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Editor's Column: Remarkable Conversations

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Editor's Column

Remarkable Conversations

Jeffrey R. Sarnoff, M.D.

Over the past year or so, several of us who are intimately involved in the editing and production of this journal have been personally challenged by the emergence of serious illness in either ourselves or our immediate families. In each instance, the psychiatrist so affected has maintained the degree of equilibrium necessary to permit continuing, effective participation in this enterprise. Given this, the question emerges: Why do we do the work that has led us from a journal with a press run of four hundred copies in 1983, to a journal with a national circulation of seven thousand copies in 1986, in the face of what sometimes seem to be tremendous hurdles?

The answers to this question, if knowable, may be similar to the answers to a greater question, that is, why do we work as physicians, as psychiatrists, as scientists? Certain paradoxes inevitably emerge. As Samuel Johnson observed, "Medicine is the only profession that works incessantly to destroy the reason for its own existence." In this work, we seek to apply the scientific method toward the alleviation of human suffering. As we do so, we often elucidate more questions than answers. We tend to promise ourselves that if we study diligently, we will find the answers, and that nature is understandable, in time. We look at the causes and effects of disease, but when the disease hits close to home, the focus shifts. As scientists, we tend to seek comfort through understanding. We fall back on our books, our training, our colleagues, families, and friends. We also look to our patients, for we learn from them, with them. When severe illness recently affected our son of twelve weeks, my wife, also a psychiatric resident, and I began to have a series of remarkable conversations, both amongst ourselves and the people around us. We sought first to know why the illness occurred, and why to our family. A supervisor who knows me well invited me into his office to talk. We had worked together for a year, and had spoken about outpatient psychotherapy, science, philosophy, and religion, as well as poetry, language, and our mutual experiences of having lived in foreign countries for extended periods of time. He asked me if I believed in God, and I told him that I probably did not, although I wished I could, for I thought that such a belief might be comforting in a time of emotional pain. We had in common this way of thinking, along with a sense of shame over our envy of those who could avail themselves of some kind of religious comfort. As I related my helpless feeling in the face of this illness, and my search for an understanding of it, my professor

spoke of his doubt that all things are understandable. "Scientists tend to convince themselves that universal understanding will come in time, always looking for the next tomorrow," he said. We talked about the altered perception of time in the face of illness, and I left comforted, although I knew not why.

Later, I met with another supervisor for the first time, a man who has practiced psychoanalysis for decades. We talked of my son, of our travels, of our lives, and of our common interest in the history of art. "I love to visit cathedrals," he said, "They have to do with time and with trust. Most take two hundred years to build, and when a man begins to work on one, he can be reasonably certain that he will work his whole life and never see it finished. He must trust that the work will be done." Here were recurring themes: time, faith, trust, and a proclivity to work at a discipline that might improve the human condition, but not by yielding definitive answers in one's own lifetime.

I spoke with many people about giving up my work with this journal, to devote more time and energy to my wife and son. My colleagues suggested that I try to continue, but my sister's words stay with me: "You've put a lot into this; giving up the journal might seem like yet another loss." Her words rang true, and my wife agreed to support me in this endeavor. Further inspiration to continue came from the physicians taking care of our son in a nearby university health center. They were practicing consummate medicine with compassion and good cheer. No, they didn't have certain crucial answers, but they were doing a lot of good while looking. Much was left to be learned, we knew. My son was the youngest person known to have his illness or the particular treatment, and, as his doctor said, "He'll be writing the book on this one."

Writing books, editing journals, we seek to build our own cathedrals. This journal, like my son, is but an infant for now. Questions need be answered, problems need be solved. We devote our energy toward this goal, with the wish that doing so will contribute to our knowledge, our spirit, and our hope.