We live in a truly wondrous age of medicine
‘Open cholecystectomy’

The way I was trained in the 60s
The scar, 1965
LBJ’s scar
1965
Letter to NY Times:
“God forbid he should have a hemorrhoidectomy!”
We’ve come a long way...
Minimally invasive surgery

Laparoscopic cholecystectomy
‘Lap chole’
From the outside
What’s going on inside
Robotic surgery

NOT like Isaac Asimov’s ‘I, Robot’

...yet
The *da Vinci S™* will keep you at the forefront of minimally invasive surgery as it accommodates tomorrow's HD video technology, high-speed networking and image guidance systems.
What you see

What it does
Episode #310
July 3, 2002
Dr. Jacques Marescaux, in New York, removed a gall bladder of a patient, who was in Strasbourg, France.
The art of medicine consists of amusing the patient while nature cures the disease

Voltaire
Update for today!

Technology exists to amuse the doctors ...while nature cures the disease
BTW, the initial cost of the da Vinci robot was $1,000,000
Will our society follow the Franklin-Allen School of medico-economics?
God heals and the doctor takes the fee

Benjamin Franklin
Death is a great way to cut down on expenses.

Woody Allen
But, that’s not all...
Remote presence robot
The ‘doctor’
What is happening to the doctor-patient relationship?
And, do you like it?
We live in a truly wondrous age of medicine
We live in a truly wondrous age of medicine

Or do we?
“Aspirational Heroism”

Science and Technology should defeat disease and death

Ronald Preston
No one dies of natural causes anymore

Resident on “St. Elsewhere”
1983
When dollars and skill are both unlimited, death can nearly always be postponed for a while.

Sir Macfarlane Barnet 1978
AND TO WHAT DO YOU ATTRIBUTE YOUR REMARKABLE LONG LIFE OF A HUNDRED AND TWENTY ONE YEARS, MR. THILBY?
From Faust to Star Wars: Technology is not going to save us. Our computers, our machines are not enough. We have to rely on our intuition, our true being.

Joseph Campbell
CNN Newsflash
Feb 9, 2006

The overall number of cancer deaths in the United States decreased for the first time!!!!!!!
Physician-Assisted Living

Joseph A. Califano Jr.

America 1998; 170:10-12
But all the medical miracles of this century notwithstanding, the death rate remains the same: one per person.
There comes a time in the affairs of men when you must grab the bull by the tail and face the situation

W. C. Fields
We are having problems facing both life and death
The secret cause of all suffering is mortality itself, which is the prime condition of life. It cannot be denied, if life is to be affirmed

Joseph Campbell
Let’s go beyond technology, back to the fundamental principles of medicine
Edwin Smith Papyrus

- Scribe-copied around 1600 BCE
- Original probably from 3000 BCE
- Author = Imhotep?
  - Pyramid builder
  - Priest
  - Physician
Verdicts

- An ailment which
  I will treat
- An ailment with which
  I will contend
- An ailment not to be treated
Societal Goals and Principles of Medicine

Ernlé Young
1979
<table>
<thead>
<tr>
<th>Young’s teachings:</th>
<th>Societal Goals</th>
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<tbody>
<tr>
<td>Principles of medicine</td>
<td>Sanctity of life</td>
</tr>
<tr>
<td>Preservation of life</td>
<td>Quality of life</td>
</tr>
<tr>
<td>Alleviation of suffering</td>
<td></td>
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</table>
Principles of Medicine

Ordinarily, they are compatible and are sought together. They may, however, become incompatible in which case one or the other must predominate.
IN THE BEGINNING

α
(BIRTH)

Ο
(DEATH)

GOAL

PRESERVATION OF LIFE

>

VALUÉ

SANCTITY OF LIFE

>

ALLEVIATION OF SUFFERING

QUALITY OF LIFE
AT THE END

\[ \alpha \]
(BIRTH)

GOAL

ALLEVIGATION OF SUFFERING

QUALITY OF LIFE

\[ \bigcap \]
(DEATH)

VALUE

PRESEVATION OF LIFE

SANCTITY OF LIFE
= POINT BEYOND WHICH LIFE CANNOT BE EXTENDED WITH

- VALUE
- DIGNITY
- MEANING

DYING CAN ONLY BE PROLONGED

INCLUDES OBJECTIVE MEDICAL DATA AND SUBJECTIVE DEFINITION OF "QUALITY"
Only two problems

- Objective medical data are not accurate
- Subjective definition of “quality” not available
VALUES ASSOCIATED WITH PRINCIPLES
SANCTITY OF LIFE WITH PRESERVATION OF LIFE
QUALITY OF LIFE WITH ALLEVIATION OF SUFFERING
While we may consider the distinction between life and death as white and black, the transition from living to dying may be from a lighter to a slightly darker shade of grey.
Therefore, we must simultaneously:

- Pursue care
  - Sanctity of life
  - Patient and family wishes
- Focus on caring
  - Quality of life
  - Alleviation of suffering

Look for signs along the way
We have, on occasion, been so concerned with the ‘right of all men to live’ that we are in danger of forgetting that it is appointed, for all men, once to die.

John J. Farrell, 1957
Before South Carolina ACS Meeting
VIEWING DEATH AS UNNATURAL CAUSES US TO CONFUSE OUR INABILITY TO CURE WITH FAILURE

Bulkin and Lukashok

NEJM 1988
“When was the time right for transforming the failure to cure into a successful departure from life?”

Louis Dionne
Director, La Maison Michel Sarrazin
CHANGE:

NOTHING TO BE GAINED FROM FIGHTING AN INCURABLE DISEASE

TO:

EVERYTHING TO BE GAINED FROM FIGHTING FOR THE QUALITY OF LIFE

DIONNE, 1988
Joseph Califano: Physician-assisted living declares that all human beings have the right to die in all the dignity with which God endowed them...
that every physician has the obligation to understand and invoke the power of modern medicine to ease the pain and anxiety of the terminally ill and that all patients are entitled to choose to live till they die.
<table>
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EUPHEMISM                              REALITY
AUNT EMMA PASSED AWAY...........DIED
THE PATIENT HAS EXPIRED............DIED
HE MET HIS DEMISE..........................DIED
GRANDMA IS WITH THE ANGELS....DIED
(OR WAS TRADED...)
WHAT WOULD YOU LIKE IT TO SAY ON YOUR HEADSTONE?

"HE'S NOT HERE YET."
"SORRY I'M LATE, BUT THEY HAD ME ON A LIFE-SUPPORT SYSTEM FOR TWO MONTHS."
“My brain is dead but they have the rest of my body on a life-support system!”
A dying man needs death like a tired man

needs sleep

Stuart Alsop
It hath been said that it is not death but dying, which is terrible

Amelia;
Book 3, Chapter 4
Henry Fielding
“With what strife and pain we come into this world we know not. But it is commonly no easy matter to get out of it.”

Sir Thomas Browne
What is “a good death?”

- Developed by patient
- Focused on patient’s needs
- Positive attitude of caregivers
- Time for leave taking and bereavement
- As free from pain/sx as possible
- As brief as consistent with irreversibility
Unexpected death!
Very difficult to grasp if you are in your 20s [or even 80s]
It’s just not right that a child dies before the parent...
From the moment of birth, you are old enough to die

The Talmud
List two things the following have in common [beside being female]? 

- Terri Schiavo
- Nancy Cruzan
- Karen Anne Quinlan
1. They were all in their 20s when they became unable to speak for themselves.
2. Their cases all ended up in the courts [and media]
Too often, today, we face a conflict between two concepts: 
a good death and futile care.
Usually because neither the family or the health care team know the patient’s values or what constitutes dignity and meaning, to use Ernlé Young’s terms.
Futile

Futilis - that easily pours out; worthless

serving no useful purpose
Life: not just yes or no

100

0
How do people define “0”?

- Death
  - Putrefaction
  - Absence of vital signs
  - Brain dead
- Vegetative state
- Absence of “personhood”
Life: a quantitative variable?

- "Normal"
- Chronic disease
- Severe stroke
Futility = gap

- Highest level achievable by medical care
- Lowest quality acceptable to patient
QOL Limbo???

“How low would you go?”
Today....
For most of us [unfortunately], the change is not that obvious.
Would you go lower?

Yes!!!
Would you go lower?

NO!!!
Boiling frog fable?
If you throw a frog into a pot of boiling water, he’ll jump out.
BUT...
... if you place a frog into a pot of lukewarm water and slowly turn up the heat, it will boil to death.
EXPLANATION:
If a frog is put in a container and the temperature gradually raised to boiling point, the frog will die, as temperature change is too slow for the frog to detect it.
I am not making this up.

Dave Barry

http://www.fastcompany.com/magazine/01
In case you haven't heard it (and who hasn't?) the frog story ranks number one on the change hit parade. Manfred Kets de Vries published the fable in his recent book, ‘Life and Death in the Executive Fast Lane.’
His conclusion: “Unfortunately, many organizations, as they grow, begin to resemble the boiled frog.”
According to Dr. George R. Zug, of the National Museum of Natural History,

“Well that's, may I say, bullsh**. If a frog had a means of getting out, it certainly would get out.”
"If you put a frog in boiling water, it won't jump out. It will die. If you put it in cold water, it will jump before it gets hot -- they don't sit still for you."
Where do all the frogs and commentators leave us?

Gradual change may be difficult to perceive. What you think unacceptable now may not be unacceptable later.
How will you make your wishes known?

P. S. That question assumes that you know your own wishes...
YOU NEED AN ADVANCE DIRECTIVE AND A HEALTH CARE AGENT
Remember, if you don’t speak for yourself, the others who speak for you may NOT say what you want.
Do not go gently into that good night,
Old age should burn and rage at close of day;
Rage, rage against the dying of the light.

Dylan Thomas
...caregivers should be prepared and anticipate the pervasive, powerful and genuine desire not to be dead, a desire that, while imprudent to caregivers, should be acknowledged and not discounted or belittled.

Finucane
J Am Geriatr Soc 2002: 50; 551-553
Old Mississippi doctor’s saying:
When the good Lord puts His hands on,
I take mine off
For those of you interested in medicine as a career, go for it!
For those of you interested in medicine as a career, go for it!

But, follow it...

“BACK TO THE FUTURE”
Don’t take life too seriously… you’ll never get out of it alive

Elbert Hubbard
“If during a decade a man does not change his mind on some things and develop new points of view, it is a pretty good sign that his mind his putrefied and that he need no longer be counted among the living.”

J. Frank Dobie
END