

December Empathy M&M

The Rehearsal

Entering the emergency department as a first-year medical student is a practice in selective deafness.

From stumbling into the path of nurses and doctors at every turn, to wincing at the clumsy words we use to screen our weary patients, the ED is a resounding reminder of how little we know. I find myself falling frequently into performance—of competency, false confidence, and most often of nonchalance—almost like there’s a praiseworthiness in not being fazed by human pain. It’s the illusion of experience, of “oh this is no big deal, I’ve seen worse before,” that I imagine one day becomes reality. In these moments, of carrying on with business in the face of undeniable suffering, I begin a conscious filtering-out of the cries around me.

Today, I apologize profusely to a patient begging desperately for pain medication as I screen him for social determinants. I begin asking questions rapidly: insurance blends into food stamps, while transportation and housing needs become an afterthought. I tell him I’ll speed things up as he winces and curls up—but whether I’m making this faster for me or for him, I’m not sure. The dissonance of attempting to help in a way that does not address his imminent pain sets a deep discomfort in my chest. I block out his cries for help in an attempt to finish my job, even as his distress overwhelms me and I attempt to flee. Empathy for his pain—the very characteristic I feel I must have to have to be a “good doctor”—becomes a deterrent to proper care.

The moment reminds me of a fourth-year medical student sharing her story at an M&M event about patient outcomes, in which she describes a woman in long term inpatient care suffering from extreme chronic pain. The patient would scream and moan, hiding under the

blankets when the sensations became overwhelming. Over time, the patient's pain became too much for the student to bear. When she encountered the patient on rounds, she would rush in and out, avoiding her whenever possible. Despite feelings of immense feelings of guilt, the student couldn't bring herself to face the patient—her empathy had not directed her to acts of compassion, but instead trapped her in feelings of isolation and the need to escape.

What struck me the most was her final takeaway: the irony that her empathy for the patient's agony had compromised her acknowledgement of the patient's humanity. For all that empathy seemed to prevent the student from facing the patient, this had been empathy for the patient's *condition* without any regard for *whom* the patient was. What were the patient's concerns and hopes? What and who did she love? Who was she, outside of her hospital gown? In her visceral reaction to the patient's pain, the student had lost sight of her patient's personhood. The student's story poignantly parsed out the nuance between empathy for the patient's suffering and the patient's identity, and how one but not the other may hinder our care. Our instinctive human response can counterintuitively dehumanize our patients.

Ending my time in the ED today, a young woman wailed in the wheelchair behind me, sobbing and whimpering in a way that made my presence feel intrusive. To hear someone cry so desperately and so vulnerably is a moment of indescribable intimacy. Once again, I felt that selective deafness overtake me: I continued to focus on filling out a chart for another patient to receive financial assistance for food and medication. My confirmations of the patient's needs with another student were interspersed with the woman's wet, choking cries. The dissonance of providing care even as we ignored the pain immediately before us was once again a jarring juxtaposition.

Sometimes I wonder if this feeling ever goes away, or if to be a physician is to exist constantly in a paradox of too much and too little empathy at once: between pain and healing, between helplessness and action—between what you can do, what you should do, and what you must. I wonder if one day, my selective deafness will become not a rehearsed performance but a reality of my day-to-day life—or if, like today, the pained cries of those I cannot help will follow me far beyond the hospital doors.