

Reflections of a chief resident

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My father used to say that a surgeon could shave his face in cold water. As I stand on the brink of staffdom, I realize that for years I've turned a blind eye to my own suffering. I would work all night, skip meals, twist my back until my muscles spasmed in pain and then chug an espresso, put on lipstick and make it for brunch. I willingly signed up for this ancient hierarchical madness that persists despite the encouragement of modern society for equality, wellness and balance. I glorified being a physician.

Young medical students, fighting their own will, look to me for guidance on what to do, where to go and what to eat. So eager to please. When they're not, they're harshly judged: who do they think they are, taking a personal day? Doctors don't have time to be sick. They don't have time to study for an upcoming test.

I am now about to leave this system in which I was told what to do, where to go and when to eat. It has all been so black and white for the past eight years. But where exactly am I going? I feel lost.

The truth is that life is grey.

In medical school, I dutifully learned anatomy and physiology from textbooks. In residency, I memorized every single recommendation from every single guideline and regurgitated them on multiple-choice exams. But when a patient prefers not to take the hormonal medication I prescribe as a gynecologist, what else do I offer? This wasn't on my Objective

Structured Clinical Examination. Again and again, I have discovered that patients hover just outside the lines, sit just outside our rules and definitions, and we have to tailor their care. Life, illness, wellness, the human body — all are ruled by some other force that we so strive to know but will never truly grasp. Why did one person get better and the other die?

We are taught to practise our craft, hone our skills, sharpen our sword, but in truth, these fall short. Patients are not a multiple-choice exam, with only one correct choice.

In practice, my patients have taught me to pause and understand their perspective, empathize and ask more questions.

Medicine is an art, not a science. We cannot cage all human suffering into evidence-based medicine. There are many gaps. Physicians are craftspeople who devise solutions to problems based on our limited understanding of anatomy and physiology. But we must be guided by the needs of our patients.

We cannot separate living from healing. We are taught to think we have solutions to it all; we focus on what we know and what has been shown to work before. We scoff at other professions, those that are not evidence based. We ignore medicine that has been around for centuries in other parts of the world, even dismissing our patients when they share what they believe in. Perhaps it is this disconnection

that limits our ability to care for ourselves as well, and the glorification of the long hours, physical pain and mental exhaustion that plague us all.

As I move forward, caring for my patients in a changing world, or perhaps in a world that never changed, I have come to realize that I must take care of myself too. Perhaps by better caring for ourselves, by moving away from the model of training that is centred on service and education with self-care last, we can better care for our patients.

The grey is creeping in around me like a fog. What will my world look like when it has settled? I see that the system is flawed, and that I am flawed with it. I was trained as a soldier and now I see I must be an artist. I hear artists are sensitive souls; I bet they shave in hot water, with soap.

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