Medical Narrative at the 150 anniversary of the National Academy of Medicine. A book presentation

Pedro Berruecos

Academia Member, expert in human communication, Technical Advisor at the Hospital General de Mexico and Professor of the Faculty of Medicine at the Universidad Nacional Autónoma de México, México, D.F.

First of all, at presenting this book, I have to express my very special gratitude to Dr. Herlinda Dabbah, to my good friend Dr. Alberto Lifshitz, to Dr. Julio Sotelo and to all members of the organizing committee of the events of the 150th anniversary of the National Academy of Medicine, very specially to its president, Dr. Enrique Ruelas, for the honor it represents participating as a collaborator in this stupendous book and for the invitation to comment it at its presentation, which I do with much pleasure today.

Since the paleolithic era, man has lived obsessed with the preservation and transmission of words, first by means cave paintings and then through oral tradition; later, in carved stones, clay tablets, parchments, wood, vellum or wove paper. In the Middle Age, books were written and decorated one by one, and they emerged like magic from the hands of friars cloistered in the scriptorium, where there were no lamps or candles in order to prevent fires. It was in these ages when magnificent thinking beings preserved those miracles, those works of art, those acts of faith, in libraries such as the Ugarit library, from the 12th century BC; in clay tablets from Nineveh, in the 7th century BC, in the library of Pergamon (or Pergamum), in the 3rd century BC, which kept Aristotle's manuscripts; in the Herculaneum library, destroyed by Mount Vesuvius eruption in the year 79, and rediscovered in 1752, when 1,800 carbonized rolls were found; in the famous Library of Alexandria and in the library of Constantinopla, destroyed during the Fourth Crusade. Then, knowing how to read and apprehend was intuited as implying superiority, predominance and power.

According to the UNESCO, a book must have 49 pages or more, because texts with 1 to 4, a quaternio or libellum, are loose sheets, and from 5 to 48 is barely a brochure. Anyway, when we hold a book in our hands, the sheets made out of tree “membranes” or “bark” put us in contact with the vegetal world, with nature, to bring us to the innermost corners of human mind.

The paper, or page, from Latin pangere (“fasten, assemble or tie”), allude to putting sheets together to make a book, but also to the strips that served to hold the vineyard and the grapes. Why this etymological search? Very simple! Because this way we discover that writers place their graphical symbols on the lines of the pages, just as the vineyard grows onto its looms made out of sticks to place its grapes. Juan Villoro says that the lines of a page are like the threads the grapes hang from. A writer cultures grapes/words and places them in front of us; the reader goes to the page –vineyards’ loom– and harvests them. Someone plants by writing; other harvests by reading. When pages were born, the huge papyrus volumes (from Latin volvere, “roll up, spin around”) ceased being read out loud and allowed for the intimate bond, in silence, between author and reader to occur. When the read volume did no longer have to be rolled up, to leave it ready for the next reader, monastic out loud reading gave way to silent scholastic reading, a symbol of freedom and independence of thought.

Paper was brought from China to Europe by the Arabs, and it is essential to our books of today, predecessors of the e-book or the audio-book. These, as modern as they may be, keep trying, as it happens ever since the paleolithic era, to find better ways to preserve and transmit ideas, thoughts, culture, beliefs...
and knowledge. But if a child uses more tablets than books, the dynamics that drive his development are being undermined. Children aged 3-5 years whose parents read them electronic books understand less the reading that their pairs who are read traditional books, because when we read a book to a child, we promote conversation and develop his language and his thought. And when it comes to language learning, no technology can substitute a live instructor.

The enlightening spark of Gutenberg ended with political hegemonies, delusions of greatness and religious prejudices. Fear of tyrants and ideological conservatism and fanaticism of the era were the main driving forces of the Inquisition, but their bonfires to destroy books lacking apostolic blessing, the imprimatur or the nihil obstat, only served to illuminate the dawn of Renaissance. Nevertheless, censorship persisted, and so, a few decades before the French Revolution, in 1757, a decree was published in Paris condemning those editors without the mandatory authorizations to death. In spite of this, Voltaire, Rousseau and many others saw their books being published in London, Amsterdam or in several cities of Germany. Censorship became ineffective and even almighty minister Guillaume Chretién de Malesherbes himself, who officially impeded the publication of L’Encyclopédie, managed to distribute it freely, under the table, as the greatest work of the Enlightenment deserved.

Now we are in the 21st century, but the physician who writes stories, romances, poetry, plays, novels or fiction has always existed. There have been St. Luke in ancient Greece or Maimonides, Avicenna, Copernicus and Rabelais in the Middle Age; later, Paracelsus, Servet, Vesalio and Schiller, and closer to our times, Chekhov, Conan Doyle, Livingston, Axel Munthe, Freud, Jung and Albert Schweitzer. Physicians must keep professional secret, which is like “confessional”, but they try to get rid of these chains through literature. That’s why there is the Union Mondiale des Écrivans Medecins, the recent Academia Mexicana de Médicos Escritores, the Literature and Medicine series of the Johns Hopkins Hospital or the International Federation of Societies of Physician-writers. In our language we have Baroja and Ramón y Cajal an, in our environment, Nandino, Cancino, Acuña, Sabines, Azuela, Marín, Cárdenas de la Peña, Martínez Cortés, Pérez Tamayo and many more.

Writers have received endless materials from medicine and physicians have found the complement to their humanistic vocation in literature since, for both, the human being is central and is the unifying point for both disciplines. It is in sickness, in suffering and in its painful extreme, death, where the fortunate encounter between both occurs… Cela describes tuberculosis in Rest Home; Tolstoi, disease in The Death of Ivan Ilych; Pickwickian syndrome originates in a work by Dickens; Stendhal syndrome, in his History of painting in Italy, and Thomas’ disease in The unbearable lightness of being by Milan Kundera. Long before, Homer had already described the injuries sustained by the heroes he chanted of; Dante, in The Divine Comedy, made any disease child’s play compared with the journey to Inferno; Cervantes, in the second part of Don Quixote, described the annoyance of Sancho, governor of the Barataria island, for limitations to hearty meals imposed by a physician who was supposed to take care of his health, at least of those I know to be ignorant; for as to learned, wise, sensible physicians, them I will reverence and honor as divine persons”, thus censoring some, and with good balance, praising the others. Kafka, in The metamorphosis, turned his character into an insect and described the chaos consequently unleashed in the family. Flaubert, son and grandson of doctors, in Madame Bovary, described arsenic poisoning with an accurate and magnificent description of agony. Hemingway, also son of a physician, in Indian camp, described his father performing a cesarean section with only a blade and without anesthesia, and then, in The snows of Kilimanjaro, he narrated with mastery the evolution of gangrene in the protagonist. Tolstoy, in War and peace, described how Prince Andrei, when he fell injured in battle, gazed at the vastness of sky, speckled with small clouds, and said: “How is it I did not see this lofty, infinite heavens before?… There is nothing but stillness, peace”. There, the narrator immerses himself in the soul of the character and acquires, consequently, the so-called “medical gaze”. Thomas Mann, in The magic mountain, described the hospital from Davos where his wife was being treated for a painful disease and, in Doctor Faustus, the protagonist, Leverkühn, a diabolically innovative musical genius, talks with the devil and recognizes the treponema of syphilis as the stimulator of his creation; and Marcel Proust is obsessive when in his book In search of lost time he describes everyday life in its most trivial details, as a clear manifestation of his neurotic temperament. The examples are endless.
Editorial efforts in the 150th anniversary of the National Academy of Medicine have been titanic. Everybody must thank, as Vargas Llosa, to those who bring books closer, to those who encourage for them to be written, to those who teach the trade and to those who read them. Man makes up stories, only man can name things. With words, by naming the non-existing, he does not only describe things, plants, animals or objects, but he turns all this, potentially, into legend, fantasy, dream or imagination. Words resolve the unknown, go beyond frontiers, undo prejudices, solve problems, bring people together, calm desires, establish alliances and make the inexistent visible. With written words, man protests, and by reading, he also protests, because speaking of ideals implies dissatisfaction expression and search for better ways.

Currently, many publishing companies and especially the big international companies run the world of books and, therefore, groups like Palabras y Plumas Editores are an exception since, although they are not able to avoid keeping in mind the laws of supply and demand, they take good notice of the needs detected by learned readers. Diffusing literary creation is what finally matters, since people who think well, write well and, as the philosopher from Güemes says, those who don’t, just don’t.

Likewise, people who think well, write well, and in these books now presented a great deal of pens have been able to be brought together; pens that, by connecting mind and hand, turn medical work into fresh and endless nurturing springs of words.

In this work, many stories are made available: those related with pathologies such as life-threatening postpartum bleeding, bursts of anger and cholelithiasis, cancer or schizophrenia… but there are also the doctoors in 1964, the matchmaker grandmother, the cure for hangover by Beny the bartender, Chiapas cheese in a noodle soup or the story of captain Beltrán; but also the 1985 earthquake and its consequences at the “20 de Noviembre” Hospital Center and the “Hospital General de México”, with regard to a text that describes the “division” that, by chance, this narrator was part of as a member of the board of the National Academy of Medicine in 1985. The conflict arose because the request by a numerous group of doctors of the hospital, members of the academy at the same time, for it to simply support “the reopening of the hospital as soon as possible” was not answered, arguing a political problem that in no way had been brought up. In spite of this negative, the hospital manged to overcome those difficult moments and has kept its pathway in parallel to that of the academy. This was recorded in the minutes of subsequent sessions, when it was clearly stated that, in spite of the unfortunate negative, both institutions, hospital and academy, were, in space and time, well above political ups and downs or personal points of view and, after the events, with far more strength than that that was required for them to be created.

In both volumes, the texts are magnificently arranged in sections of historical narrative, biographies, assays, anecdotes, short stories, noso-biographies, creative narrative, lyrical poetry and aphorisms.

Of note, as in the book entitled The other medical record, of those academicians participating in this medical narrative, more than 60% belong to the Department of Medicine, about 20% to the Department of Surgery and the rest, to the other two departments. In addition, the number of participating psychiatrists and surgeons is practically equal. Could it be that literature emerges from psychiatry just about by spontaneous generation? Hard to tell… This correspondent has his own theories, but refuses to expose them, since he might be considered, according to recent information of the National Institute of Psychiatry, as part of that 28% of the general population with one or more of the 23 conditions contemplated by the International Classification of Diseases in the psychiatric setting.

Great inventiveness and lots of creativity stand out in all texts, where life-threatening postpartum bleeding, the romance with a female Ascaris lumbricoides, cockroaches in social service, the nurse that kidnaps a newborn, the strange man/automobile Siamese twins condition and the heart transplantation to a 135-year-old patient in the year 2195 appear. In the presentation of the book, some of its texts, complete or in fragments and read by their authors were listened to: the terrible drama of the homicide of the son with Down’s syndrome and of the courage to pull the trigger twice, the magical appearances of Dr. Miguel Jiménez, the threat of the end of the world, the cadaver that was not dead—although neither out partying—Prodigios’ delusions and the risky liaisons of an homosexual, his father and the physician who looks after and pays them company… And Labyrinths and Perpetual recurrence are left for the end because, in addition to the brave and at the same time refined incursion into poetry, deep reflections are captured. The direct allusion to the loss of the trivium, axis of teaching in the Middle Age—grammar, dialectics and rhetoric—, should not remain locked up in the pages of the book, but rather to impregnate all the corners of Medicine schools and
faculties, because “where did we lose the trivium?”, asks himself Enrique Ruelas. We don’t know, but surely is a consequence of the gradual commercial modernization of the utilitarian and money-oriented medical industry of our times. Where is the trivium now? For example, can the National Exam for Medical Residency Applicants analyze the knowledge of future residents through their manuscripts by the marks made with number 2 ½ pencils to write down their answers? Shall it be that this way it is possible to find out capabilities for writing, spelling, handwriting, coherence in the management of morphosyntactic parameters or semantic depth, in ideas expressed in adequate sequences of words and sentences? Someone said that that is why accurate, short, and mysterious stories are the best, as in the case of that by Luciano Egido that says: “When he spoke to me, I understood that I was who was dead and not him”, or the famous one by Monterroso, quite topical in Mexico today: “When I woke up, the dinosaur was still there”.

Writing a medical record must not be a routine act. The doctor has to look directly into the patient’s eyes, notice his/her gestures and make him/her feel human warmth. A medical record can and should produce a biography, a profile, a novel, where the patient dictates the script. The physician must be a good writer of stories where he/she should capture not his patient or his/her own self, but the encounter between two persons.

The physician tells us straight out what we don’t know about ourselves. Therefore, he/she acquires a magical stature with a power that goes beyond his/her simple being and maybe his/her own will. The use of an uncommon language with cabalistic forms and secret words, the penetrating gaze and percussions or palpations or asking surprising questions, looking for paths that are hardly visible to the patient, will always be the theme of narrators, physicians, writers and miracle workers. In spoken and written language, pauses, suspension points and silences have words finding their location and set of rules, and putting things in place. But silence speaks as well, because sometimes it says what only the immense amazing nature of the world can express. In the face of pain, suffering and death, silence is compassion, reverence, respect and empathy. But it is also secret. When somebody says “I don’t know how to express it” or “I have no words”, he/she is already saying too much. Accordingly, based on this concept, this presenter concludes here the words of his own, in order for all the audience to be able to have the marvelous chance to immerse themselves in mystery.