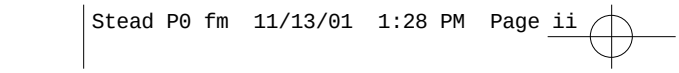
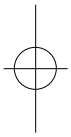
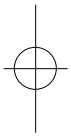
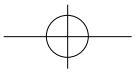
A Way of Working









A Way of Working

Essays on the Practice of Medicine

By

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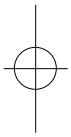
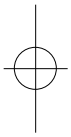
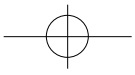
Dedication

At the end of the day, the practice of medicine is a service occupation, not a license to wealth or social standing. This book is dedicated to those physicians who recognize that it is very difficult to truly be a good doctor, and who derive joy from the hard work of serving others.

Barton F. Haynes, MD
Eugene A Stead, Jr., MD
2001

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Barton F. Haynes, M.D.
Durham, North Carolina
December 2000

Introduction

This is a book of essays written by one of the great doctors of the mid-20th century, Eugene A. Stead, Jr. Gene Stead served in many jobs at Harvard, Cincinnati, Emory and Duke Medical Schools, including Chair of Medicine at Emory and Duke, but I will let Dr. Stead introduce you to himself in the *Prologue: Eugene Stead on Eugene Stead*. Gene Stead's contributions to American Medicine are in two general areas: his effect on the doctor-patient relationship that is written about in a companion volume, "A Way of Thinking" by Dr. Eugene A. Stead, Jr., and his effect on healthcare systems in the U.S. that is written about in this volume "A Way of Working."

In this volume, essays and papers are collected that reflect Stead's impact on various systems in American Medicine, such as training programs, academic health centers, national organizations, and the formation of a new profession: the physician's assistant. These essays show the extraordinary vision he has had over the years to anticipate the future.

The chapters in the first section "Medical Education For the Future," reflect Stead's vision on medical students and housestaff training and review his pioneering work in changing the Duke curriculum. His success in training young doctors is indicated by the 33 Stead trainees who went on to become chairs of medicine.

In the section "Academic Medical Centers," Stead gives out his secrets for administering departments and medical centers—secrets that are as relevant today as they were in years past. These sections are a "must read" for contemporary chairs of medicine and their deans. In addition, he anticipated the crisis today in

nursing and other health provider shortages and proposed a series of innovative ways to bring healthcare teams together.

In the section on computerized medical databases, Stead shows us his vision in foretelling the future by telling us in the 1970s of the importance of computers in medicine today. Thirty years ago Stead started the Duke cardiovascular database that now has clinical data on over 250,000 patients. Papers written out of the database have changed the way cardiovascular medicine is practiced today in the U.S. Most importantly, the Duke Clinical Research Institute (led by Stead protégé, Dr. Robert Califf) grew out of the Department of Medicine Cardiology Database, and now is a force in clinical research internationally, not only for cardiovascular medicine, but also for minority health, neurobiology, and other disciplines as well.

In the section on the medical workforce, Stead's classic papers on his establishment of the physician-assistant profession are reprinted, and chronicle the development of his greatest innovation and most successful program.

Finally, in the section on healthcare and the nation, Stead addresses many of the unsolved social problems that we still face, such as poverty and lack of healthcare for all citizens in the US, and proposes several solutions to these social ills.

It is remarkable how many trends, events and medical advances Gene Stead has anticipated and predicted over the years: computer databases in medicine, evidence-based medicine, modern medical school curricula, the effects of managed care on academic health center research and teaching, the nursing shortage, the success of the physician's assistant program, and the importance of genetics and genetic screening in preventive medicine. Because of his ability to see the future, the words that Gene Stead has written over the past 50 years are just as relevant today as when they were written. His essays are packed with wisdom, wit, and perspective, and his story is told in a straightforward voice that is uniquely his.

Barton F. Haynes, M.D.
Durham, North Carolina
December 2000

Prologue

Eugene Stead on Eugene Stead

Eugene Stead Jr. is a 92-year-old Georgia boy educated at Emory College and Emory Medical School. His apprenticeships included medical and surgical internships at the Peter Bent Brigham Hospital, a tour of duty at the Cincinnati General Hospital, a two year stint as chief resident at the Thorndike Memorial Hospital located on the grounds of the Boston City Hospital, and a two year term on the junior faculty of Harvard Medial School. He was appointed Professor of Medicine and Chairman of the Department at Emory at the age of 33. He spent the years of World Ward II at Grady Hospital where he operated the medical service with 3rd and 4th year medical students. From Friday through Sunday he lived at Grady studying circulatory failure from knife, ice-pick and gun wounds. When trauma patients were not available, he and his colleagues studied patients with heart failure. They were always present.

In 1945, Stead was made Dean of Emory Medical School. He was an example of the Peter Principle. He had been promoted to his level of incompetence. He licked the Peter Principle by resigning as Dean and returned to a level of his competence. January 1, 1949 he became Professor and Chairman of the Department of Medicine at Duke.

He resigned his position as chairman at the age of 60. After surveying the field he found no example of a chairman, 60 years or older, who was as productive as Stead had been between 33

and 60. The odds were great that after the age of 60 his department would slowly lose some of its excellence.

He is still active at the age of 92. He has had an unusual opportunity to observe students from their second year in medical school to their maturation as doctors, scientists and educators.

Through these years of activity he has evolved many general precepts. Some of them are:

1) Students do the learning and they should have the honors;
2) Selection of the people who are admitted to a program is much more important than the course of study. Input largely determines output;
3) The faculty fiddles with the curriculum but activity of the student is only affected by examinations. Examinations test memory and until examinations become open book, medial students will continue to memorize useless facts;
4) Examinations have to emphasize useless facts because you can not arrange a string of students from top to bottom if you only ask for useful facts;
5) Physician associates and assistants can increase the productivity of doctors without impairing the quality of health care;
6) The sign of each experience is more important than the facts memorized. If the sign is negative, students will shun the area. If the sign is positive, they may continue to explore and learn;
7) Never give assignments. Identify areas that are of interest and see how far students will go on their own;
8) Many persons with excellent grades and high IQs will sit on their bottoms. The work of the world is

done by those who get up in the morning, enjoy the day and make little distinction between work and play;

9) Don't forget the forgetting curve. Ask questions over the years to discover what is best left in books and computers;
10) Any form of active learning will accumulate fewer facts per hour but will slow the forgetting curve;
11) Education is never efficient;
12) Any question to which there is a known answer can be reduced to memory. The best questions have no absolute answers; and
13) Availability is a more useful attribute than brilliance. People who are happy stay home—the discontented travel.