

For the Office-based Teacher of Family Medicine

William Huang, MD
Feature Editor

Editor's Note: In this month's column, Mary P. Guerrero, MD, of the University of Connecticut reflects on a quote by Neal Whitman, EdD, that "every breath is indeed a lesson" and explains its application to office-based teachers.

I welcome your comments about this feature, which is also published on the STFM Web site at www.stfm.org. I also encourage all predoctoral directors to make copies of this feature and distribute it to their preceptors (with the appropriate *Family Medicine* citation). Send your submissions to williamh@bcm.tmc.edu. William Huang, MD, Baylor College of Medicine, Department of Family and Community Medicine, 3701 Kirby, Suite 600, Houston, TX 77098-3915. 713-798-6271. Fax: 713-798-7789. Submissions should be no longer than 3–4 double-spaced pages. References can be used but are not required. Count each table or figure as one page of text.

Breathing Lessons

Mary P. Guerrero, MD

"I wonder whether the teaching community's precept could be 'Every breath a lesson.'"¹

When I recently rediscovered this intriguing quote by the respected medical educator, Neal Whitman, EdD, an entirely new meaning emerged. In the chapter on this subject, he writes:

In the presence of medical students and residents, medical teachers are never not teaching. This notion will not ring true for you if you equate teaching to giving information. But, if you view teaching as any interpersonal communicative event that occurs because of your desire to help learners, then every breath is indeed a lesson.¹

(Fam Med 2004;36(10):693-4.)

For office-based teachers of family medicine, teaching time is not limited to the discussions we have with learners about the patients they have seen. Students and residents also learn from us during many other moments of the day as we navigate the complex and ever-changing sea of clinical practice and teaching roles. They watch our every move and even our every breath, observing how we reason a differential diagnosis, converse with a worried patient, and communicate with colleagues. They notice not only our solutions to the various challenges that arise during the day but also how professionally we conduct ourselves in dealing with these issues. Indeed, every breath, word, and action that learners observe are opportunities for them to acquire the knowledge, skills, attitudes, and values that they need to possess as practicing physicians of the future. Dr Whitman's quote reminds us to take advantage of each moment and to maximize students' and residents'

learning potential by role modeling and demonstrating how to address the various issues and challenges of daily practice.

As we further consider the various dimensions of breath, we realize that there are other opportunities for lessons. We may live for days without water or weeks without food but only a few minutes without the life-giving oxygenation of breathing. It energizes and enlivens. When we breathe in, we inspire. Definitions of "inspiration" from the dictionary include "stimulation of the faculties to a high level of feeling or activity," "an agency, such as a person or a work of art, that moves the intellect and emotions," and "divine guidance or influence exerted directly upon the mind and soul."²

How may this intimate, vital act of breathing stimulate, inspire, and energize us? Professional training programs in mind-body-spirit medicine teach us specific breathing techniques to help us slow down,

relax, and deal with the multiple issues and stressors we are facing.^{3,4} One particular breath technique called “soft belly” emphasizes abdominal breathing. Compared to shallow chest breaths that we most often use, especially when stressed, belly breathing is more efficient at increasing oxygen capacity and engaging the calming effects of the parasympathetic system.⁵ Since it is easy to learn, I have had many opportunities to teach both patients and learners this simple but powerful technique as part of a comprehensive plan of care. For us as physicians, practicing this brief “lesson” in breathing slows us down and enables us to reflect on what we are doing and thus become more mindful. Mindful physicians have an ability to “listen attentively to patients’ distress, recognize their own errors, refine their technical skills, make evidence-based decisions, and clarify their values so that they can act with compassion, technical competence, presence, and insight.”⁶ By being attentive to our breathing and practicing this relaxation technique, we can become more fully engaged in the patient care activities at hand and invigorated to deal with the challenges of the day.

Most will agree that the stressors of academic life and clinical practice are mounting, as we witness the undesirable effects on our colleagues, our learners, our patients, and ourselves. In today’s busy office environment, it is easy to focus our discussions with learners on the patient’s biomedical issues and simply rush on to the next patient in hopes of getting through the day’s work at a reasonable hour. However, even in the midst of this chaos, we need not let the situation overwhelm us. Instead, we may be more

attentive to our breathing and practice relaxation techniques such as soft belly, allowing us to become more mindful teachers who are better able to reflect on our responsibilities as mentors and are more fully engaged in teaching and helping learners.

As we slow down and seek to be more mindful as teachers, a number of questions arise. For example, how often do we reflect on how well our teaching is going, ask ourselves what we are trying to teach, and consider what we can do to improve prior to the next session with the learner? How often do we demonstrate interest in students and residents by asking how their learning experiences are going, how well their goals are being met, and what we may do to enhance their learning experience? How often do we ask learners how their experience is shaping their career aspirations, how they see themselves practicing as future physicians, and how we may help them now in pursuing that vision? How often do we encourage learners themselves to slow down and reflect on the following questions after a patient encounter: what went well, what did not go so well, and how may I improve next time? It is easy to devote all of our time and energy to just getting through the day’s list of patients with our learner in tow, but by considering our breathing and then slowing down, we may look at the bigger picture of how well we are teaching and helping our students and residents reflect and grow into knowledgeable, skilled, and compassionate physicians.

In conclusion, as we consider Dr Whitman’s quote “Every breath a lesson,” we realize that it is not only our “talk” or the transmission of information that matters when

precepting our learners. Our “walk” is just as important. If we consciously “walk our talk,” then indeed each moment, each word, each breath becomes a potential lesson for our learners. In addition, his quote reminds us to note our breathing, practice relaxation techniques to slow down, and reflect on how we can be better teachers. In our teaching, there is much we can reflect on and strive to improve. As such, I am inspired to continue my own breathing practice and to share my skills and experiences with physicians in training, all while demonstrating mindfulness and compassion, breath by breath, throughout the workday.

Correspondence: Address correspondence to Dr Guerrero, University of Connecticut, Department of Family Medicine, 99 Woodland Street, Hartford, CT 06105. 860-714-6532. Fax: 860-714-8079. mguerrer2@stfranciscare.org.

REFERENCES

1. Whitman N. Notes of a medical educator: observations, reflections, and connections. Salt Lake City: University of Utah School of Medicine, 1999:91.
2. Morris W, ed. The American heritage dictionary of the English language. Boston: Houghton Mifflin Company, 1976.
3. Center for Mind-Body Medicine. Washington, DC. Mind-body exercises. Available at www.cmbm.org/mindbodyexercises/index.htm. Accessed October 12, 2004.
4. Shealy CN, Norris PA, Fahrion SL. American Medical Student Association Educational Development for Complementary and Alternative Medicine Initiative: a national curriculum for medical students. Mind-body medicine. This publication was made possible by grant number 5 R25 ATO 00529-02 from the National Center for Complementary and Alternative Medicine (NCCAM). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the NCCAM, or the National Institutes for Health. Available at www.amsa.org/humed/cam/C2.doc. Accessed October 12, 2004.
5. Benson H. The relaxation response. New York: Avon Books, 1975.
6. Epstein RM. Mindful practice. *JAMA* 1999;282:833-9.