Inviting Stories, Creating Medicine
Samuel M. Philbrick
Barrett, the Honors College and the Center for Biology and Society at Arizona State University

Contributing to cultural competence & complementing evidence based medicine.
- Reflective essay writing was employed by medical students who participated in narratives rotations that served disadvantaged youth.2, 10
- Literature was used in program designed to teach doctors and social workers about empathy and the decision to sue for malpractice.22–24
- Large research trials apply mathematical formulas to large populations of patients. Narrative competence enables doctors to understand the unique experiences of patients to which standardized data is blind. 17

Research Methods
In 2003 Arizona State University began a partnership with Mayo Clinic in Arizona under the title Poesía del Sol that brought poets from Arizona State (ASU) students and some, through tenure, Mayor poets to the practice setting. Poets traveled to Mayo hospital where they worked with individual patients personally for share in their illness and hear their patient’s story. Numerous authors, along with Charon, show that:

- Understanding and respecting patients’ narratives is critical for fostering empathy in physician-patient relationships.2, 4
- Literature and reflective writing help students and doctors learn and develop.9, 10
- Narrative medicine has a valuable place alongside other models for clinical practice.
- Respect for patients’ stories may bring economic and physiological benefits to both patient and physician.5

However, in its focus on physician response to stories the current model for narrative medicine may overlook potential for patients to participate in their own healing and care.

The Circuit of Medicine
The “Circuit of Medicine,” a phrase coined by program director Alberto Rios, is the idea that medical interaction has the potential to be a relationship not just of giving advice or care, but of giving care and receiving something in return.

In this program, participants’ interactions with patients showed that interactions between patients and poets were mutually challenging and beneficial:

- Patients were asked to contribute to the process of creating poetry as poets asked about their stories and made personal queries.
- Poets had to step into normal comfort zones to interact with patients who were close to death.
- Despite the difficulty, poets consistently reported that the experience was highly personally rewarding, gained a different view of death and dying.
- Patient response to poetry was almost universally positive, and patients frequently expressed desire to give poems in return.

“A man… was going through the dying process and he had his wife there with him. And they were very resistant to the program… but their nurse convinced them to participate. So we talked to them and we … each wrote a poem for them and we brought it back. Both of them when they heard the poems—they started crying. And we talked to them for a very brief amount of time but you could just see the joy of those moments on his face and on his wife’s. I don’t know, medically, what type of implications that has but I know that for now this man gave me a sense of comfort and relief, and from anything that was going on in his body physically. . . no amount of morphine or medicine may have been able to give him that type of feeling.” - Leah Soderberg

What’s the Utility?
- Paying attention to emotional clues and addressing patients’ personal concerns actually reduces the average time needed for a patient visit.22, 23
- Research shows a strong correlation between perceived lack of empathy and the decision to sue for malpractice.9, 10
- Programs incorporating literature and creative writing can help medical students and doctors understand their practice more completely. 2, 22, 23
- Studies show that interpersonal relationships and emotions can influence the immune system.9, 10 Therefore doctors may influence patient health simply through the empathy they show patients.

Conclusions
Literature on narrative medicine demonstrates its applicability in medical education and stresses the importance of hearing and processing the patient’s narrative so the physician can give the best care possible.

The Poesía del Sol program contributes to this principle of narrative medicine the idea that narrative-focused medical practice may also be a reciprocal process. By actually inviting the patient to share, caregivers enable patients to minimize back to them, and to take an active role in their own healing or dying as givers of their story.

It would be wonderful to see more programs like Poesía del Sol expanded or introduced in other hospitals. More research on the effects of programs that bring humanities to patients is needed to fully understand their effects.

In the field of narrative medicine in general, research on the biomedical benefits of healthy patient-physician relationships, as well as research on how these relationships affect patient compliance would make the benefits of narrative medicine seem more tangible and less theoretical.

Beyond research, implementing more programs in medical schools and hospitals allowing students and doctors to engage literature and write creatively could help students and physicians foster empathy and ultimately better enable them to care better for their patients throughout their careers.

Literature cited
15. Tate Britain, London.
17. Ossler writes at his desk. From the University of Arkansas for Medical Sciences Division of Medical Humanities website.
18. Ossler at work-Contemplation. From the John Hopkins Medical Institutions Medical Archives.