

# The Medical Arts Program at the University of Michigan

## 2009-2010 Report



**October 2010**

## Executive Summary

Superb patient care requires much more than simply applying practice guidelines and insights from the natural sciences to the bodies of human beings. Excellent clinical medicine also includes an appreciation of the essential elements of humanity, a generous dose of empathy, and an understanding that the medical craft can be understood and practiced only within a specific social context. One powerful way for clinicians to understand better the humanistic elements of healthcare is to consider the works of great artists in the musical, theatrical, literary, and visual arts. The arts can offer insight into the nexus between society and medicine with an intensity and fidelity that may be unavailable through other means. We thus proposed to enhance medical students' and house officers' ability to provide high-quality clinical care through experiences with and analysis of the arts. To that end, the Medical Arts Program (Medical Arts ) has four Specific Aims: (1) To develop a curriculum that enhances medical students' and house officers' ability to provide high-quality, humanistic clinical care through experiences and analysis of the musical, dramatic, and visual arts; (2) To evaluate the curriculum's success in improving clinical care; (3) To achieve sustainability of the curriculum by means of continued external funding; and (4) To disseminate the results of this program.

Seven Medical Arts events took place in the 2009-2010 academic year, with 176 participants across all events. After each event attendees were asked to provide both qualitative and quantitative evaluations. Their responses were enthusiastic. When asked to draw connections between their experiences at an event and their experiences as a physician or in medical school, learners frequently commented that they saw medicine is an art as well as a science. Learners often observed that the events served to relieve stress, and to help them find time and rekindle interest in experiences outside medicine. They appreciated the ability to "take a break" from the study of medicine. Learners reported attendance at events helped to enhance their empathy, their ability to understand patients, and their emotional connection to others. In comments often rich in metaphor, they identified with the major themes of the work they viewed and took its lessons to heart, such as the need to maintain work-life balance.

In response to the question "Would you be interested in attending more events?" the response was virtually unanimously "yes." In response to the question "To what extent do you think the experience will make you a better physician?" no learners reported 0 on the Likert scale ("Not at all") and two-thirds of learners reported a Likert score of 4 or 5 (5 being the highest score).

## Introduction

*“I think this is an incredibly valuable program. It provides an excellent opportunity for students to appreciate the arts with fellow healthcare professions. There is something very powerful about a shared experience with your colleagues outside of the hospital.”*

(From a learner evaluation)

Superb patient care requires much more than simply the careful, rigorous application of practice guidelines and insights from the natural sciences to the bodies of human beings. Excellent clinical medicine also includes an appreciation of the essential elements of humanity, a generous dose of empathy, and an understanding that the medical craft can be understood and practiced only within a specific social context. One powerful way for clinicians to understand better the humanistic elements of healthcare is to consider the works of great artists in the musical, theatrical, literary, and visual arts. Many of these artists addressed issues central to healthcare, such as human joy and suffering, pestilence and prosperity, and devotion and despair. Some artists have also grappled with the sorts of profound questions that so often come to the fore when people are ill, such as the purpose of life, while other artists have powerfully reflected on their own sickness, disability, aging, and impending death. In short, the arts can offer insight into the nexus between society and medicine with an intensity and fidelity that may be unavailable through other means. We thus proposed to enhance medical students’ and house officers’ ability to provide high-quality humanistic clinical care through experiences with and analysis of the musical, dramatic, and visual arts. To that end, the Medical Arts Program (Medical Arts) has four specific aims: (1) To develop a curriculum that enhances house officers’ ability to provide high-quality, humanistic clinical care through experiences and analysis of the musical, dramatic, and visual arts; (2) To evaluate the curriculum’s success in improving clinical care; (3) To achieve sustainability of the curriculum by means of continued external funding; and (4) To disseminate the results of this program.

## The events

Seven Medical Arts events took place in the 2009-2010 academic year.

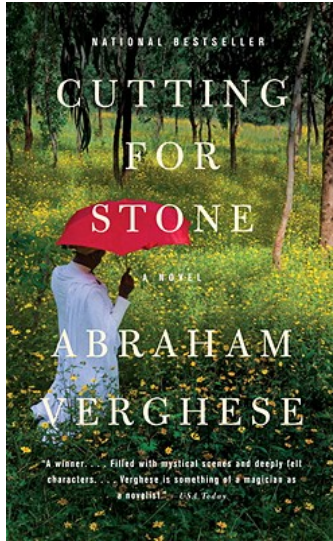
**Table 1: Medical Arts Events 2009-2010**

| Event   | Date              | Venue  | Speaker   | Number of learners |
|---|-------------------|--|---|--------------------|
| Lecture/Discussion of Medicine and the Arts   | October 7, 2009   | The Earle Restaurant                                       | Joel Howell, Victor Vaughan<br>Professor of the History of Medicine   | 26                 |
| UMMA Tour/ Dinner <sup>1</sup>  | October 29, 2009  | University of Michigan Museum of Art (UMMA)/Michigan Union | Ruth Slavin, UMMA Director of Education/Pam Reister, Associate Curator for Education  | 25                 |
| Dinner, Lecture and Berlin Philharmonic Concert <sup>2</sup>  | November 17, 2009 | Palmer Commons/Hill Auditorium                             | Steven Whiting, Associate Dean, University of Michigan School of Music  | 31                 |
| Dinner, Discussion and University Dance Company Performance   | February 5, 2010  | Alumni Association   | Peter Sparling, Thurnau Professor of Dance at the University of Michigan and Artistic Director of <i>Peter Sparling</i> Dance Company | 28                 |
| Dinner, Discussion and Performance of Anton Chekhov's play <i>Uncle Vanya</i> , by Maly Drama Theater of St. Petersburg | March 27, 2010    | Biomedical Science Research Building/Power Center          | Katherine (Kate) Mendeloff, Lecturer, UM Residential College  | 22                 |
| UMMA Tour and Dinner/Discussion <sup>3</sup>  | May 6, 2010       | UMMA/Michigan Union  | Ruth Slavin/Pam Reister   | 25                 |
| Dinner and Discussion of Abraham Verghese's novel, <i>Cutting for Stone</i>   | June 3, 2010      | The Blue Nile Restaurant                                   | Sanjay Saint, Professor of Internal Medicine  | 19                 |

<sup>1</sup> For list of works of art viewed, see Appendix 1.

<sup>2</sup> For concert program, see Appendix 2.

<sup>3</sup> For list of works of art viewed, see Appendix 1.



*“Reading about the characters’ dedication to medicine further strengthened my own.”*

*“The book reinforced my desire to make a positive impact on global health.”*

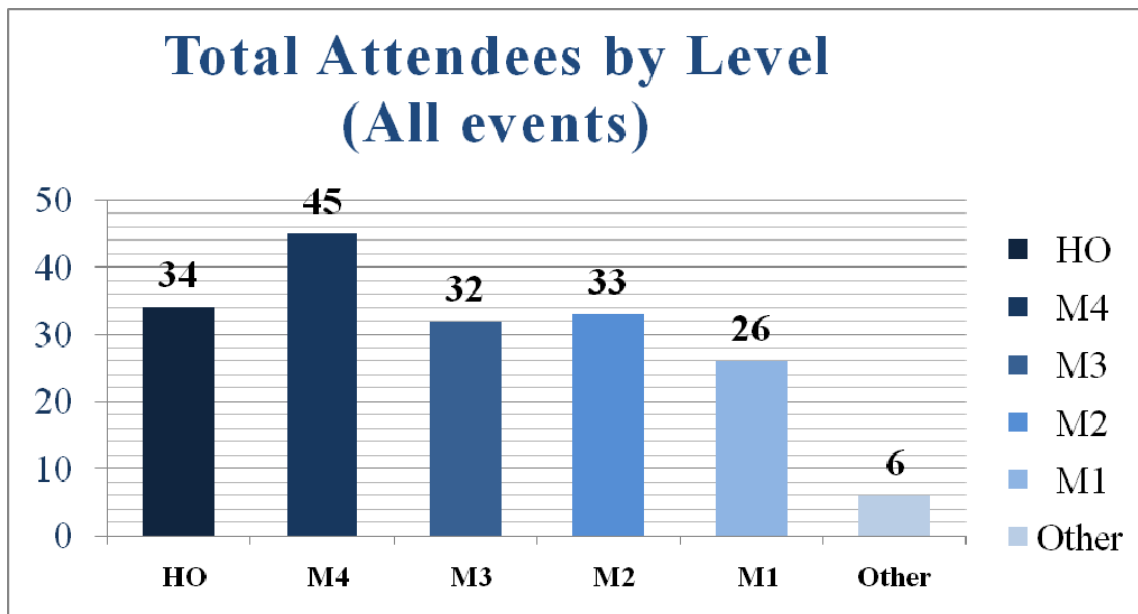
From learners who participated in the book discussion of *Cutting for Stone*, by Abraham Verghese.

### Attendance

There were a total of 176 learners across all events, some attending more than one event. While many attendees came to these events having had previous experience as an artist, many others were relatively new to the arts. Many events were hugely oversubscribed – we tried to allow as many people as possible to participate in at least one event.

Figure 1 shows attendees by their level in the program. We hope to achieve a mix of levels of learners, from those as-yet unfamiliar with clinical medicine to those nearing the end of their formal residency training.

**Figure 1: Total Attendees By Level**



## Survey results

After each event, the Medical Arts team asked for both qualitative and quantitative evaluations from attendees. The words of the medical students and house officers capture the intensity of their response and the many ways in which they found these experiences valuable.

Attendees were asked to draw connections between their experiences at an event and as a physician or in medical school. Learners frequently commented that they saw medicine is an art as well as a science. Learners often observed that the events served to relieve stress, and to help them find time and rekindle interest in experiences outside medicine. They appreciated the ability to “take a break” from their studies:

- “Both music and medicine involve precision and technique, but like music, medicine can also be an art. In terms of experience, I think it was also important in giving us an opportunity to step outside of medicine for awhile... (I)t’s really difficult to maintain balance in activities and thought because we end up in the hospital all the time and are expected to study in our spare time... It meant a lot to have these types of activities structured into our lives.” (Berlin Philharmonic)
- “Listening and learning more about the complexities of music reminds us that there is life outside of medicine that is rich and full.” (Berlin Philharmonic)
- “After the concert, I simply felt enriched and refreshed. ... (I)t is important to renew myself as a human being every once in awhile. As a physician, I want to be sensitive and in tune with the complexities and nuances of life from the human side and not just the biological side. “ (University Dance Company)

But the arts did more for these learners than simply improve their own state of mind (as important as that might be). Learners reported attendance at events helped to enhance their empathy, their ability to understand patients, and their emotional connection to others:

- “...(B)eing a doctor is only a small part clinical acumen and significantly about relating to patients. Understanding the human condition and gaining insight into various perspectives on it brought to life through art... significantly enhances the ability of a doctor to relate and thus better achieve his ultimate goal of helping the patient. “ (UMMA)
- “One of the more striking parts of the book that I took away was the fact that often ‘words of comfort’ at the bedside can be the best thing a physician does... As future physicians, we should never lose sight of the humanism that forms the core of medicine.” (Cutting for Stone)
- “The part where we were asked to approach and engage a modern art piece that we didn’t like very much was particularly relevant to my work as physicians (and med students) are frequently asked to approach and engage patients that they don’t like.” (UMMA)

Learners’ comments were often metaphorically rich :

- “I think the experience of taking time out of the clinical routine for an event like this is energizing and consequently humanizing. The legato of an evening built around a plated dinner and symphony contrasts nicely with the staccato of most of my days at the hospital.” (Berlin Philharmonic)

- “There was a modern art piece that I disliked intensely until I read the story. Getting patients story is vital to good patient care. We are all our stories, our context, without it we are just a collection of bulbs and wire (the art piece), organs and tissue (the patient). Ask and care enough to listen and empathize.” (UMMA)



Learners at the University Dance Company performance

*“I am more aware of the different ways the human body can be used for expression. I think that being aware of body language and the ways in which it can express feelings and emotions is something that it extremely important for a physician to be aware of.”*

From a learner who attended the University Dance Company event.

- “The close cooperation between each player within the orchestra with the conductor coordinating the group mirrors the teamwork of the medical staff (nurses, PT, OT, lab technicians, radiologists, and specialists) with the conductor being the primary team. Even within that team, there is the head attending with the resident, interns and learners who coordinate the medical care.” (Berlin Philharmonic)
- “One of the pieces we saw was a statue of Vishnu, and we discussed how he often comes to earth when he has to respond to a challenge, but when he does so he assumes whatever form is most appropriate for the task at hand. This idea is helpful to me in trying to understand how physicians seemingly have to assume many forms in a clinical setting. There is a place for being empathetic, patient and reserved, as well as a place for being efficient, analytical and decisive. The idea of forms helps me reconcile these seemingly contradictory images into one care provider.” (UMMA)



Learners at the lecture by Associate Dean Steven Whiting prior to the Berlin Philharmonic performance.

*“(T)he event as a whole was wonderful. Of course, the concert itself was the highlight. However, having a great lecture beforehand really enhanced the experience. And doing it over dinner made the whole event an evening rather than ‘just a concert.’”*

From a learner who attended the Berlin Philharmonic performance

Students found that the complexities of art helped them grapple with the complexities that are an inherent part of human experience in general, and especially so in medicine:

- “Many times in music it is hard to discern different parts of the composition... Likewise, in a hospital many parts of the system can become indistinct (differing parties taking on the tasks of another) to achieve the goal of care for the patient. Also, at some points in the composition consonant and dissonant sounds were hard to distinguish. I didn’t know whether I was supposed to be happy or sad about the music. As in any situation involving emotions, there is a spectrum of possible reactions. I am sure in my career I will face situations in which I will have a confused reaction (especially with regard to palliative and hospice care).”
- Another noted that “the expressive quality of the music really touched me as a human being. The emotions that the Brahms brought out and the waffling between minor and major keys really aligned with my experiences as a medical student, one fascinated by the discipline of study but also occasionally groaning under the weight of the material.”
- Learners saw other ways in which the artistic experience could help them practice medicine. One said “Physicians have to be creative and inventive thinkers in many aspects of their work and I think it helped remind me to use these other parts of my brain when I am trying to solve a problem.” Another noted that “Understanding the human condition and gaining insight into various perspectives on it brought to life through art, I feel significantly enhances the ability of a doctor to relate and thus better achieve his ultimate goal of helping the patient.” (both UMMA)
- The process of listening to music is not dissimilar to listening to our patients. As one student observed, “One of Dr. Whiting’s themes was about listening carefully to discern the mood of the music. This often comes up in clinic, when an astute physician notices a disconnect between a



patient's literal words and the manner in which they say them (body language, tone, eye contact, etc.). Picking up on these non-verbal clues may allow a more thorough understanding of the patient's human condition." Another wrote, "I think the movement that Dr. Whiting talked most about in which he suggested that Brahms was contemplating his own death was particularly applicable to us as future physicians who often must talk to patients about their thoughts on death and dying. "

- The experience of having someone prepare students on how to approach a work of art had clear parallels with the overt structure of clinical care. One student said that "It highlights how much you don't see things unless you're looking for it, same way with patients you don't see risky behavior unless you screen for it, you don't see the dementia unless you ask the questions" (Berlin Philharmonic).
- Learners identified strongly with some of the major themes of the art they experienced. One *Uncle Vanya* attendee observed the title character's "alcoholism hearkened back to the issue of physician drug use." Another noted, "substance abuse continues to be an active concern in the medical field." They identified his substance abuse as a symptom of underlying mental health problems, and connected this theme to their own lives: "It was interesting to see the frustration of the physician in the play. His excessive use of alcohol, likely secondary to his frustrations... The importance of the balance and need for social support were take home messages for me." Learners reported that both *Uncle Vanya* and *Cutting for Stone* helped them draw the connection between their own lives and the need for work life balance: "Even though as a medical student... I probably don't work as hard as a typical intern, I still felt I could understand the doctor's complete exhaustion and lack of interest in anything in life due to his duties to care for the ill, comparing to the more difficult periods of medical school. This serves as a warning to structure our lives as physicians in such a manner that we realize our own humanity and never become irrevocably numb to existence." Another wrote: "I identified with the tension that exists between the ever present need for a doctor (in a way, always on call/on duty), and the need for a doctor to have a life himself."
- Many students also appreciated the opportunity to talk with alumni, faculty, and other colleagues at different stages in their careers at dinner. As one put it: "I really enjoyed the dinner and conversation with the various faculty members, residents, and students at my table... (and) getting a chance to meet people at different points in their medical career." Similarly, participants in the discussion of *Cutting for Stone* reported they "really enjoyed being able to discuss the book with people from different levels of medical training" and found it "a wonderful way to meet and connect with other students, HOs, and physicians in a non-hospital setting. "
- In response to the question "Would you be interested in attending more events?" the response was virtually unanimously "yes," or as one learner put it: "YES! I love this program. "



*“The director later actually took my friend and me on a tour of the backstage; we also met some of the actors. It was awesome!”*

Learner who attended Medical Arts event number 5, *Uncle Vanya*.

Figure 2 aggregates responses from the six events for which attendees were surveyed and summarizes their generally positive responses. In response to the question “To what extent do you think the experience will make you a better physician?” no learners reported 0 (Not at all”) on the Likert scale, and over two-thirds of learners reported a Likert score of 4 or 5, the highest scores.

**Figure 2: To what extent do you think the experience will make you a better physician?**



## Support

In its first year, the Medical Arts Program was funded through discretionary funds from three faculty members: Dr. Sanjay Saint, Dr. Joel Howell, and Dr. James Stanley and with funds from the Program in Society and Medicine. The Program in collaboration with the University Musical Society has recently received a grant from the Creative Campus grant initiative, a project of the Association of Performing Arts Presenters (APAP) with funding from the Doris Duke Charitable Foundation. We were delighted to learn recently that we were awarded this grant. We were delighted to receive this highly competitive grant.

## Program goals

Next year we plan to continue to offer medical students and house officers an opportunity to learn from the arts. We were gratified by the outpouring of support from internationally prominent artists who see great value in interacting with medical learners. Selection of events is currently underway with our partners at the University Musical Society. We will continue to document the effects of the program on medical students and house officers, and are currently designing a methodology to evaluate those effects.

## For further information contact:

Joel Howell, MD, PhD  
Victor Vaughan Professor of the History of Medicine  
Professor, Departments of Internal Medicine, History, and Health Management and Policy  
Associate Chair, Professor, Department of History

300 North Ingalls Building  
Room 7C27  
Ann Arbor, MI 48109-5429  
[jhowell@med.umich.edu](mailto:jhowell@med.umich.edu)  
(734) 936 9832

## Appendix 1: Objects viewed at UMMA

October 2009

- Guercino, "Esther before Ahasuerus," 1639, oil on canvas
- Joseph Wright of Derby, "The Dead Soldier," 1789, oil on canvas
- Artist Unknown, Ethiopian, "Healing Scroll," 1800-1899, parchment, pigment, leather
- Artist Unknown, Yombe Peoples, "Power Figure," 1850-1899, wood, mirror, glass, hide
- Artists Unknown, "Thai Buddhist Altar," 19th-20th century, gilt bronze, glass inlay, porcelain, wood, mirrors
- Joan Mitchell, "White Territory," 1970-71, oil on canvas

May 2010

- Claude Monet, "The Break-up of the Ice," 1880, oil on canvas

- William-Adolphe Bouguereau, "Charity," ca. 1870, oil on canvas
- Matsumura Goshun, "The Road to Shu," late 18th - early 19th century, ink and color on silk
- Joan Mitchell, "White Territory," 1970-71, oil on canvas
- Felix Gonzalez-Torres, "'Untitled'(March 5th) #2, 1991, 40 watt light bulbs, extension cords, porcelain light sockets

#### **Appendix 2: Berlin Philharmonic Program**

- Brahms: Symphony No. 3 in F Major, Op. 90 (1883)
- Schoenberg: Begleitmusik zu einer Lichtspielszene, Op. 34 (1929-30)
- Brahms: Symphony No. 4 in e minor, Op. 98 (1884-5)