Learning by Write
William R. Phillips, MD, MPH

The practice of medicine is the management of meaning. The job of the physician—as master of diagnosis and therapy—engages us every day in observing and making sense out of what our patients show us and tell us. Our roles, as teacher, counselor, and coach, also call upon us to deliver information in ways that can help our patients understand what they need, change what they can, and cope with all the rest. We confront fear, manage uncertainty, and explain the unknown. If illness is a narrative, then medicine is about listening and telling the stories we are privileged to hear.

Language is at once our most personal and most public power. Despite recent provocative findings on primates and marine mammals, language is the essentially human talent. Our words can communicate, comfort, or compel. They can be loving or hateful. They can do our work and provide our recreation.

If language is the most human capacity, writing may be its expression as the most human skill. The written word has a power that surpasses speech in its ability to travel across distance and time. Once written down, an idea can endure in spite of itself.

We exercise this power for many reasons: to record events, express ideas, or craft arguments. Sometimes we write to simply connect with each other. I even write to explore my own mind on a topic. (One wonders which comes first, the reasoned judgment or the written rationale.)

Yet, those are not the reasons I really write.
I write to listen. I write to learn to hear. No less than fine writing, hearing can be a high art form. For me, writing is an exercise in paying attention to what matters most in the world around me: people, nature, ideas, change, and connections.
Practicing skills of observation changes our powers of perception. This is true in our daily lives as in our medical practices, as we encounter the people and problems around us.

In Victorian England, every tutored woman learned to draw. Imagine how that shaped her view, indeed the vision of her whole generation—of meadows, mountains, bunnies, blossoms, and children’s faces. Through most of the 20th century, Ansel Adams devoted his creative life to photographing the majesty of Yosemite. Years of peering through the lens from under the camera hood changed his capacity for vision. Steve Jobs recounted in his Stanford University commencement address (now YouTubed around the world) how his study of calligraphy changed our information age.

Many kids get piano lessons, but few go on to lives in music. Still, all that practicing of fingers and training of ears unleashes miracles in their minds, the melody and harmony built into their brains like grammar.

I never learned to draw, and I inherited a specific musical disability. I do write, and I have tried my hand at photography. I know how photographers see the world through different lenses. Snapshots record impressions of events, places, and people; photographs can create expressions. When I take my camera on a hike, I pause more often and stop at different places along the trail. With camera in hand, I turn more mindfully from the forest to the trees, from the mountains to the streams. Although the camera captures visual images, it also invites me to engage my other senses: the prickle of the Sitka Spruce, the scent of the Western Red Cedar, and the song of Swainson’s Thrush. For me, photography changes the way I look, see, and attend to the world around me. It can change memory and meaning. For me, writing does much the same.

I write to organize my thoughts as well as my sensations. I write to teach, explain, and understand. In the act of writing for these purposes, I learn new ways to organize knowledge. If it is when you teach something that you truly learn it, then it
may be that when you write about something you command the subject.

Working with the craft of writing—searching for just the right word, creating a dark mood, or getting first things first in a complicated context—enhances my ability to hear worry in a mother’s voice, sense a depressed mood, and sort through priorities with a patient in a world of hurt. Paying attention to the patient’s words and listening for their meaning is part of the power and the joy of medicine. Actively observing nonverbal cues can be just as important and, interestingly, we refer to them as “body language.”

Maybe the clinical art of listening for heart murmurs has faded with the advent of echocardiography, but I am sure that no imaging technology will replace the art of hearing a patient’s pain.

As we follow our professional paths as physicians, we pass through dark forests and over brilliant crests. At the bedside and in the exam room, we see and hear and observe and record the most dramatic and intimate chapters of life’s narrative arc. Family physicians, particularly, have the privilege of hearing the whole story. If we listen closely, we can hear the stories that make us human.

When we make our words public in speech or in writing, we can do more than record and communicate. We can witness. We can bear testimony to what we see, feel, and believe. As physicians, we have the privilege—sometimes the duty—to witness the suffering and courage around us. How is the world to know all the pain and all the hope, if we do not speak up or write it down?

This act of witnessing can be one of the most powerful ways we help patients and make a difference in the world. A “55-Word Story,” a “Piece of My Mind” or a few lines of verse can carry the experiences of illness and care beyond the exam room. A piece of prose can gather others into the miracle of the healing relationship.

Writing—like caring—is a signature skill of humanity. Prose is constructed of diction, grammar, and style. Medicine is made up of knowledge, practice, and art. Family medicine at its best, like fine writing, is a passionate orchestration of these elements. Writing helps me listen, hear, organize, and share what I encounter along my path. Sometimes, if the ink flows just so, it helps me make some sense of it.

CORRESPONDENCE: Address correspondence to Dr Phillips, MD, MPH, University of Washington, Department of Family Medicine, Box 356390, Seattle, WA 98195-6390. 206-543-9425. wphilps@u.washington.edu.