Oyster shells: reflective piece

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Doctors have a choice to make about the extent to which they connect with their patients. They can be open and compassionate and give part of themselves to a patient, or they can choose not to engage with a patient’s story. Broyard describes this dichotomy (Broyard, 1993). On the one hand doctors can be ‘professional’ and ‘scientific’, which he suggests is at the detriment to the doctor-patient relationship. On the other hand, doctors can open themselves up to patients and become part of the patient’s story (Broyard, 1993).

To represent these paths for medical practice, I sculpted two oyster shells, one showing the closed side of the shell and the other showing the open side. The oyster that is open has a pearl inside, representing the rewards that ensue from being open to patients. For the doctor, this is the reward of learning from the patient’s story, and for the patient this is the reward of improved compliance and understanding. The negative effect of being open is the emotion experienced by patient’s that gets loaded onto you as the doctor. This emotion must be managed, which can be exhausting for the doctor. Perhaps this is the price that must be paid for giving away part of oneself.

Oysters also have a hard outer shell, which signifies the resilience needed in medical practice to be able to be supportive to patients. This resilience is needed to face pain and suffering that cannot be healed. Oyster’s shells and pearls are made up from many layers, symbolising the layers of trust in a relationship between a patient and a doctor. These also symbolise the choice of how many layers of engagement to peel

away.

Some answers of how to approach the doctor-patient relationship come from how students feel before they begin training. Dhruv Khullar writes that “As we acquire new and more technical skills, we begin to devalue what we had before we started:

understanding, empathy, imagination” (Khullar, 2016). By valuing what we had before we started training, we can reach a patient more easily. As doctors we can simply ask oneself of the patient “Who is this person I’m speaking with?”. Broyard says of the doctor “He himself, his presence, and his will to reach the patient are all

the assurance the sick man needs” (Broyard, 1993). Not every patient can be saved, but his illness may be eased by the way the doctor

responds to him.

This piece explores how being engaging to patients affects a doctor, and seeks to ask how improved relationships with patients may affect a doctor’s ability to practice.

References:

Broyard, A. 1993. *Intoxicated by My Illness*, New

York: Fawcett Columbine.

Khullar, D. 2016. Letting Patients Tell Their Stories. *New York Times*