

The Art of Medicine Series

“Lessons Learnt-The Medical Experience”

Professor Ong Yong Yau

Emeritus Consultant

Dept of Internal Medicine, SGH

Senior Advisor, SingHealth

Clinical Professor of Medicine, NUS

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Lessons Learnt–The Medical Experience

- ❖ Osler was an orator besides being a physician, educator, philosopher and historian. He gave many lectures and made many writing.
- ❖ His teachings has been conveyed to his students and the related professions.
- ❖ The importance in restoring art to today's scientific physician.

Lessons Learnt–The Medical Experience

- ❖ **A long journey with many challenges and experiences**
- ❖ **It has been a rewarding career and have fulfilment in what I do**
- ❖ **Wanting to help the sick.**

Lessons Learnt—The Medical Experience

- ❖ Osler's attributes and values would be most valuable counsel for students, young medical practitioners and nurses
- ❖ Part of the ethos of medicine for us
- ❖ For many medical practice starts as a “calling”.

Lessons Learnt—The Medical Experience

- ❖ Like great institutions individual health professionals need a vision one centred on patient-care
- ❖ To prevent ourselves from being distracted and influenced by the many market forces.

Lessons Learnt—The Medical Experience

- ❖ **Osler was born into a family where his father was a Church of England priest**
- ❖ **Osler himself was an agnostic**
- ❖ **Strict upbringing**
- ❖ **Passion and energy was seen in all his endeavours**
- ❖ **Need to practice with a sense of religious fervour (warm and strong feeling) to preserve excellence.**

Lessons Learnt—The Medical Experience

❖ Relationships

- Includes not only doctors but also our nursing and allied health colleagues
- Doctor-patient relationship was in Osler's view very important.

Lessons Learnt—The Medical Experience

❖ Relationships

- Successful relationships – trust and respect for patient's views, privacy and dignity
- Act as patient's agent within the healthcare scene
- Obtain the best treatment necessary whether the patient is subsidised or private.

Lessons Learnt—The Medical Experience

❖ Oslerian View

- A need to promote humanistic attitudes at every level
- Demonstrate stewardship of finite healthcare resources in this era of cost concerns.

Lessons Learnt—The Medical Experience

- ❖ **Doctor-management relationship is not stressed much in Osler's writing**
- ❖ **Need for healthcare providers and doctors to work together**
- ❖ **Collaboration should be the doctor's corporate responsibility**
- ❖ **Healthcare providers must be careful not to bind the hands of the doctor so that he is unable to give the effective treatment to his patient.**

Lessons Learnt–The Medical Experience

❖ With Peers

- Osler treated his colleagues fairly and respected their contributions
- Willing to consult colleagues when faced with difficult clinical problems
- When care is to be transferred to another colleague he must be given enough information
- Need to be capable of self-regulating ourselves.

Lessons Learnt—The Medical Experience

❖ Knowledge and Skills

- Osler was a fine student, a clinician par excellence
- Importance of bedside clinical teaching for the undergraduate, formalized programs for postgraduate education
- Clinical practice should be exercised with ‘the heart and mind’.

Lessons Learnt–The Medical Experience

❖ Knowledge and Skills

- Established a brand called Oslerian medicine and became a gold standard at John Hopkins**
- Expounded in his famous textbook and other extensive writings**
- Clinical description of disorders and diagnosis by careful physical examination corroborated by autopsy**
- Integrated students into patient care on the ward.**

Lessons Learnt—The Medical Experience

- ❖ **Oslerian medicine still fundamental and indispensable today but alone is clearly not sufficient**
- ❖ **New information that is important to adequate diagnostic evaluation, effective treatment and health maintenance of the individual.**

Lessons Learnt—The Medical Experience

- ❖ We should know as much as possible about our own specialty and area of work as surface knowledge will not be good enough
- ❖ A comprehensive knowledge gives one to not just perform but also perform at the peak
- ❖ Knowledge is power.

Lessons Learnt—The Medical Experience

- ❖ **Competitive advantage you would have over your peers**
- ❖ **Being an expert we are expected to draw on a wide breath of knowledge**
- ❖ **Keep our knowledge and skills up to-date.**

Lessons Learnt—The Medical Experience

- ❖ Take part regularly in educational activities
- ❖ Develop competence and performance
- ❖ All this for our patients.

Lessons Learnt—The Medical Experience

- ❖ **Osler was highly skilled as a Montreal General Hospital pathologist (1876)**
- ❖ **Was also a Montreal Veterinary College physiologist (1876)**
- ❖ **Worked hard to promote scientific medicine and the art of medicine. Both were needed not just one or the other**
- ❖ **This is what our medical schools are striving to do.**

Lessons Learnt–The Medical Experience

❖ Teaching

- This is an important area
- Know how to do this well and become an inspirational teacher like Osler
- The teaching and practice of clinical medicine as an integral function of a University.

Lessons Learnt–The Medical Experience

- ❖ **Medical Education should be patient based**
 - Osler liked to say “ *he who studies medicine without books sails an uncharted sea, but he who studies medicine without patients does not go to sea at all* ”.

Lessons Learnt–The Medical Experience

- ❖ I first saw a young mother of two who was a Subutex abuser. With fever and bacteraemia and she was diagnosed as infective endocarditis.
- ❖ Many organism were grown on blood cultures including staphylococcus aureus. She developed pulmonary embolism and pneumatoceles. Difficulty controlling the infection.
- ❖ She had bouts of haemoptysis as a result of her pulmonary embolism
- ❖ ?ICU care if her condition worsened. Had a background of drug abuse.

Lessons Learnt—The Medical Experience

- ❖ The important points learnt from this case. Infective endocarditis was the subject first referred to by Osler in 1885. He was a superb diagnostic clinician
- ❖ Osler nodes described in 1908.

Lessons Learnt—The Medical Experience

- ❖ Refer to others for an opinion or help as needed
- ❖ To practice ethically and do patients no harm
- ❖ Hold up the principle of beneficence and relate it to treatment decision making
- ❖ This is referred to as practice ethics.

Lessons Learnt—The Medical Experience

- ❖ How would Osler have looked on my case?
- ❖ He was an ethical man. And may have admonished me or cautioned and reminded me with these words of his “to be careful the influence of the strong upon the weak of the righteous upon the wicked, of the wise upon the foolish”.
- ❖ He treated all patients equally.

Lessons Learnt–The Medical Experience

- ❖ **I had a patient of Indian origin who was known to have typhoid**
- ❖ **Presented to our wards with unremitting fever and again had typhoid**
- ❖ **Had abdominal discomfort and had a CT scan done**
- ❖ **Showed thickening of terminal ileum and inflammation in caecal area.**

Lessons Learnt–The Medical Experience

- ❖ **Introduced to this term typhlitis**
- ❖ **This condition typhlitis was described by Osler**
- ❖ **More recent encounter was with a patient who was immunocompromised and had recent chemotherapy for an abdominal malignancy**
- ❖ **Had intestinal obstruction and suspected to have typhlitis**
- ❖ **I learnt from this case that typhlitis could result from chemotherapy.**

Lessons Learnt—The Medical Experience

❖ Research

- Osler did research on cardiac disease, lung and much veterinary work**
- Had 1,500 scientific publications detailing his research**
- Received a special prize for his MD thesis**
- His textbook remained the authoritative medical textbook for over 30 years**
- His work in this area led to the creation of the Rockefeller Institute.**

Lessons Learnt—The Medical Experience

- ❖ **The importance of academic and scientific progress from research must be emphasized**
- ❖ **In the Straits Times article of 3rd Nov 2007 Dr Tay Chong Hai talks about the Tay's Syndrome he first described**
- ❖ **Congenital disease with brittle hair, skin problems and mental retardation**
- ❖ **More cases surfaced subsequently.**

Lessons Learnt—The Medical Experience

- ❖ **In 1971 he suspected that a patient had metal poisoning through his careful research, clinical observation and tests that this was arsenical poisoning**
- ❖ **“Sin Lak” connection with asthma**
- ❖ **His clinical discoveries came through painstaking clinical observation and follow up.**

Lessons Learnt—The Medical Experience

❖ Reflection

- Reflection is important
- Need to reflect meaningfully upon our practice
- Seeing things from a different perspective
- Call on others to evaluate us as appropriate.

Lessons Learnt—The Medical Experience

❖ Reflection

- Feedback was important even with Osler
- If we under-perform then it is better identified and corrected
- We need to admit mistakes
- Osler move to Oxford for a ‘period of repose’
- When I reflect on our sick colleagues how fortunate we are able to work
- Important to live worthily.

Lessons Learnt—The Medical Experience

❖ Thinking Out of the Box

- Essential to see the broader picture. Be careful not to be railroaded into a particular line of thinking**
- Think beyond the clinic walls**
- Social and psychological factors affecting our patients especially those who are disadvantaged and from lower economic group**
- Manage our patients holistically**
- Osler never failed to teach and promote compassionate care.**

Lessons Learnt—The Medical Experience

❖ Communication

- Increasingly important
- The cornerstone of a good doctor-patient relationship
- The first educator to bring medical students into the hospital environment for hands-on approach to medical training.

Lessons Learnt—The Medical Experience

❖ Communication

- Insisted on his students learning from seeing and talking to patients
- A disgruntled patient voiced loudly in my hearing, doctors nowadays don't listen to their patients.

Lessons Learnt–The Medical Experience

❖ Another area of Communication

- We can do better is when discussing options for management**
- Patients of today are much better informed with the growth of information technology and the expansion of the Internet**
- Patient and relatives now want to actively participate. May question the doctor's decision.**

Lessons Learnt—The Medical Experience

❖ Another area of Communication

- Evidence based medicine could give an added advantage**
- Reaching a decision on a course of action e.g. treatment etc. their cost effectiveness and also on how to handle expensive imaging technologies**
- Good study statistics and even local data will be needed.**

Lessons Learnt—The Medical Experience

- ❖ **The superficiality of interaction**
- ❖ **My physician's failure to study the literature on the diagnosis and management of disorders of weight-bearing shoulders delayed effective treatment**
- ❖ **If he had simply sat down, looked me in the eyes, and talked to me, he would have gained information.**

Lessons Learnt–The Medical Experience

❖ Working in teams

- Most of us today practise in some kind of a team
- Osler conducted his rounds with a retinue of consultants and nurses
- Must be well led and managed, act sensitively and positively when there are problems.

Lessons Learnt—The Medical Experience

❖ Working in teams

- Teams must be able to work across the board and synergy becomes important
- Forge a shared identity and image
- A proper partnership between the various players, not only doctors can maximise the contribution that each could make
- Respecting the autonomy of each group.

Lessons Learnt—The Medical Experience

❖ **Honesty and Integrity**

- While this is important in the corporate world it is also important for healthcare personnel to demonstrate this trait
- In dealing with a clinical problem that requires for example an intervention. Can we allow the patient's status or station in life to so influence our thinking?
- Documentations to be made e.g. in the case notes, audits, mortality rounds, etc. are we accurate in writing down?

Lessons Learnt–The Medical Experience

❖ **Honesty and Integrity**

- **When buying goods or services one must declare any relevant financial or commercial interest**
- **Honesty in financial and commercial matters (not a trade)**
- **Must not accept any inducement, gift or hospitality that may seem to affect one's judgement e.g. prescribing and formulary choices**
- **Prescribed expensive drugs when cheaper ones would serve the purpose**
- **Using unproven methods of treatment.**

Lessons Learnt—The Medical Experience

- ❖ **Patients need to be honestly informed before they consent to treatment or surgery**
- ❖ **Those who take part in the clinical trials have to be appropriately informed**
- ❖ **Confidentiality is of paramount importance when applied to disclosure of patient information.**

Lessons Learnt—The Medical Experience

- ❖ **Electronic age of medical information-sharing**
- ❖ **Information goes only to those who have absolute need and right**
- ❖ **Breakdown of such practices have disastrous consequences**
- ❖ **No amount of governance and control can replace an individual's integrity.**

Lessons Learnt—The Medical Experience

- ❖ **The culture needed for traditional values**
 - As practising individuals or collectively we must adopt these qualities
 - Make this for all who have responsibility for patient care
 - Virtues translated for the good of patients and to demonstrate that we are doing this and taking responsibility for such development
 - Inculcate into all our younger health professionals
 - Especially those trained from different educational background.

Lessons Learnt—The Medical Experience

❖ Barriers

- A dichotomy between political thinking and clinical priorities, some of which may lead to resources being redirected
- We need to defend our position if need be.

Lessons Learnt—The Medical Experience

- ❖ **In the University of Texas there are Osler student societies that feature discussions, learning projects and social interaction as well as community work. In this way they train future physicians who will develop more empathy.**

Lessons Learnt—The Medical Experience

- ❖ Time and a packed curriculum could be a barrier to our objectives
- ❖ Creative ways need to be found to work all this into our daily routine.

Lessons Learnt–The Medical Experience

- ❖ **Osler was successful with bringing clinical medicine to the ward floor we could do likewise to practice Oslerian Medicine and its traditions at this level**
- ❖ **We have our own Professors Ransom GA; Seah C.S.; Khoo O.T.; Gwee A.L., Cohen Y.; Yeoh G.S. and others**
- ❖ **They were known for their high touch rather than high-tech medicine – Tay C.H.**

Lessons Learnt—The Medical Experience

- ❖ **More role models and mentors are going to be needed if we are going to imbue in our young professionals the traditional norms of practice**
- ❖ **Mentors will need to not only supervise but see the younger ones assimilate these values**
- ❖ **How they respond and perform at the ward level.**

Lessons Learnt—The Medical Experience

- ❖ **Like the RACP we could have excellence in Mentoring Awards**
- ❖ **Trainees and seniors could nominate peers**
- ❖ **Each award could consist of full congress registration and accommodation and presentation of plaque at the Congress Dinner**
- ❖ **This could be worked out at the Institutional level .**

Lessons Learnt–The Medical Experience

- ❖ I have great confidence in our young doctors and professionals as I see them perform at unit meetings, society meetings, etc.
- ❖ Here are 3 young health professionals and see what they have to say.

Lessons Learnt–The Medical Experience

“Despite what others say about my job being unattractive because of its irregular hours and limited options for private practice, I’m proud that I’ve chosen to be an Emergency Physician. I have the constant privilege, opportunity and challenge to manage the most acutely sick and ill patients literally at the throes of life and death.”

- *Dr Goh Pak Liang*

Lessons Learnt–The Medical Experience

“It is most gratifying when I see my patients get well. I enjoy my work, and engage actively in research to stimulate my intellectual curiosity and to improve clinical care and outcome.”

- *Dr Ang Tiing Leong*

Lessons Learnt–The Medical Experience

“I love nursing. I find it challenging because we have opportunities to meet all kinds of people and nursing actually moulds us into better individuals. In life, all of us have got to do something meaningful and that really depends on where your passion lies. My passion is to care for patients and satisfaction is derived from caring for them.”

- *SNC Elaine Ng*

The President's Nurse

Lessons Learnt–The Medical Experience

❖ Quality Improvements

- Such projects have gained importance
- Need to be committed to continuing improvements in the quality of care e.g. measures for increased patient safety and good outcome
- A key element of the Oslerian strategy was commitment to the development and enhancement of continuous professional development.

Lessons Learnt–The Medical Experience

❖ Demeanor

- Medical professionals must carry on their work in an appropriate manner and not appear rude or arrogant
- A well dressed doctor evokes a patient's trust.

Lessons Learnt–The Medical Experience

❖ Humanity

- As a healthcare professional we need to demonstrate these attributes and values since patients, society and the profession deserve nothing less
- Osler was humble but was an idealist
- Willing to work unceasingly
- He advocated collegiality.

Lessons Learnt–The Medical Experience

❖ Humanity

1. He firmly believed that medicine was a progressive science and his enthusiasm for learning influenced his students and peers to strive for excellence
2. Doing the day's work well and not bothering about tomorrow.

Lessons Learnt–The Medical Experience

❖ Humanity

3. Always being courteous and considerate to professional colleagues and to patients
4. Cultivating a feeling of equanimity (calmness of mind)
5. The future of a university or hospital “lies in the men who work in its halls and in the ideals which they cherish and teach”.

Lessons Learnt–The Medical Experience

☞ List of Values, Qualities, Attributes

- ❖ **Calling**
- ❖ **Vision**
- ❖ **Patient Care**
- ❖ **Passion**
- ❖ **Relationships**
- ❖ **Humanistic**
- ❖ **Stewardship**
- ❖ **Consultation**
- ❖ **Self-regulating**
- ❖ **Knowledge**
- ❖ **Skills**
- ❖ **Teaching**
- ❖ **Ethically**
- ❖ **Reflection**
- ❖ **Equally**
- ❖ **Thinking out of the box**
- ❖ **Communication**
- ❖ **Partnership**
- ❖ **Honesty**
- ❖ **Integrity**
- ❖ **Collegiality**
- ❖ **Mentoring**
- ❖ **Quality**
- ❖ **Demeanour**
- ❖ **Enthusiasm**

Lessons Learnt—The Medical Experience

❖ Conclusion

- While disease frequency, severity and treatment options are quite different from Osler's time
- Our modern life is more complex
- Expectations for healthcare make the consequences of disease even more dramatic today
- Osler values are just as applicable as 100 years ago.

Lessons Learnt–The Medical Experience

- ❖ Does our daily routine leave us unmotivated, unexcited?
- ❖ In Oslerian Medicine we are marching along as privates in an unending procession behind great leaders.

Lessons Learnt–The Medical Experience

- ❖ Each healthcare professional has the potential to be a role model for others in a broader inter-professional healthcare team
- ❖ “People will only follow if they see virtue in your cause and have confidence in you as a person” (*R. Larkins*).

Lessons Learnt—The Medical Experience

- ❖ Ours is a sacred calling. We are reminded they that are whole need no physician but them that are sick. There should be no turning back. Where is your heart?
- ❖ Through you students and your disciples will come your greatest honor – *Sir William Osler (1849 –1919)*.

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The background features a textured, light beige surface with faint, stylized mountain ranges in the distance. On the right side, there are dark, thin branches of a willow tree with small, dark buds or leaves. The overall aesthetic is soft and natural.

Thank You