The ‘L’ in PLME: A Broad Approach to Medical Education

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The “L” in the PLME stands for Liberal and we strive and encourage our PLMES to have a broad-based liberal education with the underlying pedagogy that medicine is practiced in the real world. Students need to have an understanding of economics, political science, social and behavioral science as well as the humanities. Music and art bring cultural understanding and humanism to the practice of medicine. The AMS also offers “Pre-clinical electives” covering an array of topics including but not limited to: Complementary and Alternative Medicine, through Biotechnology or Informatics in Medicine, Fetal Medicine, Wilderness Medicine or Opera and Medicine.

The following is a final paper from the Opera and Medicine elective. This elective as with other medical humanities electives pushes our student to “think out of the box” and experience the human condition as others have throughout the ages, through the creative arts.

DULCAMARA THE DUNCE: PERCEPTIONS OF PHYSICIAN IN L’ELISIR D’AMORE

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Before the advent of the germ theory of disease, and other such seminal discoveries in medicine, those who occupied the role of physician in Western society generally had no effective medical care to offer their patients, instead relying on placebos, superstition, and “treatments” (such as bloodletting) that often did more harm than good. Because of this inability to properly treat patients, physicians of the time were often seen as incompetent and self-serving. These perceptions manifested themselves not just in society but in the various works of art produced during the time, such as operas. An excellent example is Donizetti and Romani’s 1832 opera L’Elisir d’Amore (“the Elixir of Love”). Examining the portrayal of Dr. Dulcamara in Act I of L’Elisir reveals the underlying perception of physicians as self-indulgent and fraudulent.

Romani’s libretto spares no effort in depicting Dulcamara as pompous and self-indulgent. Indeed, the first time he appears on stage, Dulcamara is being “drawn on in a gilt chair” as his attendant sounds a trumpet. As the peasants gather about, Dulcamara shows no modesty, introducing himself as “the greatest, wondrous benefactor, a doctor [without equal],” whose renown is “known the wide world through.” As if that isn’t enough, Dulcamara goes on to explain how he brings happiness wherever he “deign[s] to call,” thus reminding the peasants of the elevated station he holds above them. All of these excerpts from the libretto serve to firmly establish Dulcamara is incredibly pompous and arrogant. And various stagings of L’Elisir often go further, supplementing the libretto with additional details designed to solidify this perception of physicians. For example, one staging portrays Dulcamara as very overweight, and dresses him with frills, fancy coats, and excessive jewelry. This further solidifies the perception of Dulcamara [and by extension, physicians of the time in general] as pretentious and self-indulgent. But self-indulgence is not the worst of Dulcamara’s flaws; the doctor is also portrayed, in no uncertain terms, as a fraud. To the villagers, Dulcamara promises limitless benefits; he can heal any ailment, improve any disability, give youth to the young. In his own words, upon taking his medicines, “all evils are at once upset.” The deception does not end with this general purpose scam. When Nemorino [the opera’s protagonist] asks Dulcamara if he sells a certain love potion [the “amorous drought of Queen Isotta”], Dulcamara claims that he certainly does [despite having never heard of it] and improvises, selling Nemorino an ordinary bottle of wine. When Nemorino inquires how long it will be for the potion to take effect, Dulcamara tells him one day, which as he explains to the audience is enough time for him to begin rapidly packing up the cart once Dulcarama has sold the “love potion.” Altogether, these various deceptions, as portrayed in the libretto and various stagings, firmly establish Dulcamara as a fraud and a charlatan, a reflection of society’s latent frustration with doctors that, due to their lack of expertise and tools, fail to deliver on any promises.

Given the substantial progress made in medicine since the 19th century, one would expect that perceptions of physicians have changed dramatically. While change has indeed occurred, there are signs that some threads of the same frustrations persist in society today. Popular television programs such as Family Guy and 30 Rock feature physicians (Dr. Elmer Hartman and Dr. Leo Spaceman, respectively) that are laughably and outrageously incompetent. And small-scale surveys seem to indicate that the perception of doctors as primarily driven by money is far from absent today. Finally, and perhaps most interestingly, a recent study in the
International Journal of Obesity found that patients were less trusting of doctors that were overweight, and were less inclined to follow their medical advice. These signs imply that the perception of doctors as self-indulgent, incompetent, and fraudulent may be more prevalent today than we care to admit. Although physicians may no longer be selling wine to patients, in a way, Dr. Dulcamara lives on today.

References

The quintessential part of reflection, however, is how to process and manage one’s values and stay well. The following two submissions are based on “wellness.” We have a very strong commitment to our students “self-awareness” and put many support programs in place to help them deal with the stresses of medical school: not only the volume of material that has to be learned coupled with constant assessment. This stress in itself would be enough. But having to deal with death initially through the anatomy course and their first patients, their cadavers, onto their Doctoring patients and the stories the patients will tell them. The submission by Lauren Galvan is based on her entire undergraduate concentration, which she developed as an “independent concentration” on her interests in wellness and mental health. The second is submitted by the Student Health Council, which is a modeled on and works with the Physicians Health Council of the RI Department of Medical Licensure, and offers many opportunities to address wellness as our students progress as physicians. Their paper outlines their role and goals.

**THE STOCK MARKET OF MENTAL HEALTH**

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Think about your mental health for a minute. What are you feeling right now? Now, think about the history of your mental health. How were you feeling yesterday? Five months ago? Five years ago?

My answers look like this: Sleepy, fine, the worst I’ve ever felt, fine. Many of us will have varying answers to these questions that, if were plotted on a graph, may look like a sinusoidal wave, or, if we’re into chemistry, a conformational energy diagram.

But guess what?
That’s completely normal.

You see, our mental health is much like the stock market. It goes up and down. It fluctuates every second of every day. Sometimes we’re sick – we might be experiencing a depressive episode. Or, if we have anxiety, we might be having an anxiety attack. But then, at other times, we’re healthy and happy – our significant other might have proposed, or, if we don’t believe in marriage, we might have gotten ourselves a new job...or a new puppy.

And just like we invest in the stock market, we invest in our own mental health...or at least we think we do. Wouldn’t it sound great on a resume to call yourself a self-employed Mental Health Investor? Maybe not.

The problem is that the job description of being a Mental Health Investor is not what it sounds like. On the surface, it sounds like we should invest in our mental health and pay some good money to buy medication when we detect a problem. And while that is true to an extent, the more important and most difficult bullet point on the job description is to pay close attention to what is going on with our emotions and remain a balanced observer while doing it.

This is one exception to the stock market metaphor, and many of us do not realize it until it is too late – until we’re sitting in the bathroom stall crying about our unfulfilling job, or tumultuous relationship, or, God forbid, our unsuccessful life. Some of us do not realize the importance of remaining a balanced observer until we’re diagnosed with a label that holds an enormously negative and persistent social stigma.

When our mind goes “public,” when we experience some emotional state, our mind gives us the opportunity to purchase a part of the company. In other words, it gives us the chance to “buy-into” our emotion. Naturally, human beings like to invest energy in our more extreme emotions because of the side effect of intense pleasure. Or because, in the case of intense pain, our evolutionary instincts draw us to pay close attention to that end of the spectrum to possibly prevent harm. However, the more we invest in those states, the more the stock – and stake – increases. The stock increases when we lose our emotions and we stay well. And just like we invest in the stock market, we invest in our own mental health...or at least we think we do. Wouldn’t it sound great on a resume to call yourself a self-employed Mental Health Investor? Maybe not.

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This leaves us with irrefutable high stake emotional states that make us more at risk for mental health challenges.

Sometimes, we even become so engrossed in the investment of pleasure or in the investment of avoiding pain that we learn to live with those states and feel comfortable in them, which can be seriously dangerous to our holistic health and well-being and set us up for major disappointments. These
states leave us with the Freudian “pleasure principle” goal of achieving the perfect life without hardship, making our focus stray from our own life’s reality. Instead of focusing on what is, our focus during these states tends to gravitate to what should be or what was. When the stock and stake increases like this, we subconsciously garner more expectations about the perfect “happy” lives we should be living, but for some reason that we always manage to find, aren’t. We throw our emotional health out of balance without even knowing we’re doing it. And that is the most dangerous thing of all.

The more we invest our energy into those extreme states of mind, the less energy we have to expend on what I call the “in-between” experiences of life, like the ordinary yet majestic butterfly fluttering above your hair, or your baby son’s small yet gorgeous giggle, or the peace that comes simply by sitting still in a chair after a long day at work. By solely investing in the high-risk emotions that we already know so well and have been invested in for so long – those of seeking pleasure and those of avoiding pain – we lose touch with what is happening “in the now” – in the present moment – which many of us are unfamiliar with and should get to know, because the present is a pretty cool place to be.

We have the power to choose where we put our energy and where we focus our attention. But by no longer investing so much energy into those high-risk stocks, we can scratch “Mental Health Investor” off of our resume and call ourselves “mental health observers” instead. Let us remain balanced while simply observing our fluctuating emotional states of life, and if our mind wants us to pay attention to something, by all means, let’s pay attention to it. But always remember to stay balanced. There are an infinite number of things in the present moment that we can experience.

The distance we can put between ourselves and our thoughts, emotions, and feelings by observing them instead of investing so much in them may come in handy when making decisions, not to mention it will give us ample space for reflection and pave the way for self-acceptance.

I think that once we realize one alternative way to invest in our mental health is to simply observe our emotions and be mindful of them, we will all find a little bit of inner peace in the chaotic stock market that is our external – and internal – world.

So like my mentors have said to me countless times before, and as I say to you for the first time but certainly not the last:

Go, and experience.