

## ***Humanities: Art, Language, and Spirituality in Health Care***

Series Editors: Christina M. Puchalski, MD, MS, and Charles G. Sasser, MD

# **Bridging with the Sacred: Reflections of an MD Chaplain**

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Life has a curious way of growing us beyond what we can imagine. After 19 years as an emergency physician, I never could have guessed I would become a chaplain. In fact, there were times during those years when I was incapable of comforting a family after giving them the news that a family member had died. I would be so overcome with emotion after 30–60 seconds of the family's grief, I would say, "I'm so sorry for your loss. I'll ask the nurse to come in and be with you." Then, I would get out of the room as quickly as possible.

It is ironic. In my new career as a chaplain, for the past dozen years, I am the one called to bring comfort. I am the one to provide solace when a baby is stillborn, guidance to a husband struggling with whether to continue respiratory support for his beloved wife, or prayer for the young woman desperately awaiting a lung transplant. I also teach a required class, "Spirituality and Meaning in Medicine,"<sup>1–3</sup> and an elective, the "Healer's Art" (developed by Rachel Naomi Remen, MD)<sup>4–6</sup> to medical students at Stanford.

In these classes, students and physicians share personal stories that reveal what I call "the landscape of human spiritual experience." They speak of unexpected moments of awe in nature or in the operating room,

of experiencing the kindness of strangers, of deep connections with family members at life transitions such as weddings or death, as well as grief and loss, and their dream of service. Through such sharing, students and physicians discover they do not need to deny their faith and spiritual values when they practice medicine. They can have a professionalism that honors both.

I have had to cultivate the same in myself as I have navigated the journey from action-oriented emergency physician to reflective chaplain. I have had to let go of my focus on "curing" or "fixing" to bring comfort, and to become someone capable of being fully present, bringing *all* of myself to the bedside: body, intellect, heart, and soul, as well as my training and life experiences. The lessons I have learned apply not only for me but also for any of us who aspire to bring spirituality and meaning into our lives and our work. This has required a lot of personal growth, not all of which was easy or readily embraced.

Still, I am glad I overcame my reluctance and followed the call to step more deeply into this sacred dimension of healing. Many of us are responding to this call, each in our own way. I share this reflection as an example of one person's journey from the traditional role of physician into the realm of spirituality and healing, in the hope that it may be of use to you in your journey. As we each respond to this call, we help to evolve health care into something more complete, something that encompasses biopsychosocial-spiritual care.<sup>7</sup> We all know, innately, that there is a kind of healing not found in an I.V. or prescription bottle

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*Accepted for publication:* March 5, 2011.

or at the end of a scalpel. This dimension of healing is largely missing from modern medicine. And because it is, we, patients and health care professionals, suffer far more than we should.

## *My Journey*

As I look back at my life now, I can see how the path to being a chaplain unfolded along two tracks: the professional and the spiritual. Each developed in its own time and in my case, came together in my 40s. The first was never in question. My father was a physician. He used to say to me: "You can be anything you want. A surgeon, a dermatologist, a family physician, even a psychiatrist. Anything you want." But Life had its own agenda.

When I was 19 years old, during college, I had a mystical vision, one that would awaken my interest in faith, prayer, and spiritual community. This was my first acquaintance with the "uniqueness in me that asks to be lived."<sup>8</sup> Over the years, even as I developed my career as an emergency physician, I studied philosophy and ethics, and sacred psychology, and experienced a variety of spiritual traditions. I had no idea then that I was training for the next phase of my career.

My career in Emergency Medicine had a good 19-year run until April 1998. I had sustained an injury the August before that made it all but impossible to continue. Just four months before the injury, I had an extraordinary encounter with a patient that presaged what was to come. On that day, I took sign-out from my chief. At the time, I was a senior physician in a high-acuity Emergency Department at Kaiser-Permanente Medical Center in Santa Clara, CA; chair of the Peer Review and Quality Improvement Program; and faculty in the Stanford-Kaiser Emergency Medicine residency program.

The patient, Mrs. Martinez (not her real name), was an 86-year-old Hispanic woman with a history of colon cancer and recurrent nausea, vomiting, and dehydration. She was rehydrated and about to be discharged. Her head CT scan, to rule out increased intracranial pressure, showed multiple metastases to the brain. Because I just met her and her oncologist knew her very well, I planned to let him tell

her the news. When I entered her room, however, she asked me a question I could not ignore. "Doctor, what was the result of my brain test?"

I sat down and told her as gently as possible: "Mrs. Martinez, the cancer has spread to your brain." She turned pale, looked away, and said it was a death sentence. I always felt there was something I could say to provide comfort, but what? I tried to reassure her that her oncologist was very experienced and would help her, but it did not faze her. Then I noticed she was wearing a cross and recalled a story Rachel Naomi Remen, MD, told of a doctor who prayed with a patient.<sup>9</sup> I *knew* what I had to do, although I had never done this before. "Mrs. Martinez, are you a prayerful person?" I asked. She nodded. "Would you like to have a prayer together?" "Yes," she said.

I took her hand and waited for her to begin. There was silence; I sensed she was waiting for me. "O God, you who are the great healer," I began, improvising some words. To my utter surprise, she repeated them after me. Then she recited the Lord's Prayer, which I remembered from working in a Catholic hospital years before. I joined as best as I could. She concluded with a prayer in Spanish, then looked up directly into my eyes. The color had fully returned to her face; tears ran down her cheek. "Thank you, doctor," she said, with a depth of gratitude I had never experienced before. The moment brought healing for each of us.

I felt profoundly privileged, indeed blessed. I had the distinct impression I was bridging two worlds: the world of science and technology on one side with the world of the sacred on the other. Although I was completely "off my map," at another level, I felt deeply satisfied that I had fulfilled my duty as a physician and healer. By duty, I think of how the French physician, Edward Livingston Trudeau, stated the goals of medicine: "to cure sometimes, to relieve often, to comfort always."<sup>10</sup> As I learned in taking care of Mrs. Martinez, doing the right thing often means addressing what *really* matters, stretching us beyond our roles as physicians and health care professionals, as they are currently defined, into the further realms of spirituality and meaning.<sup>11</sup> I now see the act of bridging with the sacred as an ethical one, born of compassion, service, and healing.

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