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Dr. Abraham Verghese on Treating the Real Heart

We do more than move catheters from the thigh—now the wrist.

We do more than prescribe a drug that relieves the strain of forward flow.

We do more than implant devices under the skin of the chest.

Cardiology is so much more. There is an intangible about the heart, something other than biology and physics.

The thousands of attendees at the plenary session of the [American College of Cardiology 2015 Scientific Sessions](#) were like patients: we wanted—no, needed—to celebrate what is so beautiful about our vocation, our being as doctors.

And who better than author, doctor, teacher, thinker Dr. Abraham Verghese (Stanford University, CA) to inspire us?

I've been to a lot of plenary sessions at major medical meetings. They are always good, but this one was special. You could feel the collective craving—for humanity. Doctors need this now, more than ever.

Dr. Verghese did not disappoint. He started, with a poem by e e cummings, "*[i carry your heart with me(i carry it in)]*."

That led him to speak of the heart in two forms.

There are the hearts that we randomize, meta-analyze, and catheterize—the topics of many sessions this week in San Diego. These are the easy hearts to see.

But those were not the hearts Dr Verghese spoke of. He spoke of the spiritual heart—the organ that connects us as people.

How do we make that connection? How do treat the real heart of our patient?

First is to harness the power of words. "Words will be the glue that makes this meeting happen,"

Dr. Verghese said. But as the great physician-writer Walter Percy warned, we must not let the technical jargon of medical language be like blinders to the suffering of our patients.

Dr. Verghese reminded us of what electronic medical records (EMR) have done to the words that make up the human stories of medicine. He cited a study that showed a typical ER doctor spends 46% of the time on a computer and that a typical day includes 4000 clicks. Another study showed medical trainees at Stanford spent more than 6 hours per day logged into a computer.

This precious time, these important words, are wasted on creating a bill. "EMR has nothing to do with your heart, or your patient's heart." (*My comment: Read that again, and again. Tell everyone who will listen. Tweet it. Don't stop saying it.*)

Another way to carry the hearts of our patients is to notice the ritual of the encounter between patient and doctor. "It is a bit like love," Dr. Verghese said. "You are thrust onto your physician by an event. Here comes this capable person who cares for you."

Unfortunately, in this era, it is an unrequited love. Your doctor is there to talk about only one heart, the one with pressure gradients and ejection fractions.

"Ladies and gentleman," Dr. Verghese said, "words are hard. . . . But thank God, there is place beyond words."

That place is the *encounter* between doctor and patient—the ritual. Patients trust us with their secrets. They disrobe and allow us to touch them. "Meanwhile," he said, "we wear a ceremonial white outfit and they a paper gown. . . . How is this not a ritual?"

The esteemed writer and doctor told us that when we recognize our own sense of self and of the patient's being, something profound and magical happens.

But when we shorten this ritual, when we don't hear or touch the patient, we miss the transformation.

He is correct. I hear the same complaint from patients: My doctor did not listen, he did not touch me, and he had his hand on the door the whole time.

It does not have to be this way. Dr. Verghese told us what we already know but are pushed to forget: if we connect with the real heart of our patient, then we approach the magic of poetry—a place where the mind and heart say the same thing.

Doctors seek more joy from our work. We need fulfillment. It is not easy, this I know, but each time we see a patient is a chance to carry a heart. That is, if we notice it.

In helping thousands of heart doctors notice this immense power, Dr. Verghese does a lot of good

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