



### Letter to my son

Dear Al.

Congratulations. Subject to achieving your predicted grades, you have won a place at medical school. Countless hours spent volunteering, shadowing doctors (both here and abroad), and making your 4000-character personal statement stand out from hundreds of others, have paid off.

We have done the high-fives, the celebratory meal, and the phone calls to your proud grandmothers. We have started a spreadsheet to work out how, as a graduate entrant, you will find the money for your fees, rent, living expenses, and books, even with help from a parent in receipt of a Clinical Excellence Award. The figures stack up, but only just.

From next September, you will join a cohort of other high-achieving hopefuls in a packed timetable of lectures, seminars, ward rounds, and clinics. According to the various 'what to expect from medical school' websites, you will quickly make friends, learn to party harder than you have ever partied before, become chronically sleep-deprived, run out of money, develop a skin thick enough to cope with recurrent professorial put-downs, and be sexually propositioned by at least one of your lecturers. It sounds like little has changed from my own student days.

I have been wondering what to buy you as a gift, and have decided on Byron Good's collection of essays *Medicine, Rationality and Experience: An Anthropological Perspective*.<sup>1</sup> All gifts are (at one level) symbolic, and this one will symbolise you joining the profession and taking on what the GMC call *Duties of a Doctor*.<sup>2</sup> You know this list better than I do, since you chose to memorise it in case you were asked about it at interview. Now you need to make it meaningful, and that is why you need to read Byron Good.

Good's argument, reiterated by many subsequent scholars, is that most teachers at medical school will sell you a myth: that medicine is a rational science, objectively practised. In reality, medicine combines an essential objective rationality with equally essential subjective and moral concerns about illness and suffering. Often but not always, the prevailing paradigms of modern

medicine, combining the metaphors and methods of the natural sciences with the stimulus-response assumptions of the behavioural sciences, fail to capture not only what it means to be ill but also what it means to be a doctor.

Good and his wife Mary-Jo DelVecchio have also shown that as students progress through medical school, they get better at the objective elements of medical practice and worse at the subjective ones.<sup>3</sup> For example, they become able to 'take a history' by rendering patients' lived experiences, perceptions, and interpretations into sanitised and structured accounts stripped of their emotional content.

My son, I know you must learn to perform impersonally and dispassionately in Objective Structured Clinical Examinations. I also know that the medical school you have chosen (and which has chosen you) will offer you extensive exposure to medical humanities subjects such as literature, art, music, and bioethics. For the sake of your sanity and your future patients, do not make the mistake of achieving depth in the former at the expense of breadth in the latter.

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