The God particle

Dr Pimlott makes an astute observation that family practice possesses intrinsic uncertainty and subsequent existentialism. Scientific existentialism promises to climax in the coming year as eager physicists at the European Centre for Nuclear Research seek the famed Higgs boson, or "God particle." Why should we care? Because the energy and happiness generated in this pursuit has a long history within our very own field of medicine.

Nicolaus Copernicus, a practising generalist physician, reframed our perspective on the heavens by suggesting that the universe did not revolve around our tiny blue planet. This revolution in science is not unlike the patient-centred themes of Hippocrates, to whom we have all sworn an oath.

Family medicine boasts a long and proud history of bright minds and remarkable, practical talent. If we worry that medical students might shun the uncertainty of a generalist career, we need not be troubled. Just as string theorists revel in their mathematical eroticism, so too can primary care physicians thrive on the challenge posed by the intrinsic amorphism of the human condition.

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by e-mail

Soft to know?

In response to Dr J.L. Reynolds' excellent article "Hard to know. What is hard knowledge?" (*Can Fam Physician* 2007;53:385 [Eng], 389 [Fr]), I am given to believe that it is not just end-point medical knowledge itself that is dichotomously labeled (and overtly so) as "hard" or "soft." It is also the process employed resulting in discovery of a given quantum of enlightenment that draws the inference of "hard" (nowadays the complimentary term) versus "soft" (a term of disparagement). Dr Reynolds thoughtfully refers to facts (today called hard but by the passage of time not infrequently discovered to be changeable, erroneous, or impermanent—therefore in reality soft) versus the "touchy-feely stuff," currently denigrated as soft material but which, being rooted in "human being-ness," is often shown to be nature's hardest, most lasting knowledge.

The rigidities of the scientific method being what they are, it is the exemplariness of the randomized placebo-controlled crossover trial, and, of course, only when encompassing a statistically-blessed large *n*, that merits the badge of "fact" or "hard." Biological observations derived from merely human circumstances (such as occur daily over a practitioner's lifetime) could not possibly, by today's orthodoxy, merit such acclaim. You mean … What? … Such observations are not deemed worthy of being called evidence?

And therein lies, as Reynolds writes, the sadness—a profound sadness. But therein also lies, as his words imply, the very reason that we teach (read "demonstrate") our trainees the behaviours (read "processes") of inquisitiveness, imagination, and compassion, together with their inherent mores and values. Our careful recording of, and our learning from, such types of observation also constitute a science, in my opinion. Indeed, parts of this new science are beginning to adopt names, such as "narrative medicine." A bright future can, in all possibility, hold as goals for the family physician an expansion of the accepted meaning of evidence and especially a rehabilitation of the meaning of "soft" (as in "knowledge"). Who better than we, given the kinds of persons we strive to be and to train, and given the situations we encounter daily, to reflect so?

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by mail

The meaning of "is"

I was delighted to read some of the commentaries in the March issue of *Canadian Family Physician* concerning quantum physics and its relationship to modern medicine. I was particularly interested in the article by Dr Reynolds, "Hard to know. What is hard knowledge?" (*Can Fam Physician* 2007;53:385 [Eng], 389 [Fr]). His linguistic ambiguities were particularly amusing and insightful, and it occurred to me that this hard/soft, *exclusive, either/or* world in which we find ourselves is very similar to the particle/wave duality of quantum physics. Perhaps we can learn something from this paradox that is useful to us in medicine.

It is seemingly impossible to resolve the particle/wave duality, unless we simply accept that perhaps both exist or that neither exist (making the universe *inclusive* and *both/and*). Perhaps we can also solve the hard/soft duality by accepting that not only both exist, but that sometimes the one is more useful that the other; and that sometimes the other is more useful that the one; but *never that either is useless*—making the universe inclusive as well. To do that we would have to

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