our pursuits.

The scriptures remind us that growth and development are gradual processes and not events (see Doctrine and Covenants 128:21 and 10:22) and that we should "not run faster or labor more than you have strength . . . but be diligent unto the end" (Doctrine and Covenants 10:4).

The Savior's counsel that we should "render unto Caesar" (Luke 20:25) allows us to allocate our time and resources to various efforts that can then be complementary, rather than competitive. Just as proper suc-

cess in our profession brings blessings to our families, involvements in our Church and communities builds in us greater sensitivity to the needs of our patients and families. Jim Mason's work at the CDC in Atlanta brings success not only to him and his family, but reflects in very positive ways for the Church and our country. We need to remember, however, that no one else has the unique constellation of responsibilities and opportunities that he has. Each does have his or her own, and they are usually much more significant and potentially exciting than any of us suspect.

I take great comfort from the injunction in Proverbs 3:5 that we should "trust in the Lord with all thine heart" but also understand the tremendous importance of our own clear, serious, and regular efforts to think through our problems and situations as President Hugh B. Brown always counseled so wisely.

For years I have been intrigued by an observation C.S. Lewis made many years ago when he described the curious things that happened to the men who devoted their lives to serving on crews of lifeboats off the coasts of England and concluded that "some things worth dying for are not worth living for."

Lastly, I am inspired by the direct, humble declaration of the Apostle Peter who, in response to one making a request based on real need, said, "Silver and gold have I none; but such as I have give I thee" (Acts 3:6). Each of us must learn and decide what it is that we have and then give it to the best of our ability, recognizing that the things that matter most cannot come from anyone else, but also understanding that each of us has limitations and is distinctive in what we can contribute.

I am confident that we can all find increased growth and satisfaction in the challenges and trials of increasing our loyalty and faithfulness to those things we hold most dear.