



# The Oslerian

## *A Message from the President* Aequanimitas in Baltimore

*Paul S. Mueller, M.D.*

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**President  
Paul Mueller**  
**45th AOS President  
installed at the 2015  
meeting at Baltimore**

It was with great anticipation that I looked forward to the 45th annual meeting of the American Osler Society, April 26-29, 2015, in Baltimore—Osler's home for 16 years (1889-1905) and where he accomplished so much as the first physician-in-chief of the new Johns Hopkins Hospital. My anticipation stemmed not only as a long-term AOS member, the 1<sup>st</sup> vice president of the society, and the program chair for the meeting, but also as a former Baltimorean. After finishing my undergraduate studies at Augsburg College in Minneapolis in 1984, I left for Baltimore to attend medical school at Hopkins. My time on the medicine wards imbued me in the Oslerian culture and ethos—aequanimitas—and I stayed in Baltimore for 11 years, completing an internal medicine residency on the Osler Service, a master of public health degree at the School of Hygiene and Public Health, a year as an Assistant Chief of Service (a position created by late Oslerian Victor McKusick), and several years on the Hopkins faculty before returning to Minnesota in 1995 and a position at Mayo Clinic. In other words, re-

turning to Baltimore was a “coming home” for me. I looked forward to seeing fellow Oslerians, attending the presentations, visiting old Hopkins friends, and appreciating the improvements and changes in Baltimore and at Hopkins.

Yet, in the days before the AOS meeting, bad news emerged from Baltimore. On April 12, 2015, an African American man, Freddie Carlos Gray, Jr., was arrested and sustained injuries while in police custody. He was hospitalized and on April 19, Gray died as a result of his injuries. Protests in Baltimore, some of which were violent, followed. After Mr. Gray's funeral on Monday, April 27 (the first day of papers at the AOS meeting) civil unrest intensified with looting and burning of businesses, especially in west Baltimore. The governor of Maryland declared a state of emergency, Maryland National Guard troops were deployed to Baltimore, and a curfew was estab-



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lished. AOS members staying at the Sheraton were greeted with a letter from hotel management regarding the events ("We thank you for staying with us, especially during this difficult time in Baltimore!"). We were eyewitnesses to history.

In *Aequanimitas*, the 1889 valedictory address at the University of Pennsylvania, Osler states, "Imperturbability means coolness and presence of mind under all circumstances, calmness amid storm, clearness of judgment in moments of grave peril, immobility, impassiveness, or, to use an old and expressive word, *phlegm*. It is the quality which is most appreciated by the laity though often misunderstood by them; and the physician who has the misfortune to be without it, who betrays indecision and worry, and who shows that he is flustered and flurried in ordinary emergencies, loses rapidly the confidence of his patients." We are fortunate that the Local Arrangements Committee (LAC) for the Baltimore meeting, the AOS officers, and the AOS administrator, Renee Ziemer, manifested *aequanimitas* as the events in Baltimore unfolded. They were nimble and decisive (e.g., altering travel plans for Monday evening's events at Johns Hopkins Hospital and Welch Library so that they could take place while ensuring safety), cool and collected (demonstrated prominently by President Herbert Swick during his speech at the Welch Library as servers rushed to complete their tasks and return home), and reassuring and calm (to those who were frightened). An enduring image for me is that of fellow Oslerian and LAC member, Steve Achuff, smiling reassuringly and saying calmly "goodbye" as AOS members exited Welch Library for their buses and back to the hotel, while sirens blared and buildings burned in the distance.

Indeed, despite the turmoil in Baltimore, the 2015 AOS meeting was a resounding success. About 120 registered individuals attended the meeting and many were accompanied by significant others. Feedback regarding the meeting was glowing. Nearly 100% of attendees rated the conference 4 or 5 on a 5-

point scale (5 being "excellent"). We are especially grateful for the care, attention, and hard work—largely invisible to AOS members and attendees—of the LAC (Steve Achuff, Chris Boes, Jeremy Greene, Paul McHugh, Tonse Raju, Preston Reynolds, and Joe VanderVeer). Sites for annual AOS meetings are selected years in advance because of the extensive planning that is required—formulating a LAC, booking hotels and special events, arranging for transportation to and from events, along with addressing the logistical aspects of the meeting itself (registration table, publishing the program booklet, audiovisual set up, organizing sessions and session moderators, and so on). Of course, the "glue" that holds it all together is Renee Ziemer.

Our meeting was held at the Sheraton Hotel adjacent to Baltimore's beautiful Inner Harbor. The weather was glorious and walks along the waterfront were refreshing and pleasant (the presence of National Guard troops notwithstanding). Clyde Partin and I took a long walk around and about Federal Hill; from its top, we took in vistas of downtown, the Inner Harbor and Patapsco River, and the Johns Hopkins complex in east Baltimore.

A special memory of the Baltimore meeting was the singing! Led by Oslerian Laurel Drevlow, AOS colleagues kicked off the morning sessions with song (e.g., "My Maryland, My Maryland"). The first session of papers on Monday, April 27 focused on Osler. Oslerian Charles Bryan's paper, "My Dear Remsen: Osler's Polemic Revisited" concerned Osler's famous 1911 letter to President Remsen of Johns Hopkins, in which Osler opposes the idea of full-time, research-oriented professors in the clinical departments. Following his paper, Dr. Bryan gifted a carbon copy of the letter (which was given to him by the late Oslerian Earl Nation) to Nancy McCall, director of the Alan Mason Chesney Medical Archives at Hopkins. Later in the morning, we heard from Bean awardee, Krista Grande, on the development of child psychiatry in Rochester, NY. The morning finished with the John P. McGovern Award lecture, "Leonard da Vinci and the Search for the Soul," given by Rolan-

## President's Message (Continued from page 2)

do Del Maestro. Dr. Del Maestro's lecture was thought-provoking; I heard many AOS members commenting on how much the lecture generated discussions among attendees. (A transcript Dr. Del Maestro's lecture is forthcoming to AOS members and will be available on the AOS website.)

The early Monday afternoon papers focused on disparities. Two papers were delivered by Bean awardees; Angela Castellanos spoke on shifting attitudes towards health disparities highlighting the Office of Negro Health work during 1932-1951 and Matthew Edwards spoke on Nancy Caroline and Peter Saffar's Freedom House ambulance services in the Pittsburgh area. After the last paper of the day, we were whisked away by bus to the east Baltimore campus of the Johns Hopkins University and Hospital.

I was astonished by the growth and development of the Hopkins campus since my departure from Baltimore in 1995. However, I was delighted to see old and familiar sites intact and well-preserved. A highlight of any visit to the Johns Hopkins Hospital is the domed Billings "administration building" within



which is the famous 10-foot tall marble Christ statue, also known as *Christus Consolatus*, by Bertel Thorvaldsen. (This statue, unveiled in 1896, is actually a copy. The original,

unveiled in 1838, is located in the Church of Our Lady in Copenhagen, Denmark.) During my years in Baltimore, I frequently entered the hospital complex by way of the "administration building" to get to class, rotations, and other activities. Seeing the Christ statue, with open arms, reading the Gospel verse inscribed under it ("COME unto ME all ye that are weary and heavy laden and I will give you REST"—Matthew 11:28), and touching Christ's right great toe and looking up at the dome as I walked by were inspiring to me as a young medical student, resident, and faculty

member. And I imagine the same has been true (and will be true for) for many others. (Readers can obtain more information about the statue in an article written by Nancy McCall, who served as one of our tour guides, in *Johns Hopkins Med J* 1982;151:11-19 [Available at <http://www.medicalarchives.jhmi.edu/articles/Christstatuearticle.pdf>].) We also toured the Osler Textbook Room, where Osler wrote his seminal and influential *Principles and Practice of Medicine*. Here, a book was born and medicine was changed forever.

Our dinner Monday evening was held in the West Reading Room of the Welch Medical Library under the gaze of *The Four Doctor* in John Singer Sargent's massive (328 x 272 cm) painting. Of course, the four doctors are Osler, William Welch, William Halsted, and Howard Kelly. The painting was commissioned by the Johns Hopkins board of trustees in honor of Mary Elizabeth Garrett, whose generous gift allowed for the opening of the medical school in 1889. Sargent took nearly a year to complete the painting. The Welch Library dinner menu was based on, but not exactly the same as, the menu of a farewell dinner held in Osler's honor on May 2, 1905 (just before his departure to Oxford, UK) at the Waldorf-Astoria in New York City.

The highlight of the Welch Library dinner was President Swick's address, "Tradition and Change, With the AOS?" He began by highlighting the AOS' success in bringing together people who are "dedicated to memorialize and perpetuate the just and charitable life, the intellectual resourcefulness, and the ethical example of Sir William Osler" for the benefit of future generations. Regarding tradition, Swick recalled Osler's comment to a medical student, "You come now into the society not of mere professors, who will lecture at you from a distance, but of men who are anxious for your welfare... Look upon us as elder brothers to whom you can come confidently and fearlessly for advice in any trouble or difficulty." Swick claimed, "Physicians and medical educators, including those in the AOS, have a duty to preserve the highest values and traditions of our profession, to transmit

## President's Message (Continued from page 3)

those values to succeeding generations, just as we must transmit knowledge to succeeding generations.” Regarding change, Swick acknowledged the dramatic changes in medicine since the AOS’ inaugural meeting in 1971, especially “the explosive growth in medical science and technology” and “the dramatic change in medical practice” (e.g., professional to business model and practice to system model). Swick recalled a 1903 address in which Osler noted, “the times have changed, conditions of practice have altered and are altering rapidly...but we find that [our] ideas are ever old, yet always fresh and new.” With this Oslerian perspective, Swick did not call for a return to the “good old days.” Instead, he asserted the aforementioned AOS purpose statement is “still appropriate” and “more crucial now, whether as historians, or librarians, or archivists, or physicians, a celebration of collegiality, a celebration of coming together for a common purpose driven by ideals that are ever old, yet always fresh and new.” At the conclusion of his address, President Swick received enthusiastic applause from the attendees.

Tuesday, April 28 commenced with papers regarding military medicine including an excellent presentation by Bean awardee, Colten Bracken, on collaborations between Union and Confederate surgeons during the American Civil War. Later in the morning, we learned about novel treatments, medical technologies, and teaching programs. During the afternoon, we heard papers about Baltimore and medical quacks and controversies.

A reception and banquet were held Tuesday evening. Consistent with tradition, the banquet commenced with late Oslerian Philip Leon’s “An Oslerian Grace” (“In discussion and debate, In good fellowship and cheer, Let us pause to celebrate. Aequanimitas, be here.”). For the second time during the meeting, medical students from the University of Texas Medical Branch charmed us with their performance of new song they created, “Oh Willie O”. (A video of their performance is available on the AOS Facebook page.)

Finally, fellow Oslerian Marvin Stone was recognized for his tireless participation in, and service to, our society as the 2015 recipient of the AOS Lifetime Achievement Award.

Wednesday, April 29 began with our annual business meeting, the minutes of which will be in a future edition of the *Oslerian*. Highlights of the business meeting were: we have a new *Oslerian* editor (Michael Malloy); AOS finances are strong; for the Baltimore meeting, 66 abstracts were submitted, of which 46 were accepted and 44 presented (28 by AOS members)—reflecting a strong scholarly interest in our annual meeting; and 12 new members and 4 student members were approved. New members were presented their AOS membership certificates, on each of which is printed “AT MEMORIA BENE REDDITAE VITAE SEMPITERNA QUOD ENIM MUNUS REIPUBLICAE AFFERRE MAJUS, MELIUSVE POSSUMUS, QUAM SI DOCEMUS ATQUE ERUDIMUS JUVENTUTEM” (“But the memory of a life laid down well is eternal and for what greater, or more preferable, gift are we able to bring to the state than if we teach and educate the youth”). These words reflect AOS’ ideals and ethos and President’s Swick’s message regarding the enduring purpose of our society.

Wednesday concluded with multiple excellent papers regarding medical luminaries including Vesalius, Claude Bernard, and Maude Abbott. After the meeting, many AOS members lingered in the hotel lobby, luggage in hand, waiting for taxis. We chatted about how quickly Baltimore meeting passed—as with past AOS meetings—and how much we enjoyed the meeting and visiting Baltimore, despite the civil unrest. Hearing the papers, reaffirming our values, and seeing old friends were energizing. As Osler said, “By no means the smallest advantage [of medical societies] is the promotion of harmony and good-fellowship” (*Can Med Surg J* 1885-6;14:129-55). Moreover, witnessing aequanimitas in the LAC and

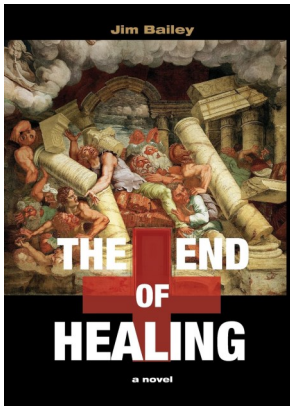


## President's Message (continued from page 4)

AOS leaders and members was inspiring. I am honored to be your president and look forward to next year's meeting in Minneapolis!

— Paul S. Mueller, M.D.

## BOOK REVIEW



*The End of Healing* by Jim Bailey  
(Memphis, TN: The Healthy City © 2014)  
507 pgs, \$27.00  
from Amazon.

## The End of Healing

By  
Jim Bailey

Francis Hunt, the third graduate student, is bright and has “long lithe legs emerging from a short skirt, bountiful wavy blond

This is a splendid book – really two books – that’s worth reading for everyone concerned about how the practice of medicine is trending in this country. I

say two books, because it blends a fictional account that held my interest with a well documented history of how American medicine has evolved over the past several decades. The story concerns a seminar at make-believe Florence College in New Hampshire in which an internist, a surgeon and a nurse practitioner meet weekly for several months to study under Professor Virgil Sampson, to whom they report back each week to discuss their assigned readings. (At the end of the book author Bailey includes those readings as the Health System Syllabus, eight pages of bona fide references from the literature, including monographs and articles I was familiar with from well known journals like *NEJM*, *JAMA*, and *the BMJ*.)

The novel is set just after the millennium; the 9/11 terrorist attack occurs early in the seminar. In the first chapter Dante Newman, the internist, is a senior resident taking care of an elderly woman with a stroke; over the ensuing months as medical technology subjects her to a prolonged, expensive and agonizing death, we revisit her sad case as the novel unfolds. Newman comes from humble surroundings, is \$200K in debt, and is sorely tempted to pursue a coveted cardiology fellowship after his residency. But he chooses to study Medical Systems with Dr. Sampson. His fellow student, Bruce Marcum, a surgeon who comes from an affluent family, is not only enthralled with technology, but is firmly planted in the capitalist tradition, with political and business connections that become evident as the novel unfolds. Nurse practitioner

hair” and a knockout figure. Dante and Bruce vie for her affection as the seminar proceeds. Using dialogue and skillful portrayals of characters and situations, and by bringing in and discussing real articles from the medical literature, the author portrays a healthcare system spiraling out of control, one that puts profits, power and prestige ahead of patients. That part, alas, is *not* fiction.

Author Jim Bailey, MD, MPH, FACP, directs the Center for Health Systems Improvement at the University of Tennessee, Memphis. His abiding passions for the classics, medical history and ethics are evident in the skill with which he weaves the tapestry of this novel. Starting with a Prologue by Dante Alighieri, almost every chapter opens with a quote from the *Inferno*, and we descend to ever lower circles as we accompany the seminar participants through chapters with titles like: The Beauty Industry, False Teachers, The Plan of Healthcare Hell, The Ambulance Chasers, Snake Oil Salesmen, The Image Makers, The Lobbyists, and The Alchemist. The three graduate students and their professor face difficult ethical decisions as the tension builds toward the end of their year together. I won’t spoil it by telling how *The End of Healing* ends, except to quote the concluding paragraph of the Epilogue:

“Most aspiring young doctors have no inkling of the world they are preparing to enter. Most patients have no idea what lies beyond the exam room curtain. But now you know the truth. You have seen beyond the curtain. Everything necessary to find true health and healing is available. The rest is up to you.

“So what are you going to do?”

— Joe VanderVeer, M.D

## OSLERIANS IN THE NEWS

**Irving Kushner** of Cleveland, Ohio received a Lifetime Achievement Award from the Ohio Association of Rheumatology in September 2014. This is the highest award of the Society, presented annually to an individual who has demonstrated outstanding dedication, leadership, and achievements in the field of rheumatology.

**Bruce Fye** announces the publication of his new book, *Caring for the Heart: Mayo Clinic and the Rise of Specialization*, Oxford University Press, March 2015, 704 pages. This book weaves together three important themes. It describes major developments in the diagnosis and treatment of heart disease, explains how Mayo Clinic evolved from a small town family practice into a world-renowned academic medical center, and illustrates how new knowledge, technologies, and procedures stimulated specialization among physicians and surgeons who care for cardiac patients. The book explores the interplay of scientific, technological, social, political, and economic forces that led to present-day heart care. Developments in diagnosis (such as catheterization and echocardiography) and treatment (such as open-heart surgery and catheter-based therapies) are described. Factors that stimulated the creation of new subspecialties (such as electrophysiology and interventional cardiology) are discussed. Order online at OUP.COM/US and enter promo code AMPROMD9 and save 30%.

**The Oslerettes:** Respectively from left to right, Candice Bailey, Petra Kelsey, and Jacqueline Posada are UTMB Osler Student Scholars who made a debut performance of their original score and tune *Oh Willie O* at the Annual AOS meeting in Baltimore to the delight of the crowd. That's Herbert Swick at the far right, but despite his good looks he could not match the Oslerettes in singing talent.



Back row L to R: Drs. Harris, Colgan, Barkin, Hurt, Patel, Travers. Front L to R: Drs. Swick, Frank, Lamb.

### New AOS Members:

**Jamie S. Barkin:** 71, MD, U. Miami, Prof. Medicine, Peds and Onc. Ret. Maj. Gen U.S. Army Reserve; Sponsors: P. Hookman, A Weisse.

**Richard Colgan:** 59, MD U. Guadalajara; Prof. Fam. Med. U. Maryland; Sponsors: C. Bryan, J. Lella.

**John F. Delaney:** 76, MD Pitt 1964; Spons: J. Erlen, T. Benedek

**Maria (Gaby) Frank:** 41, MD U. Buenos Aires 1998; Assist Prof Med. U. Col; Sponsors: T. Frank, J. Molina.

**Eugene Ginchereau:** 72, MD, Pitt, 1972, MLS Duques; Assis Dir PA Dept Cor. Capt. MC, USN; Spons: J. Erlen, T. Benedek.

**John "Skip" Harris, Jr.:** 67, MD Baylor 1973 MBA: Clin Assist Prof U. AZ; Spons: D. Bastron, J. VanderVeer.

**Ryan T. Hurt:** 41, MD Louisville 2005; Assis Prof Med Mayo; Spons: P. Mueller, C. Boes.

**Donald H. Irvine:** 79, MBBS Durham 1958; Former Pres GMCouncil; McGill Lecturer; Spons: P. Miller, P. Mueller.

**Susan D. Lamb:** 43, PhD 2010 Hopkins; PostDoc Fellow; Spons: M. Bliss, P. McHugh.

**Suchin R. Patel:** 37, MD Brown 2004; Clin Assist Prof U. Wisc; Spons: M. Moran, S. Das.

**Lorelei E. Stein:** 65, PhD Pitt 1991; Prog Dir. Arts & Sciences, Park Point U. Pbg, PA; Spons: J. Erlen, T. Benedek.

**Henry "Pete" Travers:** 69, MD Penn State 1971; Clin Prof Path, U. SD; Spons: M. Jones, C. Fulkerson.

### 2015 Bean Award Inductees:

**Colten D. Bracken:** BS So Utah; Presently 4th year at Mayo. Essay: *The Humanity of a Professional Brotherhood*.

**Angela Castellanos:** Presently 4th year at Harvard. Essay: *Shifting Attitudes Towards Health Disparities*.

(continued on next page)

**Don't be bashfull, please forward news of accomplishments and newsworthy items to editor: Michael H. Malloy ([mmalloy@utmb.edu](mailto:mmalloy@utmb.edu)).**



## OSLERIANS IN THE NEWS

(2015 Bean Award Inductee continued from previous page)

**Matthew Edward:** BA Princeton; MPH; Presently 3rd year at UTMB. Essay: *Freedom House: Physicians as Agents of Change.*

**Krista Grande:** BS Willeams; 3rd year at U Rochester, NY. Essay: *A Place for Every Child.*

**Charles Bryan and Clif Cleaveland** received the Centennial Legacy Award from the American College of Physicians. Charles also received a Distinguished Alumnus Award from the Johns Hopkins University School of Medicine. Also, see Charles' *Osler redux: the American College of Physicians at 100*, Lancet 2015;385:1720-1721, for an interesting perspective on the art of medicine.

**Robert Kyle** received the John Phillips Memorial Award for outstanding work in clinical medicine from the American College of Physicians.

**Kenneth Ludmerer** received a Distinguished Alumnus Award from the Johns Hopkin University School of Medicine.

**Marvin Stone** (picture below) was awarded the American Osler Society Lifetime Achievement Award at the Baltimore meeting. Marvin is a past president of the American Osler Society. He is Professor of Internal Medicine and Humanities at Texas A&M College of Medicine and received the Outstanding Faculty Award in Internal Medicine from the Class of 2014. He is also Clinical Professor of Humanities at the University of Texas at Dallas.



**Paul Kligfield**, who with his wife Pam Abrams (pictured next column) hosted a reception for Bruce Fye in their lovely Upper East Side home. Bruce had given an excellent talk at Weill Cornell Medical about the History of Mayo Clinic to about fifty physicians and historians from around New York City. Paul and Bruce share a common interest in collecting books and manuscripts about the history of medicine, cardiology

in particular. Paul's two-story library with its wall lined with historical volumes was the ideal setting for the reception.

(Photo by Joe



VanderVeer on a visit in 2014)

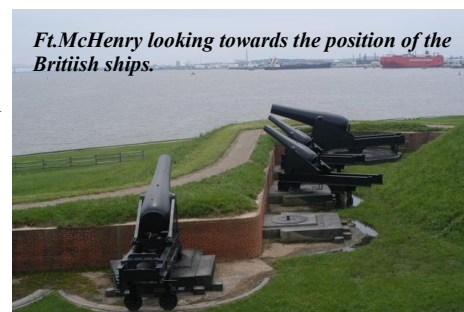
**Conrad Fulkerson, Joe VanderVeer, Mike Jones, and Laurel Drevlow**, offered an opening song on the first day of the AOS meeting with a lively



rendition of Maryland-O-Maryland. The next morning they offered a rousing rendition of the Star-Spangled Banner complete with all verses. It could not have been more appropriate considering the meeting was taking place just a short distance from where Francis Scott Key composed the lines of the poem as he looked on to the

shelling of Fort McHenry from the deck of the British ship HMS Tonnant on the night of September 13, 1814. Key was aboard the ship to negotiate the release of American prisoners being held by the British. Because of the impending attack by the British on Fort

McHenry, Key was not allowed to return to his sloop. Thus, his front row seat for the attack and the inspiration for his verse.



Ft. McHenry looking towards the position of the British ships.

## HISTORY OF MEDICINE &amp; MEDICAL HUMANITIES

## Oslerian Humanism and Professional Identity Formation: An Essay

By Mark Clark, Ph.D.  
Visiting Scholar, Arizona State University

It was my privilege to serve, recently, on a University of Texas Task Force dedicated to proposing strategies for the promotion of our medical students' Professional Identity Formation. The members of our task force were, in my view, exemplary in their collegial generosity and commitment to quality fulfillment of the responsibility we shared; and our work has received high praise across the state and the nation. In the spirit of expanding upon this work, I want to reflect, here, on two matters that perhaps we ought to have considered during our discussions, but that, on the other hand, really came to light through the reflection we undertook.

We rather assumed, first of all, that we shared a philosophy of personhood that we probably did not. Our ambition was to encourage identity formation; but we hadn't explored together what the nature of the "identity" or the "self" is that we are attempting to form. Such an inquiry would have led us not so much to the formulation of a stable philosophy but to the conviction that a collaborative construction of such a philosophy is a crucial dimension of the identity formation we seek to encourage; and that that construction is to take place through conversations that wonder, "What is the nature of the human self vis-à-vis the stories that a person tells and listens to, or cannot tell, or won't?"

Our task force also failed to recognize, I think, that our notions of "professionalism" and "professional identity formation" are grounded in a problematic *aesthetic*—a sense of *beauty* as embodied in behaviors, comportment, clinical performance, standards of moral conduct, and so on. That which a culture (such as medicine) celebrates as "beautiful" is esteemed, prized, and rewarded by members of the culture, particularly the powerful; and people within the culture seek to embody what the culture rewards. As

The Medical Humanities Section is meant to highlight activities in programs for the medical humanities, history, and art across the U.S. and internationally. Articles describing activities and opportunities in this area are requested, as well as essays, prose and poetry highlighting the humanities.

we know in the extreme case of some anorexic adolescents, though, an internalization of the culture's standards of beauty can lead to a literal effacement of the person assimilating them. The outcry of medical students implicitly voiced in the numerous studies noting attenuations of empathic capacities, as well as alarming rates in incidences of

depression, burnout, and emotional debility amongst our medical students testify, I think, to an analogous effacement.

We must listen for that *crie du coeur* given voice by our students: "What's happened to me? What's happened to *me*?" The question testifies to a loss of identity—perhaps to a loss of *soul*.

In our medical school's "Humanities, Ethics, and Professionalism" course, I was leading a discussion on the subject of touch. One of my students who was normally a lively contributor was quiet, and I asked why. The night before, she quietly explained, she'd heard that there was a 16-year-old boy in the hospital who was comatose after being hit by a drunk driver. He was to be taken off life-support the next morning, and Gabby just wanted to spend a little time with him. She wound up staying at his bedside for three hours. She held his hand and cried. When she got up to leave, she kissed his forehead. She wept as she told us the story. Other students listened respectfully, sympathetically; but then two or three noted that she ought to guard against becoming so emotionally engaged. When I told the story to a different group, a physician expressed concern over a HIPAA violation.

I find in Gabby's interactions with that dying boy a *living through* sublime experience by which Gabby has gained an experiential understanding of finitude and of human nature as beautiful beyond words. I can't support a professionalism that would refuse to find a treasure in her tears.

## Making the Case for History in Medical Education

American Osler Society members Jeremy Greene and Jacalyn Duffin co-author a paper with David Jones and John Warner that appeared in the



## HISTORY OF MEDICINE & MEDICAL HUMANITIES

Journal of the History of Medicine and Allied Sciences (J Hist Med Allied Sci 2014;doi:10.1093/jhmas/jru026) that argues that teaching history in medical education is essential for the education of the physician independent of any alliance with the medical humanities. Their arguments suggest the historical perspective of medicine is needed so the physician may become an effective diagnostician and caregiver, “just as they must learn anatomy or pathophysiology.” Read more of their case at this URL: <http://jhmas.oxfordjournals.org/content/early/2014/11/13/jhmas.jru026.short?rss=1>.

If you have not viewed the brief video by Professor Luca Borghi of Italy supporting the importance and dynamism of the study of the history of medicine sent out to the membership by e-mail on behalf of Robert Nesbit, be sure you do at the following URL: <https://www.youtube.com/watch?v=Na4qySADib4>

### UTMB Institute for the Medical Humanities Hosts Welcome Image Awards

By Michele Carter and Jerome Crowder  
UTMB-IMH

New worlds are rapidly being discovered through visual explorations. Technological advances in the creation of images have allowed for new ways of knowing and understanding. As part of their commitment to support public understanding of science, The Wellcome Trust has compiled an unparalleled collection of images related to biomedical sciences and health. This biomedical research charity based in London, United Kingdom was established in 1936 to fund research to improve human and animal health. The aim of the Trust is to “achieve extraordinary improvements in health by supporting the brightest minds”, and do so through the funding of biomedical research as well as the cultivation of the visual archive of Wellcome Images.

The Institute for Medical Humanities invited the Wellcome Image Awards 2015 contest winners to Galveston, Texas as the exhibition represents part of our ongoing research concern with the Visual Image

and its relationship to the Medical Humanities. This exhibit is a continuation of a conversation about the Visual Medical Humanities, which began in 2012 among various faculty and visiting scholars at the Institute. The conversation led to a conference hosted by UTMB in 2014. The conference, titled “The Visual Image and the Future of the Medical Humanities,” brought together scholars, clinicians, and artists to consider and analyze the effect images have on our making sense of the human conditions and the ways in which various technologies and framings shape that understanding. View the images at the following URL: <http://imh.utmb.edu/welcome-image-awards>



### POETRY CORNER



The Frank Neelon Literary Gathering at the recent AOS Annual Meeting had the pleasure of Dr. Rhonda Soricelli's presence and review of several poems by physicians. The selections included “Death” by John Stone (1936-2008) from *In All This Rain*, courtesy of LSU Press, 1980.

*Death*

*I have seen come on  
slowly as rust  
sand*

*or suddenly as when  
someone leaving  
a room*

*finds the doorknob  
come loose in his hand*

“Here in just eight short fragmented lines is the entirety of death—the slow erosion of the body by age or disease, or the sudden snuffing out of a life, the inevitability of it all.” Rhonda presented this poem as an example of the commentary that physician-poets provide on their experiences in medicine rather than the experiences of patients. Ironically, except for the title, death is not mentioned in the verse, yet the imagery leaves little doubt about the topic.

Rhonda Soricelli

## OPINION

## What Would Osler Have Thought

Articles expressing opinions on contemporary issues related to the medical humanities, ethics, and practice of medicine will be presented in this section following review and approval of the Board of Directors.

I recently had the opportunity to interact with the private practice medical community on behalf of my 86 year old mother who had fallen and broken the greater trochanter of her right humerus and had an extensive mid-shaft butterfly fracture of her left. In addition she had extensive bruising and hematomas of her lower mandible where she had crashed into the crock pot that she was carrying which had precipitated the fall when she stepped on the dangling electrical cord. At the time of the event my step-father had the presence of mind to call the EMS who arrived promptly and took her to the closest community hospital with a reputable emergency department. She was stabilized in the ED, then admitted to the hospital 4-5 hours later. My brother and his wife stayed with her the first evening and I arrived the next morning and found her bruised and battered and in bilateral slings. I awaited the arrival of the hospitalist who was overseeing her care, but was informed he had slipped in and out early in the morning and unless needed would probably not be back. I then awaited the arrival of the orthopedic surgeon to get a better idea of the plan of care. It was a long wait. Used to seeing teams of medical students, residents, and faculty rounding at my academic institution, for some reason I assumed it would be a similar situation in a private hospital. That does not appear to be the case in the private world and I was impressed with how quiet and how few people were around. The orthopedic surgeon with whom my mother had seen on other occasions in his clinic prior to her fall, arrived at around 10:30 p.m. Evidently this is his routine, that is rounding late in the evening. Nevertheless, I must admit he was cordial and we discussed several management options for the broken bones. In the course of the 5 days my mother was in the hospital I never saw the hospitalist, but finally talked to him by phone to get a better idea of his plans. The plan included a transfusion of 2 units of blood, because my mother's hemoglobin had dropped by 4 grams

since admission. Unfortunately, the initial I.V. that had been placed in her right hand had infiltrated by the 4th day and the nurses needed to start a new I.V. somewhere. Due to edema and bruising in both hands there was really nothing to stick and after prodding and poking by

the nurses, I finally intervened and suggested they look at her foot. I identified a nice saphenous vein for them and they offered me the opportunity to stick it, but that I refused to do. Fortunately, they were successful and my mother received the transfusion. Fortunately she also got out of the hospital alive, but traumatized by the fall and the experience. I have accompanied her on several outpatient visits to the orthopedic surgeon and am amazed at how little touching and examining of the wounds the surgeon does. Her primary care physician was contacted after she went home and does not make house-calls. Who then to manage her overall care during her convalescence? Now 11 weeks after her fall she saw her PCP who reviewed a bone-density scan she had prior to her fall and an echocardiogram. He failed to examine her, but simply reviewed her previous laboratory findings and ordered some blood work, upped her vitamin C dosage to 1 gram and recommended she take a long-acting bisphosphonate. My mother loves this guy and I must say having talked to him during the course of my mother's convalescence he was very sympathetic to my anxiety about being a medical overseer and immediate care-provider for her. But, alas, he does not make house-calls, so we were left with the home-health nurses who came to the house a couple of times a week, took her blood pressure and asked some inane questions.

The practice of contemporary medicine is a high-tech, high-volume endeavor. The medical community that my mother interacted with have outstanding reputations and are, I believe and hope, sincere people. Nevertheless, the failure to touch and examine somehow seems to miss the very essence of the art of medicine. I think Osler would have been appalled. And if you or your loved ones are ever really sick, hopefully you or your advocate will be close by.

*Michael H. Malloy*

## LETTERS TO THE EDITOR

**From the Editor:** I am initiating this section in hopes that it will provide an opportunity for our diverse membership to express their opinions and ideas through essays and “letter” responses to issues that confront the AOS, medicine in general, and the areas of medical history and humanities. For example, major issues facing the AOS are the future directions and goals that we should set for ourselves. A Task Force has been formed to address this issue that includes the following: Laurel Drevlow, Jonathon Erlen, Richard Kahn, Douglas Lanska, Pamela Miller, Herbert Swick (Chair), Michael Trotter, Joe VanderVeer, and Margaret Wardlaw. Members are encouraged to respond to these Task Force members with ideas, however, a more public forum like the *Oslerian Newsletter*, might provide an opportunity for a greater exchange of ideas. In addition, we might utilize the AOS Facebook page as a “blog” to post immediate responses to issues as the *Newsletter* is published only quarterly. Those Facebook responses could then be published in the *Newsletter* for a more public viewing. So, with that said, I pose to our members the following questions that hopefully we can have some responses to for the August edition of the *Oslerian Newsletter*.

*As stated on our webpage, the purpose of AOS is, “keeping alive the memory of William Osler, and keeping its members vigilantly attentive to the lessons found in his life and teachings.”*

1. Should the purpose of AOS be expanded? If so, how would we do so?
2. Should AOS take a more active role in supporting and promoting the study of the history of medicine and the medical humanities? How could that be accomplished?
3. How vigorous should AOS be in expanding its membership? How do we recruit a younger membership? How selective should AOS be in acquiring new members?

I look forward to your responses and a lively discussion for the August edition of the *Oslerian*.

Michael H. Malloy

Letters to the Editor will be accepted that address issues presented in previous publications of the *Oslerian*, or that are related to contemporary issues in the medical humanities, ethics or practice of medicine. Publication is subject to approval by the Board of Directors.

**Rolando del Maestro** writes: “Very proud to have been awarded the John P. McGovern Award Lectureship at the 45th Meeting of the American Osler Society in Baltimore, Maryland. (AOS Facebook posting, May1, 2015)

**Susan Lamb** (right) Tweets: Delighted to be new members of the American



Osler Society with new member Gaby Frank (left).

**Sargent’s *The Four Doctors***, tweeted from the AOS Annual Meeting Banquet in the Welch Library.





## AMERICAN OSLER SOCIETY

**President**

Paul S. Mueller

[mueller.pauls@mayo.edu](mailto:mueller.pauls@mayo.edu)**Secretary**

Christopher J. Boes

[boes.christopher@mayo.edu](mailto:boes.christopher@mayo.edu)**Treasurer**

C. Joan Richardson

[jrich@utmb.edu](mailto:jrich@utmb.edu)***The Oslerian: Editor***

Michael H. Malloy

[mmalloy@utmb.edu](mailto:mmalloy@utmb.edu)**Aequanimitas**

*The AMERICAN OSLER SOCIETY exists to bring together members of the medical and allied professions, who by common inspiration are dedicated to memorialize and perpetuate the just and charitable life, the intellectual resourcefulness, and the ethical example of Sir William Osler, who lived from 1849 to 1919. Its OSLERIAN is published quarterly.*

**We're on the Web!**

√ us out at:

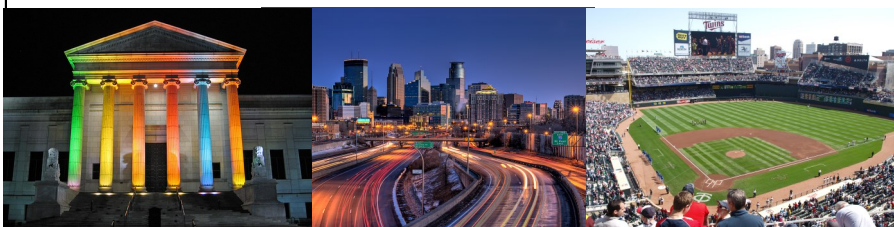
[www.americanosler.org](http://www.americanosler.org)

## Looking Back at Baltimore



*Looking back at the AOS Annual Meeting in Baltimore reminds us of the interesting places, persons, and events that belonging to and participating in the American Osler Society offers us. From the installation of our 45th AOS president (Paul Mueller), to visiting the sites of William Osler's work at Hopkins, to the Freddie Gray riots that mark the challenges that continue to face us as a society, meetings of the American Osler Society are always relevant.*

## Looking Ahead to Minneapolis



*Looking ahead to the 2016 AOS Annual Meeting in Minneapolis suggests the opportunity for another interesting and vibrant gathering at the birth place of Bob Dylan, Prince, Jesse Ventura, and Garrison Keillor. Laurel Drevlow and Claus Pierach will be our local hosts and will be arranging an outstanding venue and schedule of events.*

**Call for Abstracts for 2016 Annual Meeting in Minneapolis, MN, April 30-May 3, 2016**

**Abstracts** should be sent by e-mail to: [aosrenee@gmail.com](mailto:aosrenee@gmail.com) with a copy to [boes.christopher@mayo.edu](mailto:boes.christopher@mayo.edu) and must be **received** by 15 November 2015. Abstracts submitted by e-mail will be acknowledged. Detailed submission guidelines will appear in the August *Oslerian*.

**AOS Members** — Please forward to the editor information worth sharing with one another for **OSLERIANS IN THE NEWS** column, as well as "Opinions and Letters". - MHM ([mmalloy@utmb.edu](mailto:mmalloy@utmb.edu))