

Doctors and A Day in the Frontal Lobe

FUNsulting, etc.'s Newsletter

A newsletter for people who want to add more humor into healthcare.

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WELCOME TO FUNsulting, etc.'s Newsletter

FUNsulting, etc.'s Newsletter is a somewhat regular newsletter from FUNsulting, etc. whose mission is to redefine excellence in healthcare through humor. Each edition includes fun, funny *and* practical articles and resources which will enhance the humor potential in healthcare without sacrificing the integrity of the care that is delivered. Remember, a laugh a day gathers no moss (or something like that). Enjoy!

FROM THE ADMINISTRATOR

Is the Doctor In...on The Joke?

After five weeks of needles, bedpans and green hospital Jello (not in that order) and six weeks in a leg-hip-leg cast, I had finally graduated to crutches. The final step of my recovery from the compound fracture of my femur was physical therapy. For a ten year-old, it had been a long, hard road and I wanted to get back to kicking my sisters.

The physical therapist, Dr. Ed Hill, resembled a bouncer on steroids. He wore a tight t-shirt with rolled up sleeves, had a large tattoo of the Navy insignia on his bicep, and always gnawed on the stub of a cigar. It was 1971, before smoking and cruelty were prohibited in hospitals.

Dr. Hill instructed me to lie on the exam table and then politely asked me to bend my leg as much as I could. After being immobile for 11 weeks, my leg had forgotten how to bend. I grunted and groaned and achieved approximately one degree of movement.

"You can do better than that," he said.

"No. That's about it." I said, smiling.

Before I knew it, he punched me in the stomach and instinctively, I drew both knees to my chest. My leg screamed in pain. I screamed in fear.

“Good,” he said, “I knew you could do it.”

On subsequent visits to see Dr. Hill, about a mile from the hospital, I would notice a pronounced tremor in my hands and sweat on my upper lip. Luckily, today, at age 48, the nightmares have almost completely disappeared. But physical therapist still scare me more than just about anything...except clowns.

What Dr. Hill did was wrong. And yet, the creative humorist in me was intrigued. He was willing to take a risk. To do things a little differently to get the results he desired. In his eyes, he was having a little productive fun with his patients. And even though in my eyes, he was Dr. Jekyll (or was it Mr. Hyde?), I love the effort.

Among the many professions in healthcare, it seems that physicians have the hardest time loosening up. Perhaps it's the pressure of their responsibilities. Or perhaps med school beats the fun out of them. Whatever the reason, they could use a bit of medicinal humor.

Once, I rode my motorcycle to an appointment with an orthopedist. He told me there were two types of people who have motorcycles – those that have had wrecks and those that will. He could have gone into serious-older-wiser grandfather mode and lectured me about the dangers of motorcycling. Instead, he got his point across with just a touch of humor.

A doctor with a sense of humor is a doctor who gets it. He sees the world for what it is and doesn't get too caught up in the seriousness – unless necessary.

My family practice doctor once asked me what I had done for a bad cold I was battling. I said, “Nothing.”

He said, “Well, there you go.”

Essentially, he was saying, “You idiot, what did you expect?” We both laughed.

I've been lucky to encounter a few fun physicians in my life. While I want my doctor to listen and to take the time to consider my particular problem, I also want my doctor to embrace the power of humor. Because sometimes, nothing makes me feel better than a good laugh.

POSITIVE RESULTS

Cancer on \$5 a Day

It's not often that you get an inside look on how a comedian copes with serious illness. In 2008, Robert Schimmel wrote a wonderful book called *Cancer on \$5 a Day (Chemo Not Included): How Humor Got Me Through the Toughest Journey of My Life*. Schimmel did not deny the difficulty of his journey. Yet, he was able to see the humor in chemo, baldness, and even depression. He realized, "I need to make people laugh. That's what feeds me, stirs my soul."

As a result of his battle with cancer, Schimmel came up with these life lessons. Notice the first and last!

- *Keep your sense of humor, no matter what.*
- *Create a purpose, a focus, and never take your eyes off it.*
- *Figure out what's important to you. What's really important.*
- *Be open. Try anything. You never know.*
- *Love. You need love. Tons of it. A sh**load of it.*
- *Sometimes you need to be selfish.*
- *You need support. You're in this alone, but you can't fight it alone.*
- *The most precious thing you have is time. Don't waste it.*
- *You're only human.*
- *And finally, once again – Laugh.*

THE BEST MEDICINE

I'm Not Making this Up

From the "Bonehead of The Day Award" website:

First, a man underwent a hip replacement in the UK, contracted MRSA, a hospital-borne infection. He then spent 9 days in intensive care fighting for his life and has been charged £21,000 (\$32,000) by the UK National Health Service (NHS) for his treatment. The NHS says, "We are sorry Mr. Hogan is unhappy with the treatment he has received..."

I think it would be appropriate for him to shake hands with as many NHS representatives as he can.

Second, The UK NHS (National Health Service) has told a cancer patient that without treatment, she has less than 2 months to live. However, she must wait 25 days (half of her remaining life, by the way) for her medication.

I guess the way the NHS sees it, they still beat their window of opportunity by a month.

DISCHARGE PLANS

Is There Humor in the Frontal Lobe?

The brain is soft. Some of my colleagues compare it to toothpaste, but that's not quite right. It doesn't spread like toothpaste. It doesn't adhere to your fingers that way toothpaste does. Tofu – the soft variety, if you know tofu – may be a more accurate comparison.

This is the fun but slightly gross, in a Halloween-haunted-house kind of way, introduction to the book *Another Day in the Frontal Lobe: A Brain Surgeon Exposes Life on the Inside* by Katrina Firlik.

Dr. Firlik is one of only two hundred or so women neurosurgeons in the country and was the first woman admitted to the neurosurgery residency program at the University of Pittsburgh, the largest – and one of the most prestigious – neurosurgery programs in the country. She is a highly skilled surgeon in not only a male dominated but very stressful field. Yet, she is not consumed by the seriousness of her work but instead, has the ability to see the irony, the fun, and the humor all around her. She is living proof that all doctors are not intense, humorless, career driven, fun challenged, handwriting impaired, bedside manner lacking...OK, you get the picture.

I spoke with Dr. Firlik about her ability to see the humor in her work and the use of humor in general by physicians.

Her insight into the profession began in college where Dr. Firlik developed keen observational skills when she studied cultural anthropology. By becoming adept at observing foreign cultures, she was then equipped to pay closer attention to the nuances of the world of neurosurgery. And of course, since observation is key to the foundation for humor, she also uncovered levity along the way. Most often, the humor Dr. Firlik observed was in the form of either dark humor or self-deprecating humor.

It's common to see doctors and other staff engage in morbid humor as a way to cope with the stress of caregiving. For instance, after accidentally drilling into a sinus (which apparently bleeds quite profusely), Dr. Firlik's colleagues asked, "Did you have your hip waders on?"

This type of humor is typically for staff's ears only and is a very effective way, psychologically, to release the pressure of work. This type of humor often has an anatomical flavor, Dr. Firlik points out, because anything rectal, gynecological, or otherwise socially embarrassing is funny.

Being one of the few women in a male-dominated field, Dr. Firlik also found that self-deprecating humor was a helpful way to fit in. For instance, spinal surgery can require a great deal of physical strength so the other doctors would jokingly suggest that they needed to "bring Dr. Firlik in" to assist. By rolling with this kind of humor, she endeared herself to her colleagues.

But is there a place for physicians to use humor with patients? Absolutely, says Firlik, but she warns that one must be clear about both the intent and the target of the humor.

Once when while trying to explain the complexity of diagnosing Alzheimer's Disease to the wife of an elderly patient, Dr. Firlik clarified that an autopsy was really the only way to be certain. The spouse asked why the patient couldn't get one. Dr. Firlik laughed thinking the woman was trying to be funny when in fact, she was just confused. In that situation, the humor didn't help.

Since neurosurgery seems so intense, I asked Dr. Firlik if she considers her work fun. She said, "Yes."

She loves to look at interesting brain scans. She's fascinated by the way the brain works. She even enjoys explaining something complex to a patient in hopes of making the information more accessible. Those things make the mundane aspects of routine diagnoses, paperwork, and administrative duties more palatable.

It's nice to see a highly regarded surgeon let down her scalpel, so to speak, and enjoy the fun in her profession. If she can do it, why can't we? It's not brain surgery, you know.

QUOTE: Never go to a doctor whose office plants have died. – Erma Bombeck

BACK QUOTE: My doctor is wonderful. Once, when I couldn't afford an operation, he touched up the X-rays. – Joey Bishop, Comedian

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