A Hole in my Heart, a Hole in my Head

Anonymous

New York Medical College

Follow this and additional works at: https://touroscholar.touro.edu/quill_and_scope

Part of the Arts and Humanities Commons, Higher Education Commons, and the Medicine and Health Sciences Commons

Recommended Citation

This Perspective is brought to you for free and open access by Touro Scholar. It has been accepted for inclusion in Quill & Scope by an authorized editor of Touro Scholar. For more information, please contact Timothy J Valente timothy.valente@touro.edu.
The purpose of this piece is to share the personal experiences of one medical student on his journey to achieve his dream of becoming a physician. The aim of this piece is by no means to point fingers or target a single individual or entity. Rather, it is a call for help and collaboration in order to eradicate a nationwide trend of student alienation and disempowerment.

Eyes open
In darkness
Drenched in sweat
Legs shaking
Heart racing
A breath?
It’s hard to find.
A gasp for air and the tired mantra repeated yet again:
“It’s all in your head. Everything is alright. Nothing bad is going to happen. You are in medical school. You are living your dream. Things are good. No need to worry…”

Why am I so helpless? Why I have lost all control? I am melting down and breaking into pieces… I was never like this. What has happened to me?

A HOLE IN MY HEART
The vibrations from my phone shook the seams of the worn-out desk that for many years has endured the weight of books, notes, tears and sweats of medical students. I had no choice but to answer. My father was about to break the news that my uncle had passed away. But this was no news, because Facebook, my primary means of contacting the outside world, had already informed me of his passing hours ago. Even though I was expecting the call, hearing my father’s somber voice, tore me to pieces. For the first time since the beginning of medical school, I felt the distance that separated us. There I stood, in a middle of an empty room, desperate for a hug, in need of some affection. I was alone.

Days later, as my tears exceeded reason, I realized that my grief was not just for my uncle. It was for my mother, for my father. I was beginning to grieve their death. And without realizing it at that moment, I was in a sense grieving my own death. It has become clear that the very ones that inspired us to walk down this beautiful path, the very ones that we aspire to help: our mothers, our fathers, our heroes, may perish, while we remain well insulated within the walls of medical school. I have learned that the more of my brain I dedicate to learning the minutest details of existence: cells, viruses, and bacteria, the more distant I become from those who carried me, held me and stood by me. As I learn of eradicated diseases and the rarest conditions known to man, for the purpose of knowledge and avoidance of misdiagnoses, it is becoming blatantly clear what I will miss: anniversaries, birthdays, the first words and steps of my children and sadly, the last breaths of my loved ones. With every milestone I sacrifice to medicine, the “I” that I have come to know for the past twenty something years, dies a little bit. I don’t think that these sacrifices should be taken lightly. I only wish that I would have been made better aware of them before I started down this beautiful path so that I could have been better prepared for this desperate isolation that has consumed me.

Indeed, we have chosen to dedicate our lives to strangers at a cost to our loved ones; even, at times, at a cost to our physical and mental health. My life has changed and I feel the pressure to adapt. At times, the realities that I have to accept make me regress and unleash upon my peers and teachers a defiant child. These changes and realities burn a hole through my heart. At this point, I am not sure if the end justifies the means. However, in the seldom moments when I get a chance to interact with a patient, when I get to act as a healer, when I get to hear their story and be the person who plays a role in their well being, I realize why I decided to become a physician and how much I love this beautiful path. Thus, the only way I can justify abandoning my loved ones is by doing everything I can to become a good healer; a healer that
A Hole in My Heart, A Hole in My Head

will help improve the lives of many. One would think that working hard and succeeding in medical school would surely put me on that path. Yet, as accepting the realities, adapting to the changes and the promise of a better future helps fill the hole in my heart, the more and more I feel the urge to put a hole through the head of my medical student persona and forever abandon my pursuit of medicine...

A HOLE IN MY HEAD

Lost in yet another cycle where day and night are respectively defined by when I awake and when I feel burnt out. I am barely oriented to time and space. I do, however, recognize that I am alone behind the same worn-out desk, which is now well-decorated with my notes. I am caught in a cycle that makes my existence seem pitiful.

I aimlessly walk around these hallways that reek of Xanax and Adderall. If I didn’t know any better I would have thought that ADHD and anxiety disorders predispose individuals to becoming physicians. This was something that I did not understand, until the day when I found myself on an emergency room bed going through series of tests, only to be served with a piece of paper that read “you have been diagnosed with an anxiety disorder.” I did not understand it until I realized that I would do anything for a good night rest; that I would do anything for the tremors, the racing heart and the nightmares to go away. So I ask “why”? Why would healthy, motivated, bright adults need medication to survive medical school? Isn’t learning to cope with pressure and anxiety a part of medical education? Could it be possible that those who gave us the poison forgot to give us the antidote? Indeed, while we are dealt stress in the form of myriad little details that are piled on our backs in tens of thousands of PowerPoint slides, stress management and mental health serve as a footnote on a single, “low yield” slide. We need more than just stress; we need the tools to overcome it. But alas we are so obsessed with tested materials that most of us don’t even consider reading materials or even attending conferences that do not have an assigned grade and/or are mandatory.

And it does get to a point where I am too afraid to look at myself in the mirror, because I can see right through this blanket of academic success that shields my inadequacies. I see my incompetence. No one knows better than me that in the current state, academic success and learning are unrelated. I know that I am constantly reminded by my teachers that I should empower my patients and promote their autonomy. I know that a paternalistic approach to medicine is outdated. Yet, medical education is paternalistic in its nature. I have no voice when it comes to my education, even though I know how I learn best. I am not involved in the decisions that will affect my future. Is expecting chronically disempowered students to empower their future patients a cruel joke? Or is the purpose of medical education to engrave in us a hatred for paternalism, so that we would never do it to our patients?

I feel unfulfilled, inefficient, confused and frustrated. I feel tired and burnt out. I feel unsatisfied with myself and with my life. I lack self worth. And as it has in the past, the thought occasionally creeps in my head that maybe it would not be so bad if I forever abandoned my pursuit of medicine...

It is this exact thought that turns numbers and statistics into reality. While these are the experiences of one student, I can’t help but feel that many others share similar thoughts. Suicide and depression among medical professionals is not an anecdote that should be mentioned in passing. Depression is a national problem that needs to be addressed because it plagues somewhere between 22-49% of medical students. Female physicians and medical students are at a higher risk of committing suicide than the general population. Furthermore, male physicians have a 70% higher rate of suicide when compared to males from other professions. With these alarming statistics on depression, suicide and medical student burnout and the correlation with unprofessional behavior and lack of altruism, I cannot help but wonder: is medical education a form of medical malpractice?

The purpose of this piece is not to complain, but rather to bring to light a national problem. This is a reflection of one student’s experience with medical education, and more importantly, a call for collaboration. I want to participate in medical education, not as on slide 57 in the lecture on self-inflicted wounds, but rather as an alive, vibrant student who is excited...
about the field of medicine; a student who loves this path; a student who craves patient interaction, healing and empowerment. The entire environment of medicine has changed. Medicine is not practiced in the same manner as it was twenty years ago. For better or worse, students have changed. We have different learning expectations and styles. It is time for medical education to adopt a “student-centric” approach. Not just for the sake of students, but for the future of the patients in this nation. There is no reason why a medical student who is accomplishing his dream should question whether he wants to see another morning.

As students we accept the many challenges that we have to overcome and the many sacrifices that we have to make to reach our dream of becoming a physician. But I refuse to accept disempowerment, depression and lack of self worth. All of which are in part side-effects of an unbalanced system that provides stress without providing the tools to overcome it. As I take on the challenge of filling the hole in my heart by overcoming my flaws and welcoming the changes that have taken place and will continue to take place in my life, I whole-heartedly hope that all educators across this country will take on the challenge of treating a nationwide epidemic that leads to the burnout of some of its vital members, promotes unethical and unprofessional behavior, and reduces the self worth of good, hard working and compassionate beings to darkness, depression and in some unfortunate cases suicide.

We are here to help because we care. If you are willing to trust us with the future, it is only rational that you would at least give us a chance to help improve the present. Indeed, it is time to change the paternalistic approach of medical education to a “student-centric” model that will empower students and emphasize mental and physical health.

REFERENCES