**Letters to the Editor**

**Being a leader**

I read with interest your editorial, “Being a Leader: The effective exercise of leadership” in the Summer 2017 issue of *The Pharos* (pp 2–6), and I was pleased to see that you mentioned the importance of servant leadership. The term servant leadership was introduced by Robert K. Greenleaf in the essay, “The Servant as Leader,” published in 1970.

Greenleaf was Director of Management Research at AT&T for 38 years. His life as a servant leader is documented in the biography “Robert K. Greenleaf: A Short Biography,” written by Don M. Frick, in which Greenleaf is described as “the man who invented a new intellectual discipline.”

Although the concept of servant leadership originated in the business and industrial context, it was effectively broadened to include a spiritual dimension by Bennett J. Sims, the former Episcopal Bishop of Atlanta, in his book, *Servanthood, Leadership for the Third Millennium* (1997).

I believe you have done an important service in applying the concept of servant leadership to medical education, administration, and health care.

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**The importance of narrative in medicine**

Catherine Spaulding, MD, in her essay “The importance of narrative in medicine” (*The Pharos*, Summer 2017, pp 7–10) mentioned several physicians who distinguished themselves as writers of medical humanism, including Hippocrates, John Keats, Atul Gawande and Abraham Verghese (AΩA, James H. Quillen College of Medicine of East Tennessee State University, 1989, Faculty).

She suggested that the demands placed on physicians today risks their becoming indifferent to their own emotions. As she put it, even death and dying can become routine, resulting in a loss of compassion.

In *The Death of Ivan Ilyich*, Leo Tolstoy described the despair and isolation that can accompany illness as “…the most tormenting thing for Ivan Ilyich was that no one pitied him as he wanted to be pitied: there were moments, after prolonged suffering…when he wanted most of all, however embarrassed he would have been to admit it, to be pitied by someone like a sick child...he wanted to be caressed, kissed, wept over, as children are caressed and comforted.”

If Tolstoy had been a physician and distracted by the many intrusions that doctors experience today would he have had the intuitiveness and understanding to pen those words?

Edward Volpintesta, MD
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**Health care in America**

I thoroughly enjoyed reading Dr. Tooker’s editorial, “Health care in America: A right or a privilege?” (*The Pharos*, Spring 2017, pp 2–8), and Dr. Byyny’s introduction. However, I think you misstated the Medicare program when you said, “After a long-debated political process, Medicare for the aged, and Medicaid for the poor, were established in 1965. Both programs are administered jointly by federal and state governments.” Medicare is funded only by the federal government, while Medicaid is funded by both the individual states and the federal government.

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**Editor’s Note:** Dr. Manganiello is correct. The editorial staff of *The Pharos* was not clear in delineating that Medicare is a federally administered program, while Medicaid is administered by the federal government in partnership with state governments. As Dr. Manganiello indicates, the federal government funds Medicare and Medicaid is jointly funded by the states and federal government. We are sorry for any confusion this may have caused our readers.