Being Human in Medicine

The dory and its anchor: The human connection in medicine

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The concept of humanism in medicine represents a unique concept; this is after all a field that requires unwavering dedication to patient care, which can often shroud our identities that are independent of the physician label. Together in this profession, we share this wonderful human condition with its infinite manifestations and individualized responses to the pressures that surround us. I do not know how you respond to these pressures, but most days, I feel like a Bay of Islands dory rocking - nay, thrashing - about, swaying from side to side and it is all I can do some days, just to hold on and not take on more water and weigh myself down. What keeps me afloat is my drive to build connections with those around me which allows me to maintain my individual identity: my anchor and my floatation device in one.

My identity manifests as a son, father, husband, and friend; a first-generation immigrant hopelessly in love with this province and its people in a land of potential and opportunity. I am an aspiring powerlifter and a connoisseur of fine IPAs; sometimes the two don't go hand in hand but they pair well with my mood, to either be alone or be surrounded by good company. Nonetheless. I am a medical oncologist, having entered medicine against all odds and my parents' recommendation otherwise, to care for those who face life-altering diagnoses for some and life-ending diagnoses for others. This career is filled with various pressures regardless of whether I deliver bad-news or relay great news. I am a life-long learner, teacher, mentor, and a senior leader. I feel the weight of everyone's expectations of me with every decision I make, with one aspect of who I am likely to suffer the consequences of that decision: whether it is to take a weekend to be with my family or time after-hours spent documenting in an electronic medical records system or attend vet another meeting. These constant expectations associated with the provision of patientcentered care can often lead us to overlook the parts of our identity independent of the medical field and fail to remember the human side of ourselves; these pressures can rock us or thrash us side to side if we lose sense of ourselves

To be human, or humanism, in medicine to me is no different than being human in any other context. To be

human is to know suffering, joy, and everything in between. Being human is not about my attitude towards life or my behaviours and choices that make up who I am. Being human is certainly not about my accomplishments or my failures. I do not cease to be if I fail to remember a friend's birthday or miss a meeting. personal story is full of successes and Μv disappointments, joy, and heartache. Yet as I continue my journey through the years (a much more eloquent way of saying 'as I get older'), I am beginning to gain a different perspective of what it is that makes me who I am today both within the medical field and independent of it. Being human, and therefore my identity, is about the connections I build or, more importantly, choose to build as this is how my story is written, and this is how I remain anchored. My desire to connect was sparked after being forced into isolation by virtue of external circumstances and geopolitical pressures. As a result of the aftermath of war and its impact on my family, I was forced to adjust to a new reality, new cultures, and new languages. To connect with others, I needed to communicate and therefore, I transitioned from a native Arabic speaker to an English-speaking teenager.

Being able to connect with another human allows us to find common ground with others. Connections in medicine can often evolve to building relationships with our patients and their families, learners, and colleagues. I am by all accounts an introvert; I enjoy meeting new people but thrive in one-on-one or small group settings. After first arriving in Canada, I failed miserably to build any meaningful connections, mostly owing to wide cultural gaps I did not understand or know how to traverse over. It may be my introverted nature, but I have come to realize that I truly enjoy the connection that comes with the relationship building within small settings, such as those often found in clinical care settings. Medicine is built upon the basis of the human condition and its makeup, and therefore, building connections is integral to not only being human but caring for others and for ourselves.

The height of the COVID19 pandemic is not far behind us, its impact on the human condition will continue to be felt well into the next decade. In this post-pandemic era, challenges facing healthcare systems and healthcare workers appear to be multiplying. Societal inequities abound. Uncertainty in the world surrounds us. Our colleagues appear to be falling victim to yet another pandemic: burnout. In the early days, weeks, and months of the pandemic-related lockdowns, we were completely deprived of real human connection. We adapted by resorting to tools such as Skype (remember that?!) and eventually Zoom, Webex and Teams. Yet, despite being able to see each other on screen and it being better than no visual connection, we intuited that this is a facsimile of the reality of building a connection. It is unfortunate that I gained this insight after such a dark chapter in world history, but I am thankful for the opportunity to now reflect on this. I feel anchored when I relate to others' stories or even become part of another being's story - a frequent occurrence in oncologic care. It is perhaps why causes of burnout amongst oncologists are not usually rooted in the human condition and disease subset we often find ourselves caring for. Being an oncologist is not depressing because of the subject matter. Instead, the sharing in the most intimate aspects of the human condition and providing what is often termed whole person care is reciprocated.

I by no means am an expert on burnout and urge anyone with symptoms and signs of the same to seek mental health and wellbeing supports. I merely wish to illustrate that in times of great change and challenge, we need to return to basics: what do we value? What connected you to medicine? My humanist approach reminded me of the value I placed on connecting with others: despite the fierce headwinds facing the practice of medicine, I use this knowledge to try and remain anchored.