

Mother Cabrini and the Anatomy of an Illness

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The following are excerpts from an address made during the graduation ceremony of the University of Connecticut (UConn)/St. Francis Family Medicine Program residents on June 28, 2009, at Indian Hills Country Club, Newington, Connecticut. Dr Orientale is an associate professor in family medicine at the UConn Health Center and has served as program director of the UConn/St. Francis Family Medicine Residency Program for the past 5 years.

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On the third day of a recent medical conference in Denver, Colorado, I took a little diversion. Along with a colleague, I drove to a place I always wanted to visit, set in the foothills of the Rocky Mountains: the Red Rocks Amphitheater. We arrived on a gray misty morning and were in awe of the natural setting. This outdoor theater is nestled between mountains, and the stairs descend to a stage that looks up into the sky. It is a natural opera house, set majestically in the mountains. Since there was no performance at the time, we descended the 200 steps to the stage, took center stage, and pretended we were performers. Our voices echoed back at us, as if coming from the heavens. It was magnificent. Given the misty rain, we quickly ascended the steps to leave. With my colleague driving the rental car, I asked if he wouldn't mind visiting the shrine of Mother Cabrini, a few short miles away. And so we drove up another mountain, ascending a very steep road. As the cloud cover got thicker, I asked my colleague to carefully navigate the turns—not wanting to meet Mother Cabrini in person. I should add that Mother “Sister” Cabrini is the patron saint of Italian immigrants.¹ She is the first US saint in Catholicism and is said to have established some 67 different orphanages across the United States, with the Denver site set in the foothills of the Rocky Mountains being among her favorites.

When we arrived at the shrine, we discovered that the statue of the sacred heart was atop the mountain—another 400 steps above the parking area. My colleague

quickly declared himself an Episcopalian and opted to stay in the car. Not wanting to make him wait, I quickly ascended the stairs. My breath was taken away by the thin mountain air, but more so by the statue atop the mountain. I was graced by an imposing statue of Christ, with his sacred heart exposed through his garments. After a short prayer, and not wanting to keep my colleague waiting, I quickly ran down the 400 steps.

Then it happened. Instead of the blessing I had sought, I felt cursed; pain began shooting down my right leg—searing, burning pain. It was unlike anything I have ever experienced. It was a simple diagnosis: a lumbar disk herniation. I had to confirm my diagnosis with a colleague who was attending the same conference. But I knew. It will get better, I said to myself. Nonsteroidal anti-inflammatory drugs, bedrest for a few days, and early mobilization, and it will get better. But over the next 48 hours, the pain became worse—much worse. Too proud and too stupid to ask for help while at a conference full of physicians, I called in my own prescription for steroids to reduce the inflammation. I would return home 2 painful days later, yet 3 more weeks would pass before the pain would begin to remit. After several weeks of physical therapy and traction and developing a therapeutic relationship with an excellent physical therapist, the rest is history. I am now that little miracle you see before your eyes.

So what is the message in all this for healers? I'd like to make 3 simple observations.

First, I felt guilt around my illness. After all, if I hadn't left the conference for that half day, maybe all of this could have been avoided. I have since realized that I was taking a “pause,” a mental health break after having been richly rewarded already from the 3 prior days of the conference. And my breath was both figuratively and literally taken away by both the Red Rocks and the Mother Cabrini Shrine; I have been left with some wonderful memories. And so I ask my colleagues, how will you define life's little “pauses?” How will you define the breaks you need for your own mental health and experience them free of guilt?² I challenge you to find the way to press the “pause” button long enough, so that life is not just a stream of events, but a careful, deliberate, and thoughtful journey. A new job, a new home, new-found wealth, and, perhaps, additional family members on the way—these things seem only to accelerate the pace of life. I had to laugh when one of my 14-year-old twin daughters commented how fast eighth grade came

and went this year. For our recent residency graduates, our seniors who were counting the days to graduation, it couldn't have come soon enough. The supreme irony in all of this is that after graduation, a new chapter begins in which things will happen so quickly, so rapidly, that a "pause" button will become not only a necessity, but also a survival tool. So my advice, plain and simple, is to find your own "pause" buttons and to use them with impunity.

Second, I'd like to comment on the healing power of empathy. My illness struck at a most inopportune time. But it gave me a wonderful opportunity to experience the kindness of so many people. Limping in severe pain at work, I remember my colleague saying "Don't worry. We have your call covered." One of our many wonderfully caring and deeply committed nurses saw me sitting in pain. Without a word, she quietly brought me a pillow to support my back. Another of our nurses, a trained Reiki practitioner, said in her inimitable Russian accent, "I will send you healing energy." Another colleague offered to drive to my home and provide me acupuncture. And yet another offered me an osteopathic manipulation treatment. And there were countless others, who just simply said "I am so sorry you are in pain." The caring of others meant so much to me in recovery from my illness. It reawakened in me the meaning of caring for someone who is ill. Never had the words of Dr Francis Peabody rang more true, when he said quite simply, "The secret of the care of the patient is in caring for the patient."^{3(p882)} Having been on the receiving end of this caring, I have vowed never again to underestimate its value in the healing process.

Last, I offer a comment on illness. Illness, like adversity, is often unkind. Who in their right mind would choose to be ill? Illness is not a choice. It just is. But every illness has a story. I now ask my colleagues, how will you hear the story of your patient? Will you help patients see, that in their infirmity, there is a challenge. That in illness, there is opportunity. That illness is sometimes, quite paradoxically, a blessing in disguise. And that, for some, the wound may literally become a powerful healing gift. I think one of the challenges ahead of physicians is to see that the greater the challenge, the greater the opportunity for growth. So, the challenge to

those in the medical profession: will you get embroiled in the quest for making the correct diagnosis every time, as I did upon my residency graduation? Or will you help your patient deviate from your own blueprint for their illness? I believe that the anatomy or blueprint of every illness has a legend that is only completely decipherable if the patient helps or is willing to help interpret it. Will you commit to, at the right moment and in the right circumstance, consider framing the question for your patient: what can be learned from this experience? How might your patient do things differently next time? Illness has the capacity to be a life-altering and transformative experience.⁴ I think the anatomy of an illness truly requires more than just the keen physician's mind to be correctly interpreted and treated. In my mind, after 19 years of clinical and teaching experience, asking these questions will allow true healing of an individual to occur. It is the anatomy of an illness that usually isn't taught in medical training.

So, to summarize: first, learn how to pause, because life, for most physicians, is always full steam ahead. And learn to pause with impunity and without any guilt or remorse. Second, never underestimate the power of empathy. Having been on the receiving end, it played a powerful healing role in my recovery. And it is often underrated by those who are burned out in medicine. And last, consider asking this question of your patients: what can be learned from this illness? How might they do things differently in the future? This will allow healing of an illness to become a transformative and uniquely human experience for each person.

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