## **Book Reviews**

## On being a doctor

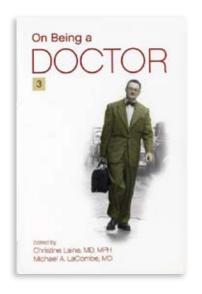
**EDITORS** Christine Laine, Michael A. LaCombe **PUBLISHER American College** of Physicians Press, 190 N Independence Mall W, Philadelphia, PA 19106-1592, USA TELEPHONE 800 523-1546. extension 2600 WEBSITE www.acponline.org PUBLISHED 1995/178 pp/\$19.95 US

**OVERALL RATING Brilliant STRENGTHS** Variety of stories included WEAKNESSES No biographies of the individual authors **AUDIENCE** Those with an interest in medical humanities

ohn Lennon once sang a song about life being what happens to you while you're busy making other plans. This book is about what happens to people while they're busy being doctors; it's about the person behind the professional.

On Being a Doctor comprises a collection of stories, essays, and poems that originally appeared in Annals of Internal Medicine from 1999 to 2006. It is divided into 8 sections, which deal with such topics as death and dying, learning and teaching medicine, aging, balance, and doctor-patient relations. Most pieces are short, 2 to 3 pages, making it the type of book that you can easily pick up and put down.

Early on there is a poem by Beatriz M. Rodriguez called "Trouble" that begins as follows: "The trouble with med students is/They are young/ Not young like spring time/But young like morning/Full of possibility/Full of questions you have stopped asking." She goes on to list the hopes, feelings, and memories of what it was like to be a medical student. Later



works describe the stages of medical practice, from the arrogance of the overconfident resident to the wisdom of the older physician—or perhaps vice versa. Either way, this collection in its entirety deftly captures the experience of being a doctor. Out of more than 100 pieces there was not one that I could not relate to.

At the book's core is the idea of identity and what it means to be a doctor. The sociologist Pierre Bourdieu would say that our behaviour as doctors is derived from a particular habitus: an unquestioned, predisposed way of being that produces a collective identity and sense of belonging. We might conform exactly to the stereotype or we might rebel against it; either way, and especially as the years go by, we develop a way of seeing, reading, and being that is particular to doctors. Perhaps this is why the book is so easy to relate to—it would be a different story trying to relate to a similar collection about lawyers.

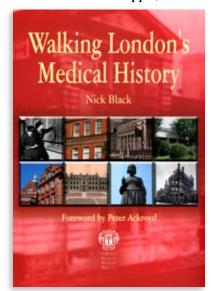
I found the quality of writing superb. Throughout the book there were little insights and bigger epiphanies that stopped me short in my tracks; for example, "too often, as doctors, we speak practically and are heard emotionally. And perhaps that is our role." Or for one who does housecalls, the following might resonate: "I remain uncomfortable when entering my patients' homes, especially when there is too little to offer beyond the dubious benefit of my presence." But perhaps my favourite, and one I will repeat for a long time, is as follows: "It is a peculiar privilege of a rural doctor to walk among one's dead." The author suggests a trip to the local cemetery, which is something I might do tomorrow. If only the dead could talk—what a career review that would be.

-Michael Cussen MB BAO BCh DCh

Dr Cussen is a family physician at the Hants Shore Community Health Centre in Nova Scotia.

## Walking London's medical history

**AUTHOR Nick Black PUBLISHER** Royal Society of Medicine Press, 1 Wimpole St, London, UK W1G 0AE TELEPHONE: 44 (0)20 7290 2921 FAX 44 (0)20 7290 2929 WEBSITE www.rsmpress.co.uk PUBLISHED 2007/231 pp/\$30.95



OVERALL RATING Good

**STRENGTHS** Organized into themes that are interesting and relevant to our own health care system

**WEAKNESSES** Use of inset boxes are confusing and make the timing of events within each chapter hard to follow

**AUDIENCE** Anyone who has an interest in medical history or would like to become familiar with less touristy parts of London

s the title suggests, this book Adescribes walking tours that are designed to tell the story of how medicine developed in London, preserving the medical legacy of an ever changing city. Hoping to increase understanding of presentday health challenges, the author looks at past and present similarities between the Canadian and British health care systems; as such, the book will be of interest to Canadian physicians. Some of the differences highlighted between "us and them" also provide insight into our own system. The book focuses on smaller institutions, highlighting a few organizations and buildings that would be hard to imagine existing in Canada.

The book is organized into 7 walks, each with a clearly stated theme. The walks illustrate aspects of health care that have changed greatly over time, as well as those that still remain relevant. Issues such as insufficient funding, interprofessional rivalry, and governance of institutions are common challenges identified throughout the history of medicine in London. The changing influences of religion, the rise and fall of affluence in different areas of the city, and the effects of the Second World War are all well illustrated on the

walks. The influence of the railway on the ebb and flow of institutions and physicians was fascinating. I found the number of institutions, large and small, that have appeared and disappeared in the London landscape quite staggering. As Canadians consider a move to a public-private system, the amalgamations and splits arising from the move from private care to the National Health Service and back to private again was also interesting and relevant.

The book has a good collection of contemporary photos, old paintings, and maps to demonstrate changes over the centuries. There are also maps to guide the walker, and most of the walks are accessible from the Underground. An overall map to show how the walks relate geographically to each other and to the rest of the city would have been helpful for those not intimately familiar with London.

My biggest frustration with the book was the boxes that were integrated into each chapter to provide background information on common topics. Although the material in these boxes was interesting, it was often at odds with the time sequence discussed in the chapter, causing confusion about the timing of events.

I confess that I love London and have spent quite a bit of time walking around it. I found it fascinating to learn how many hospitals and how much health history I have unknowingly walked past. Someone who has never been to London might find the book to be a challenge. The book can be a little tiresome when reading at home; however, it would be a wonderful way for a physician to enrich a trip to London.

—Christopher Frank MD FCFP

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