

The Soul in the Machine
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Medicine has many facets, but at its heart there is only the patient to be found. The word “patient” is derived from the Latin “patiens,” meaning “I am suffering.” Patients’ collective will to feel well or relieve their burden has spawned every branch on the tree of the health professions. Regardless of their physical or psychosocial ills, they are all souls seeking relief. Patients are not just some complicated machinery to be repaired. They are the spirit hidden inside that machine. You will not find a patient’s love of fishing on [UpToDate](#). There is not a [UWorld](#) question about their dreams and ambitions. However, personal identity is critical to patients and will be quietly guiding every decision they make inside and outside of the clinic. How then, can physicians provide the best care to their patients? Always, the first step in healthcare is to understand the patient, the one who suffers.

The pursuit of healing is a fundamentally human endeavor; people caring for other people. There is no better way to care for another person than to build a trusting relationship with her or him. Every word and every decision provide an opportunity to empathize more deeply, to act as a source of compassion, to improve outcomes.

Given that personal health is a cornerstone of an individual’s identity, in disease our personal identity can be damaged by disability or disfigurement. In death, our personal identities are gone but for the fleeting memories of us in our writings and in our friends and loved ones. Thus, the physician inherently preserves identity by keeping impairment and death at bay. There could be no calling more essential to the human experience.

When we ask the patient “What brings you to clinic today?”, we should be aware that the reason often is deeper than whatever they are about to tell us. What each patient needs is different; unfortunately, the care they receive is all too often not. The patient’s perspectives, feelings, and decisions are absolutely integral to the practice of medicine. William Osler wrote, “To study the phenomenon of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all.” I would add, to study disease without a patient-centered approach is to sail without a rudder.