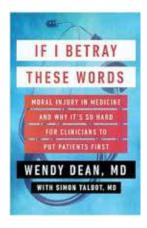
Book Reviews

Jack Coulehan, MD, MPH and Raymond Barfield, MD, PhD, Book Review Editors



If I Betray These Words: Moral Injury In Medicine And Why It's So Hard For Clinicians To Put Patients First

Wendy Dean, MD, with Simon Talbot, MD Steerforth Press, 2023, 304 pages

Reviewed by Francis A. Neelon, MD (AΩA, Duke University, 2002, Faculty)

Burnout! Who in medical America has not met with, experienced, or in some way confronted that job-related crisis of spiritual anguish? According to news reports, opinion columns, and journal articles, nurses, doctors, and medical students all experience a high prevalence of burnout. In fact, a Google search on the word "burnout" returned 320,000,000 results in 0.43 seconds. Nonetheless, in 2018, Drs. Simon G. Talbot and Wendy Dean began to describe health professional distress not as "burnout" but as "moral injury," a term previously used to describe the shame and guilt accompanying post-traumatic stress disorder in military combat veterans. Moral injury, according to the book jacket of *If I Betray These Words*, "occurs when a person perpetrates, bears witness to, or fails to prevent an act that transgresses their deeply held moral beliefs."

The authors' 2018 article¹ concisely presents the major theses developed in *If I Betray These Words*. The first thesis is that "being unable to provide high-quality care and healing in the context of health care [and] to consistently meet patients' needs has a profound impact on physician well-being [and] is the crux of consequent moral injury."¹ The second thesis is that this calamity is a result of "an increasingly business-oriented and profit-driven health care environment, [wherein] physicians must consider a multitude of factors other than their patients' best interests when deciding on treatment." ¹

In their book expanding on the original paper, Talbot and Dean give us 13 chapters filled with exquisite biographical details about exemplary health care workers who have succumbed to, and occasionally extricated themselves from, the throes of moral injury. Those lengthy, detailed biographical sketches may cause eye-glazing in medical

readers who have been there and get it, but they are probably quite necessary to give lay readers some grasp of the magnitude and pervasiveness of the problem at hand.

If most of the book seems like a meticulous examination of every detail of leaves, limbs, trunk, and rootlets of individual trees, the final, 10-page chapter takes a glimpse at the forest itself. The authors lay blame for medicine's moral crisis on corporate greed that skims enormous profit from a very large pot of money (United States health care expenditure for 2022 was estimated at \$4.5 trillion.¹)

The fault, they say, lies squarely at the feet of Jack Welch who, as CEO of General Electric, put into very profitable action Milton Friedman's doctrine that the sole responsibility of any business is to make as much money as possible for its shareholders. Decreasing time devoted to patients, by minimizing or eliminating relationship-building professional interactions, by introducing sophisticated computer programs that coerce doctors' behavior, by being satisfied with minimally tolerable levels of clinical outcomes, business executives with no clinical background or experience have made staggering fortunes. Doctors, to be sure, have become rather rich as well, but as Dean and Talbot imply, money cannot salve the injury that follows abandonment of moral principles.²

The authors paint a grim picture of professional life in medical America, but they largely exculpate medical personnel, with the notable exception of those few who openly cross to the dark side. Their portraits of victimized health professionals (chapters 1-13) depict doctors (and occasionally, nurses) as upstanding achievers, motivated by altruistic principles distilled from oaths, the best known being that of Hippocrates (from which the title of the book derives). Doctors, they posit, are generally blameless for the quandary in which medicine finds itself:

As doctors, we know what our patients deserve, but often cannot provide it because the business of medicine gets in the way. $^{\rm p17}$

Is it fair to lay all the blame on corporate robberbarons? Like all books of merit, this one this one got me thinking again: How, after all, have doctors let themselves be led like lambs to the abattoir, forsaking the very thing that makes their antecedent years of work and deprivation worthwhile—not money, not titles, but the privileged, healing, time-dependent relationship of doctor and patient, the relationship that Francis Peabody told us is the heart of caring for the patient? My answer is that this happened because doctors don't really know what they do. Doctors practice, so mustn't they know the foundational principles that undergird clinical behavior and action? Sure, but suppose their knowledge of those deep principles is tacit, rather than explicit, knowledge. As Michael Polanyi might have put it, doctors know what doctoring is, but they are unable to put that knowledge into explicit, verbal terms.³

Tacit knowledge is acquired through prolonged contact with, and work beside, those who already know what to do and how to do it. This might be the reason the medical apprenticeship known as residency is commonly referred to as training rather than education. As Osler said, it is the form of learning that "cannot be taught...in formal lectures." ⁴ But tacit knowledge can be refined and consolidated, through practice and experience.

Besides an epiphanic reconstruction of the goals of corporate health care, the few remedies for moral injury mentioned in passing by Dean and Talbot, such as concierge private practice (dismissed as socially inequitable), or the organization of unions by health care workers (in its infancy), seem unlikely to rectify the discordance between a tacitly acquired moral compass and the greed and concupiscent avarice that lures fortune-seekers to control industrial-scale medical enterprises.

A better solution might be an exploration of the fundamentals of the doctor's job—not the superficial particulars of what this or that sort of doctor does, but the underlying why and how of what is common to the efforts of every medical professional. Tacit knowledge, after all, is not immutably tacit. It can also sometimes be made explicit, and then it can be discussed meaningfully with others.

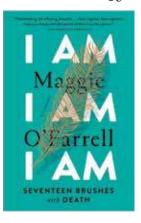
Armed with such explicit knowledge of their job, doctors might be empowered to draw a line in the sand when asked to trade money for the very things they live by. But, if doctors want to do this, they had better get at it. The reservoir of tacit knowledge concerning what doctors should, and must, do is going dry, and as Lewis Thomas put it, "Once lost, even for as short a time as one generation, it may be too difficult a task to bring it back again." 5

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I Am, I Am, I Am: Seventeen Brushes with Death

Maggie O'Farrell Knopf Doubleday, 2017, 290 pages

Reviewed by CPT Justin C. Cordova, MDP (AΩA, University of Texas Medical Branch, 2021)

Gone is the knitted rabbit, wrapped and ready in tissue paper, pushed to the back of a cupboard, because you cannot bring yourself to throw it out or give it away. Gone are your plans for, and expectations of, the next year of your life. Instead of a baby, there will be no baby, P101-102

In this collection of personal essays, Maggie O'Farrell describes 17 encounters with death, both in her life and in the lives of her children. These experiences range from the heartbreakingly common, as above in her description of recurrent miscarriages, to the inspiringly exotic, as when she contracted amoebic dysentery while climbing a Buddhist mountain in the Sichuan Province of China. The book draws its title from Sylvia Plath's, *The Bell Jar*, and combines the lyrical prose of a veteran novelist with the heart-wrenching clarity of a patient diagnosed with a terminal illness at the age of eight. Whether from the perspective of a patient or a parent, O'Farrell paints a raw and

candid portrait of the ways in which death and illness have shaped her existence and continue to do so.

In perhaps the most stunning of her 17 chapters, O'Farrell recounts the grief and depression that accompanied her first miscarriage, emotions which did not wane as the experience was repeated with alarming consistency. She describes unexplainable feelings of guilt, shame, and self-doubt, all while navigating the nuances of pregnancy loss, which is heartbreakingly common and yet discordantly taboo.

Why don't we talk about it more? Because it's too visceral, too private, too interior. These are people, spirits, wraiths, who never breathed air, never saw light. So invisible, so evanescent are they that our language doesn't even have a word for them. P105

Parents are hindered in their ability to grieve by a society that refuses to talk about pregnancy loss, a trend that O'Farrell is actively seeking to reverse. She came to realize how common her grief was, finding solace in the community of online support groups, and developing a desire to share her story with a larger audience.

Though the collection is filled with several unbelievable encounters with death, the penultimate essay contains one of the most memorable stories, an experience that serves as an undertone for her narrative as a whole. At the age of eight, O'Farrell was diagnosed with cerebellar encephalitis and was left semi-paralyzed for the better part of a year. Doctors predicted that she would not recover and that she would not regain the ability to walk. In her words, "they envisaged for me a life of limitations, institutions, incapability, dependency." P240 She recalls overhearing a nurse telling a little boy that she was dying, a conclusion that she had slowly come to on her own. As she recounts it:

When you are a child, no one tells you that you're going to die. You have to work it out for yourself. p^{215}

O'Farrell goes on to describe her incredible, though incomplete, recovery, including her rigorous journey through physical therapy and the difficulties she encountered when reacclimating to society. Her encephalitis did cause irreparable damage, including continued struggles with ataxia, persistent weakness in her left arm, and an occasional stammer, all of which are glaringly absent from her beautifully written words on the printed page.

In the final chapter, O'Farrell delves into the agonies of parenting a child experiencing recurrent anaphylaxis resulting from multiple severe food allergies. Her account is fraught with a number of touching emotions, but what shine through most clearly are dread and guilt. She dreads that her daughter will be exposed to an unanticipated allergen that she, as the parent, will not be able to respond to quickly or effectively enough. Her guilt is far more nuanced and layered, best understood in the context of some of her other essays.

After a series of recurrent pregnancy losses, O'Farrell underwent treatment with in vitro fertilization. Though blood tests identified her procedure to have been unsuccessful, it eventually led to the birth of her second child, a daughter who subsequently developed significant eczema and multiple severe food allergies. O'Farrell could not help but feel that her pregnancy was "a brand of magic," p262 but knew that "in any fairy-tale, getting what you wish for comes at a cost." p264 She felt that her daughter was suffering because of the wishes she'd made and desired more than anything that she could "pay the magic's price." p265 Her daughter is now 14-years-old and appears to be thriving. This story of O'Farrell's final brush with death will have a lasting impact upon the parents of children both with and without severe food allergies.

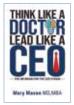
The collection as a whole is flush with O'Farrell's compelling and literary writing style, replete with allusions to Shakespeare and quotes from John Donne and Robert Frost. O'Farrell has made the most of her life, and pushed the limits of her existence. Whether recounting a hemorrhagic rupture during the delivery of her first child, narrating a near-drowning while swimming in the Indian Ocean, or regaling her readers about being held at knifepoint while hiking in Chile, O'Farrell uses her encounters with death to inform the ways in which she, and her readers, will continue to live their lives.

In addition to this collection of personal essays, O'Farrell has written nine novels to increasing critical acclaim. Her eighth novel, *Hamnet*, won the Women's Prize for Fiction in 2020, and her most recent work, *The Marriage Portrait*, was shortlisted for the award in 2023. She is a Fellow of the Royal Society of Literature and lives in Scotland.

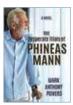
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