A Doctor Explains the Healing Power of Poetry

Poetry could strengthen the connection between patients and their doctors

By Amy Dockser-Marcus • April 11, 2017 7:00 a.m. ET

Dr. Rafael Campo, a physician and poet, examines a patient.

Rafael Campo wasn’t always certain he would become a doctor. He started his studies inspired by the ideals of empathy and altruism. But medical school, he says, focused almost exclusively on science and biology. Seeking inspiration, he took a year off and got a master’s degree in poetry. Dr. Campo, 52, graduated from Harvard Medical School then published his first book of poems in 1994. Five more, plus two collections of essays, would follow. His latest book of poems, Comfort Measures Only, comes out next year from Duke University Press.
In May, Dr. Campo, now an associate professor of medicine at Harvard Medical School and Beth Israel Deaconess Medical Center in Boston, is helping bring to Harvard the Hippocrates Symposium on Poetry and Medicine, an annual conference that explores poetry and medicine. His own journey, he says, has made him realize “there is a deep and profound connection between these two ways of knowing about illness.”

Here are edited excerpts from a conversation with Dr. Campo, whose medical practice has focused on treating patients with chronic diseases like HIV/AIDS, asthma, heart disease, and cancer.

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**WSJ:** Why do doctors need poetry?

**Dr. Campo:** I think doctors need poetry because we are in a particular moment in medicine where technology and the scientific approach to disease is really ascendant. In the midst of that, patients and their stories can be lost. Poetry is one way doctors can connect more empathetically with our patients and become much more attuned to their particular voices.

**WSJ:** A number of your books have titles taken from the medical lexicon: *Alternative Medicine* is the name of one collection. What does poetry about the experiences of medicine have in common with your daily life as a clinician?

**Dr. Campo:** I find that every clinical encounter I have with a patient is really like a poem, in that in order for me to understand the way my patients describe their symptoms, I have to be attentive to issues of language, such as metaphor. Listening to their hearts and breathing through my
stethoscope is much like hearing the rhythms expressed in poetry. Poetry is the most embodied and visceral expressive form in literature.

WSJ: How do you navigate the need to maintain patient confidentiality and the desire to say something universal?

Dr. Campo: While I must always protect their privacy, I recognize my duty to make heard their courage and dignity in the face of suffering. I think because the experience of illness can be so isolating and certain patients can feel silenced by it, it’s all the more important to help these stories to be told....

In the HIV epidemic people who felt marginalized, who felt silenced, took to the streets and advocated and made their experience heard. That actually resulted in life-saving treatments being developed, by calling attention, by getting politicians to pay attention, getting other leaders in our society, faith leaders and educational institutions, research institutions, to listen... Sometimes, telling stories leads to very practical advances. It’s not just stories for the sake of stories, but also the way they can change how we think about disease.
MORBIDITY AND MORTALITY ROUNDS

Forgive me, body before me, for this.
Forgive me for my bumbling hands, unschooled
in how to touch: I meant to understand
what fever was, not love. Forgive me for
my stare, but when I look at you, I see
myself laid bare. Forgive me, body, for
what seems like calculation when I take
a breath before I cut you with my knife,
because the cancer has to be removed.
Forgive me for not telling you, but I’m
no poet. Please forgive me, please. Forgive
my gloves, my callous greeting, my unease –
you must not realize I just met death
again. Forgive me if I say he looked
impatient. Please, forgive me my despair,
which once seemed more like recompense. Forgive
my greed, forgive me for not having more
to give you than this bitter pill. Forgive:
for this apology, too late, for those
like me whose crimes might seem innocuous
and yet whose cruelty was obvious.
Forgive us for these sins. Forgive me, please,
for my confusing heart that sounds so much
like yours. Forgive me for the night, when I
sleep too, beside you under the same moon.
Forgive me for my dreams, for my rough knees,
for giving up too soon. Forgive me, please,
for losing you, unable to forgive.

---Rafael Campo


WSJ: One of the poems in your new collection is called “Morbidity and Mortality Rounds.” These are meetings when caregivers get together to analyze adverse outcomes and figure out how care can be improved. In the poem, the narrator asks forgiveness for everything, including “for my
dreams, for my rough knees, for giving up too soon.” What are you trying to say in the poem that you could not or would not say in an actual morbidity and mortality round?

**Dr. Campo:** I wrote that poem after a patient of mine died in the hospital despite our best efforts to treat his end-stage cancer.... The poem became space where I could think and feel more deeply about how I could have made his end-of-life care not just more effective in the sense of cure, but instead more meaningful and healing even in the face of death. The standard “M and M” rounds don’t allow for the exploration of these kinds of issues....The patient is almost an exhibit. The patient is in the background but the focus is on what the doctor did or didn’t do, and the whole patient experience is really obscured.

**WSJ:** Who are some of your favorite doctor-poets and why?

**Dr. Campo:** William Carlos Williams is one of my heroes....He invented an American idiom in poetry that really embraced people like his patients and rejected the elitist traditions of traditional poetry. Another physician-poet who is more contemporary is Fady Joudah, a Palestinian-American poet who has also written about the marginalized, and Dannie Abse, a Jewish-Welsh poet. His poems are also extraordinarily humane and reflect more on medical experience and the necessity for doctors to engage compassionately with our patients.

**WSJ:** Do your patients know that you are also a poet?

**Dr. Campo:** Many of my patients know I write poetry and, in fact, some chose me to be their physician because of my writing or my work. But I don’t ever prescribe my own poetry for my patients. I do often invite them to reflect in journal writing and maybe sometimes even in poetry about their experiences of illness and our doctor-patient relationships. I find that expressive writing and other kinds of creative engagements with illness can help my patients to cope with symptoms and even, in some cases, defy the
medical prognoses that my scientific approach offers them.

*WSJ*: What is your definition of a good outcome—in a medical case, and in a poem?

**Dr. Campo**: One of the most important distinctions in my day-to-day work as a doctor-poet is between curing and healing. The best outcome I can imagine for any patient and for my work with him or her is when both of these occur. The disease is cured, and the patient feels healed, as do I. I think the same can be said of a good poem, except that poems more rarely cure diseases but more frequently can heal us.