



Poetry will save your life

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A couple of years ago, I found myself browsing a since-shuttered Chapters in Oakville, Ont. Sitting on the shelf, face-out in privileged promotional glory, was Jill Bialosky's memoir *Poetry Will Save Your Life*.¹ The title made me do a double-take. I confess, I thought to myself: *no shit!*

I left the memoir untouched because I already agreed with its title. Poetry had saved my life several times, in specific material ways. I could retail these ways to you, provide a detailed narrative and some rich scenes to show exactly how poetry saved me like a superhero, HAZMAT team, or paramedic, but why prove the point to satisfy the gods of biomedicine? I write in the name of poetry.*

Perhaps we'll meet someday, and I can retail those innings of the soul in which poetry did save me, keep me alive, or some other phrasing that's less dramatic but also less honest. You might pick up some of my books in which the details are provided in poems, memoirs, and short stories. But if you did go seeking those details like good practitioners would, trying to bring into your understanding my actual historical data, my *story*, you'd also have so much more than those confirmatory, specific details that a patient history requires in order to make any sense. You'd have the lifeblood itself, the enactment of the details, the song that attests to my life in this world. You'd be reading poetry, and if you did that, I'd hope that my own biography would cease to be interesting and that the moving moment of each poem's line would somehow matter more.

If this became true for you, then you too would look at the cover of books like *Poetry Will Save Your Life* and, like me, you would already know that the point is obvious, because we'd be living lives in which the point is a given. Like me, you'd be reading poetry—perhaps writing it too. You'd see poetry all around you, as more of a property of things, perhaps as enfolded by, or enfolding, the discipline of physics as opposed to words on a page in books, words that comprise a pleading title like *Poetry Will Save Your Life*.

To phrase the proposition differently: *Chicago Hope*, *ER*, and *Grey's Anatomy* are not called *Medicine Will Save Your Life* for a reason. Any medical drama on television depends on the fact that people unconsciously consider medicine in the same way I looked upon the cover of

Bialosky's book. *No shit!* they think, to the idea that doctors will save my life! *Duh!* Such is the privilege that the biomedical epistemology has in our society that the point is obvious. Yet I tell you that the same is equally true for poetry in your life, and in your practising lives. Poetry, too, will care for you and for your patients.

Yet the idea that poetry is important and necessary to your medical lives (even your professional and personal survival) might seem obscure. How can what I'm writing be true? *Prove it to me!* you might be thinking. Yet the proof is not biomedical; irreducible to numerics, the proof is in poetry itself. You must read it and come to the mountain, for the mountain will not come to you. For isn't the mountain of numbers already crushing you? Hasn't that mountain already come to you, the culture having hurled it down on your head? The culture didn't make poetry come to you.†

I have stories in which a proof that poetry is vital to medical practice can be sketched. These anecdotes would reassure the hardest scientific heart that my unconventional opinions should be tolerated as the humanities tend to be tolerated within medical institutions as a weird old uncle brought out as entertainment before a nightcap, bidding good, restorative sleep to all gathered in attendance. My anecdotes are, at least, anecdotal evidence. My anecdotes are, at least, placeable somewhere according to a hierarchy of information.

But poetry is more important than that, as the secrets of life are. To anyone reading this, open your window, have yourselves a Howard Beale moment—I give you permission!—and shout this out:

*Love is more important than a drug!
Beauty is necessary to be a good doctor!*

Fellow physicians, residents, and medical students, you need poetry. The tragedy is that many of you—perhaps most of you—either don't, or won't, understand.

For those who fall on the don't side: rejoice! There's still a chance you can find the mountain. Trudge that proverbial road to happy destiny by reading some poetry. You might have to read it for years, baffled or unimpressed. But if you keep reading it, then you might, suddenly or gradually, come to an understanding that poetry is more than "improving observational powers for the purposes of improving clinical outcomes," more than

*If that statement strikes you as grandiose, then you must admit it's at least—a little bit, anyway—redeemingly silly, published as it is in a medical journal.


†Poetry wouldn't listen, anyway. Poetry doesn't do what it's told.

“a narrative medicine practice,” more than “a self-care hobby,” as suggested by the neoliberal resiliency ethic. Poetry transcends co-optation by biomedical frameworks that seek to tame it, to turn it into a tool. Poetry *will* save your life. But this is a spiritual knowledge more than a quantifiable, discrete, reproducible one that fits easily within a clinical practice guideline.

If, instead, you already agree that poetry matters, and is the reason you’re alive, that it keeps you standing on 2 feet—then that’s good. *I need you. Medicine needs you.* Tell other people about our mountain, though I fear you’ll only be able to attest to it and model how it is important, finding yourself consistently frustrated when having to reduce your love—for we’re talking about love, and so who cares about numbers?—to rhetoric about how poetry can serve a utilitarian purpose, how it can sharpen listening skills. It can, of course—you know that. It has. It does. But poetry is also why you are walking around, why we are walking around.

In the (ironic) spirit of improving a future outcome, of being useful, I will give you this tool. If you’re ever forced to defend poetry or the humanities within the institution of medicine, be armed with this analogy: sometimes, in the morning, I throw my arms open wide to my daughter and say, “I love you thissssss much.” Not once has my 2-year-old girl ever come up to me with a tape measure to discover if that morning’s span was as wide as the morning before. Sometimes she, too, throws her arms wide while looking at me, saying, “Love!” I also do not measure how far she stretches. The meaning of the gesture, though, is *everything*. Exactitude is *nothing*.

To conclude, I append a poem to this essay as a non-conclusion—for an address about poetry should, at the least, include the stuff! You’ll be able to intuit the historical details I mentioned earlier around how, in my own individual case, poetry can be incorporated within a concept of “therapy” or “recovery”; yet I also provide the following poem as both proof and anti-proof. Those who seek the proof of poetry as being useful in the context of medicine solely *as* proof are, in truth, seeking the anti-proof. They’re looking for a way to reject the principle that poetry matters in life, is essential to life, is present (thankfully) even though it is routinely ignored and rejected. Such a dogmatic, concrete reader who detects the special vulnerabilities and requirements in my personal history as represented in my work can use that specificity to differentiate everyone else from my own particulars. *He needs it, the proofers might say to themselves, but I don’t.*

That’s having things both ways, demanding proof and then fencing off the academic playground to protect the philosophically privileged tradition, the one based in numbers. But, as you’ll inevitably see years out into your careers—it might take as long as a decade before you start to wonder, *Is this all there is?*—that’s a lie. Or, a partial truth that, in time, as you keep walking up a different mountain, the mountain of clinical work dependent in only a tangential (and not critical) fashion upon the mountain of data, you’ll recognize in terms of magnitude that the partial truth can be called a lie. But let’s make it NOT a lie. Not anymore! Consider yourself warned. *Poetry will save your life.* 

Reference

1. Bialosky J. *Poetry will save your life*. New York, NY: Atria Books; 2017.

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The Day I Was Told My Son Had an Intellectual Disability

was hot. Clear, blue sky—everything green,
the world getting on, with, and over itself.
I was in love with the usual things and stayed
in love. My problem, or deficit—maybe some
portal that pours out—it remained. As before,
I couldn't quite decide on the word. But I was sure
of the process: energy shining out that no one
could see except the ableists who want to block
out the sun for the benefit of their blankness,
who insist I be better for their comfort. There
is no pain ever, you see, that can be made visible.

As the doctor talked, I thought of my father's advice
from childhood: *When you're older, get along
with your brother because he's all you'll have
in the world that will be there for you no matter what
you've done.* Wait—all I ever did was try to be
like, to be a-liked? When that didn't work, I hid
megawatts under a bushel and succumbed.

Doc talked more. I heard my father's words
spoken in my own voice, for I've practised
them too with my own son and daughter.
*You will be the only ones who remember,
who know who each other are—how you
were made. You need to care for one another.
Stop fighting.* Spoken not as command,
but plea—a gospel for the world. As Doc
finished speaking, asking me how I felt,

what I understood, I wanted, badly, to be as strong
as his good lie. To pretend like the other ableists
that this doesn't matter, that my son remains my son,
not a problem or deficit, but energy shining out.

But the sadness is that the name he received
as baptism in nemesis was recursive, a re-enactment
of history, all the words I've heard that missed
the mark, and yet were exactly this, each time:
different, different, different.

As his father, how should I feel, and what should I say?
I did what anyone would do. I failed. I wished *it*—
the condition, disability, problem, the bad word
and thing—would all go away, that *it* could be fixed.
But *it* can't. Knowing that, I put my hand on his head
and ruffled his hair, some small fragile glow
in the room that, like the world, needn't be hastened.

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Competing interests
None declared