

health officials could not surmount the daunting logistics of polio eradication in rural India. Without the innovation of a simple scoring system (the Apgar score), thousands of newborns might have otherwise perished. Without the impetus to “do right,” medicine might be indistinguishable from other businesses.

Gawande assiduously points out how small, simple changes in routine behaviours lead to drastic changes in performance: the correct and convenient placing of hand-gel dispensers in hospital wards, for example, decreases the spread of methicillin-resistant *Staphylococcus aureus* and vancomycin-resistant enterococci.

Modifying entrenched human behaviour is an onerous task, even more difficult in medicine, a notoriously conservative profession in which change often comes slowly.

In a field entrusted with promoting health and saving lives, this reticence is disturbing, and perhaps the reason that the author highlights so many examples of where change has been successfully implemented with a positive benefit to performance.

The current Iraq war provides one of the most dramatic illustrations. By 2005, American military physicians and surgeons managed to reduce the battle injury mortality rate to roughly 10% from 24%, a level previously unchanged from the Korean War up to the Gulf War in 1990. Their success resulted from meticulous record keeping, careful examination of policies and procedures surrounding medical care in the field, and the introduction of clear measures to alter the *de rigueur* practice.

Perhaps the most important con-

cept Gawande identifies in this book is the role of the “positive deviant,” the individual or group that performs above average in a particular endeavour, be it infection control or the management of cystic fibrosis. He encourages us all to be positive deviants, or at least to find out how positive deviants operate in our respective fields and learn from them.

Recently published in paperback, *Better* is a fascinating read. Gawande writes in a clear conversational style with enough medical jargon to engage physician readers, but not enough to bamboozle the layman. With this book, Gawande reaffirms that he is indeed the thinking doctor’s doctor.

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Book review

To smile and cry humbly at our world

The Enemy

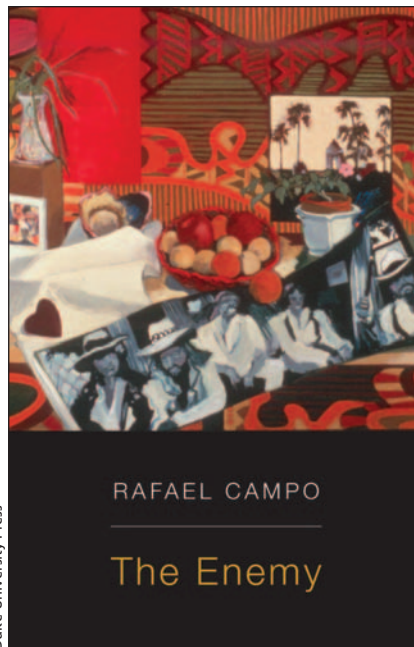
Rafael Campo

Duke University Press; 2007

99 pp \$17.95 ISBN 978-0-8223-3960-1

Rafael Campo, a physician who teaches and practises internal medicine at Harvard Medical School and Beth Israel Deaconess Medical Center in Boston, Massachusetts, is also an award-winning writer and poet whose luminous words explore fear’s dark interiors. “The Enemy,” the title poem in Campo’s fifth collection of poetry not only views 9/11’s traumatic losses — the disillusionment of personal and national security in our millennium — but asks the question of whether the enemy resides inside the self.

The buildings’ wounds are what I
can’t forget;
though nothing could absorb my
sense of loss
I stared into their blackness, what
was not



Duke University Press

supposed to be there, billows of soot
and ragged maw of splintered steel,
glass.
The buildings’ wounds are what I
can’t forget,

the people dropping past them,
fleeting spots
approaching death as if concerned
with grace.
I stared into the blackness, what was
not

Inhuman, since by men’s hands they
were wrought;
reflected on the TV’s screen, my face
upon the buildings’ wounds, I can’t
forget

this rage, I don’t know what to do
With it —
it’s in my nightmares, towers, plumes
of dust,
a staring in the blackness. What was
not

conceivable is now our every
thought:
We fear the enemy is all of us,
The buildings’ wounds are what I
can’t forget.
I stared into their blackness, what
was not.

Like many physicians, Campo writes about other enemies: the transience, passion and mortality of the body's narrative. The son of immigrant Cuban parents, Campo began writing poetry during his childhood to please his mother. Later, he connected to his cultural heritage through reading the poetry of José Martí and Pablo Neruda. Growing up as a struggling gay American youth, medicine offered Campo a professional identity that encompassed his sensitivity to suffering as a visceral expression of the poet's words and the body's torments.

The book is divided into 4 sections. The Enemy, which expresses the sense of unease, war and loss, hints, in "Night Has Fallen," at the shadows of the late Cuban poet Reinaldo Areinas, while in "El Viejo y la Mar" Campo expresses his own exile from the island of his ancestors. The following section,

Eighteen Days in France, appears on its surface as lighter and beautiful, yet it is preoccupied with mortality, as in "Tachycardia at the Cathedral of Notre Dame" where Campo recounts the bivalent pulse of joy and fever: "I'm here, but I think of them, the ones I've left for colleagues to console about the test that's positive..." The third section, Towards a Theory of Memory, includes a translation of one of Neruda's haunting "Cien Sonetos de Amor" ("You will know that I do and do not love you just as life is of two minds.") and, in "A Simple Cuban meal," wistful hallucinated memories ("We gather at the table, even those who left us long ago.") In the last section, Dawn, New Age, Campo in "Allegorical" muses on the tranquillity before our sense of time's finitude in writing: "In the beginning, time was animal. In-

stead of clocks, cocks announced the sunrise... By the seventh day, we had learned to count, when all creation knew peace had run out." In "Crybaby Haiku" Campo archly writes:

What can we know but
smallest pieces, tiny grains
of truth. Just all that.

Campo has been called a political poet because he writes about life's inequalities of class, power, war, sexual freedom and the tyranny of illness. He does so with a musician's ear and an artist's brush and leads us to smile and cry humbly at our world.

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Media

Bevel Up for nursing and medical students

Bevel Up: Drugs, Users and Outreach Nursing

Interactive DVD

Director: Nettie Wild

National Film Board of Canada, British Columbia Centre for Disease Control; 2008
45 min. documentary; 4 hours learning options

Harm reduction, an evidence-based and pragmatic approach for addressing the harms of illicit drugs, has been defined as a "policy or program directed towards decreasing the individual and societal adverse health, social and economic consequences of drug use without first requiring abstinence from drug use." The prototypical harm reduction strategy is the needle exchange program, a form of vector control that seeks to decrease the amount of time that HIV-contaminated syringes spend in circulation. Due to a large volume of scientific evidence, needle exchange is now supported by consensus statements from literally all international public health



Nettie Wild. © National Film Board of Canada

In this scene from *Bevel Up*, street nurse Caroline Brunt draws blood from Rhea Richards in Vancouver's Downtown Eastside.

bodies, including the United States National Institutes of Health and the World Health Organization. Since nurses have become increasingly in-

involved in the delivery of harm reduction programs, a new discipline known as "harm reduction nursing" has arisen, and a compelling new educational