

## Art of Family Medicine

# The family physician as fifth business

Ian A. Cameron MD CCFP FCFP

uring my career it has been my privilege to listen to stories and occasionally play a small role in their development.

Our stories often define who we are.

I live on Cameron Road, named after my grandfather. It is beautiful here, but in his day it was a rugged and unforgiving part of the world. His life was not easy, but through hard work and diversification he prevailed. Late in his career he went to New York, NY, on business. One of his immediate family members tried to persuade him not to wear his old hat. He replied, "Those who don't know me won't care about my old hat and those who know me know my old hat."

Fifth Business, the title of a novel by Robertson Davies, is an operatic term. The tenor and soprano soloists in an operatic story generally represent good, while evil is represented by the bass and alto soloists. To develop the story, another voice is needed, often a baritone. This soloist is referred to as the fifth business. Family physicians often serve as the fifth business in the stories that emerge from their practices.

### Two memorable patients

In my practice, there were 2 memorable patients I grew to know well over a 30-year period.

The first one, an Englishman I will call Sam, was an extrovert-a polymath who enthusiastically excelled in whatever he undertook. He could be blasé, and he did not want to be a nuisance when he could no longer make a meaningful contribution.

The other patient was from Germany. I will call him Walter. He was a professor, his manner was precise, and he considered everything carefully. He had extensively studied the work of Dietrich Bonhoeffer, the German theologian who was involved in a conspiracy to kill Hitler and was subsequently arrested and executed.

#### Sam's story

Late in the first decade of the 21st century Sam developed congestive heart failure, macular degeneration, prostate cancer, and bullous pemphigoid. He regarded his medical problems as interesting inconveniences. One day in the office he told me he had recently read a distinguished physician's obituary in the Times of London. The obituary mentioned that a remarkable event had occurred while the physician was a medical student in London, UK, during World War II. He and a number of other medical students had been recruited to go to Bergen-Belsen to help implement a dietary program to rehabilitate the starving survivors. I asked

Sam what he knew about Bergen-Belsen and he told me this story.

I was in university studying physics during the latter part of the Second World War. The British War Department recruited university students with a scientific flair to study the complexities of radar. The goal was to train a group of us to be part of forward detection units in the vanguard of the conquering Allied armies as they swept across Europe to Berlin. For me this was a very exciting challenge as I completed my university studies. By the time I finished my training, the Normandy invasion had occurred and I was assigned to a mobile radar unit that preceded the Eighth British Army as it moved across France into Germany. Our radar unit was to detect possible enemy installations ahead of the army. If we detected them, we would call in the Typhoons-armed aircraft that used portable runways; the Typhoons were operated by specialized support units for the Eighth Army. The Typhoons would reconnoitre the forward areas, report back, and disable enemy tanks if they were present. As our unit crossed the Lüneburg Heath, south of Hamburg, a German staff car with white flags on its front fenders approached us. An officer got out of the car and told us that we were approaching a prisoner-of-war camp. Typhus was epidemic in the camp and they no longer had the resources to combat the problem. The officer said they would take their personnel and retreat 20 km to the east and the British Army could take possession of the camp. The camp was Bergen-Belsen.

Sam paused and then said,

I can still recall the smell as we entered the camp. The overcrowding was unbelievable, with emaciated bodies everywhere, some of them living, some dead, and all of them covered with the lice that transmitted the deadly typhus. I can't remember eating or drinking the entire time we were in the camp. We were very busy from dawn to dusk spraying the pesticide DDT on everything to kill the lice. Then, with the help of some Hungarian orderlies left behind by the Germans, we separated the living from the dead. The dead were bulldozed into a mass grave. The living were cleaned and cared for, and their quarters were sprayed and thoroughly cleaned. We fed the starving prisoners small amounts of nourishing soup, but they were ravenous and some of them died from overeating. The war was not over and as our unit was needed in the march to Berlin we left Bergen-Belsen. The Times

obituary sparked my interest and I wanted to find out how the Bergen-Belsen story ended-and I did.2

#### Walter's story

At about the same time, I saw Walter in the office to check up on several ongoing medical problems. I asked him to tell me about his work on Bonhoeffer.

My theological dilemma with Bonhoeffer was how to reconcile his attempt on Hitler's life with the Old Testament's commandment "Thou shalt not kill,"3 and with Christ's New Testament commandment "You shall love the Lord your God with all your heart, with all your soul, with all your strength, and with all your mind, and your neighbour as yourself."4

Then he paused and told me his story:

At the outbreak of the Second World War my father was a successful industrial chemist. With the occupation of Belgium, the Netherlands, and most of France, he was put in charge of German chemical production in the West. Later he was promoted and was responsible for chemical production for all of Germany and its conquered territory. One evening he returned from the East. I was 10 and had read the newspaper that day. I asked him if he had been to Auschwitz. He took me into his study and told me never to ask him again about his work. During the aftermath of war my family suffered. Two of my brothers had been killed in the war and there was never enough food. In the late 1940s my father accepted a job in Switzerland with a large pharmaceutical company and in the 1950s he was transferred to New York. My mother would not move to a country that had conscription, so we immigrated to Canada and my father commuted from Montreal to New York. My father did not destroy his war journals and when he died he left them to me. I found out that the night I had questioned him he had been in Auschwitz. I also discovered that the main chemical he produced was Zyklon B-hydrogen cyanide-for the extermination of prisoners in the concentration camps.

#### **Epiloque**

Sam and Walter had never met. I invited them to lunch to meet and, if they felt comfortable, to tell their stories. After some general conversation they began, an atrocity witness and the son of an atrocity perpetrator. When they finished there was an unstated mutual appreciation of their shared experience.

Walter has described his life as "being long and hard and an utterly unavoidable journey." He has taken on a burden of guilt, although his theological quest and telling his story has lightened his load. Not long after the lunch he received an honorary doctorate for his work on Bonhoeffer and he continues his research and writing.

Shortly after the events just mentioned, Sam sent me an e-mail. Attached to it was a letter he intended to submit to the Globe and Mail. The letter was entitled "Death Wish." In it he said,

After a varied and stimulating career and a wonderful 50-plus years of marriage and family, my many pleasant and comforting memories are being inexorably overridden by thoughts of my deterioration.

He went on to talk about the appropriateness of doctorassisted suicide. The metaphor he used was "to be given the prescription for which there is no refill."

But, strangely, his life began to take on new meaning. Sam got busy researching what happened to the survivors of Bergen-Belsen. He presented a very moving talk on his story and research to the Dalhousie Society for the History of Medicine. He bought a motorized chair, organized his papers with the help of an assistant, and created new memories, surrounded by family and friends. Quite by accident I met Sam having lunch with some of his friends. He was enthusiastically discussing a new production his theatre group was rehearsing.

I have retired to that beautiful and rugged part of the province where my grandfather lived. There is a gold mine of stories here. It is my privilege to listen and be part of them.

Dr Cameron is a retired Professor of Family Medicine (Dalhousie University, Halifax, NS) in Sherbrooke, NS, and Section Editor for the Art of Family Medicine section of Canadian Family Physician.

#### Competing interests

None declared

- 1. Davies R. Fifth business. Toronto, ON: MacMillan Co. of Canada; 1970.
- 2. Shephard B. After daybreak. The liberation of Belsen, 1945, London, UK: Pimlico; 2006.
- 3. Exodus 20:13 (KJ21).
- 4. Luke 10:27 (NKJV).