

THE PATIENT AS A PERSON

(Speech delivered at meeting of the Medical History Society of New Jersey, Princeton, NJ, May 22, 2019.)

At its second meeting in 1847 the American Medical Association approved a lengthy *Code of Medical Ethics* that among many things repudiated relationships of its members with unorthodox practitioners and required them to refrain from unsavory business dealings or advertising. Some historians noted that the term “code of medical ethics” was a misnomer because early versions referred chiefly to rules of etiquette to regulate the professional contacts of its members. Dr. Chauncey Leake (originally a New Jerseyan) suggested that medical ethics *should* be more concerned with doctors’ conduct toward their individual patients and toward society as a whole. Over the years there were modifications and in 1957 the AMA’s approach was reduced to ten terse ‘principles’ statements reminiscent of the biblical decalogue. However, by the latest update in 2016, the comprehensive code had ballooned to eleven almost unreadable chapters.

The 1950s were optimistic times when advances in medical technology (e.g. antibiotics, organ transplantation, dialysis and pacemakers) were viewed as unqualified good but some scholars were starting to air their qualms about social and ethical problems introduced by medical progress.

(In September 1960 many eminent scientists and humanists gathered at Dartmouth College for a two-day conference aptly titled “Great Issues of Conscience in Modern Medicine.” They included the likes of Sir George Pickering, Wilder Penfield, Nobelist Hermann Muller, C. P. Snow, Aldous Huxley and their discussions were erudite. Microbiologist René Dubos served as chairman and the conference’s stated purpose was “to examine the issues of conscience in medical and scientific progress...not simply the question of survival...but what kind of survival?”

Dynamics at the bedside were in flux - as Bob Dylan sang, the times they were “a-changing” - and not all to the good. To many people, modern medicine seemed to be transforming the trusted healer of yesteryear into a remote technician who was difficult to see, and even more difficult to understand. In

1960, *Harper's Magazine* devoted a special supplement to discussing challenges plaguing the profession. ("The Crisis in American Medicine") It reported that "millions of people...were bitterly dissatisfied with their individual care" and that there was a crisis in human relations and breakdown in communications between doctors and patients. Medicine was being fragmented, bureaucratized and depersonalized; doctors had little time to talk to patients and the family doctor was becoming extinct. Moreover, the costs of care were soaring and government was entering the private world of medicine.

At the same time there was increasing interest in the spiritual dimensions of medicine and in 1961 the AMA established a Department of Medicine and Religion. It was chaired by a Presbyterian clergyman Rev. Paul McCleave and two years later, at their first public program that opened the national convention, (Atlantic City, 1963) McCleave remarked that "the patient has a faith...and must be treated and cared for within the scope of that faith." Guest speaker Bishop Fulton J. Sheen added "There are no diseases; there are only sick people...Man is much more than a mass of nerves, tissues, blood and organs; the objective of medicine is the suffering person."

In February 1964 Rabbi Abraham Joshua Heschel, professor of Jewish Ethics and Mysticism at the Jewish Theological Seminary in New York City, received an unusual request. It came from Reverend McCleave who explained that he was writing on behalf of the American Medical Association to invite the rabbi to participate in a symposium titled "The Patient as a Person" that would open their annual convention in San Francisco that June. McCleave wrote that "there are many circumstances during an individual's lifetime that he requires both physician and clergy working together to accomplish his total health." But why did the AMA choose Rabbi Heschel to speak at their meeting? After all, who was he?

Abraham Joshua Heschel was born in Poland in 1907, descended from generations of eminent Hasidic rabbis. Although he'd escaped Europe in 1940, most of his family and friends died during the Holocaust. Transplanted in America, he accepted a teaching job at the Hebrew Union College in Cincinnati and after five years there he accepted an appointment at the Jewish Theological Seminary of America which was the academic flagship of Conservative Judaism.

After arriving on these shores, Heschel had quickly mastered English and evolved into a brilliant writer and an eloquent speaker. He also had worked actively to improve Jewish-Christian relations so he was a natural selection to speak at the AMA convention.

No doubt, the idea to invite him came from his friend Rabbi Seymour J. Cohen of Chicago who was ordained at JTS in 1946, the same year that Heschel joined the faculty there. Rabbi Cohen was a member of the AMA's new Committee of Medicine and Religion and, like Heschel, was active in the Civil Rights movement. Indeed, when Cohen introduced Martin Luther King as a featured speaker at a National Conference on Religion and Race in 1963, it was the first time that Rev. King and Rabbi Heschel met. (Both men appreciated in the other a kindred prophetic spirit and King sometimes referred to Heschel as "my rabbi.")

The AMA's program on religion and medicine in 1964 was held on the opening night of its national convention and was chaired by the organization's president Dr. Edward Annis. Rabbi Heschel was preceded by psychiatrist William Menninger, president of the Menninger Clinic in Topeka, Kansas; each spoke for thirty minutes and received a \$500 honorarium plus expenses. After reading a preliminary draft, Rev. McCleave warned Heschel to "tone down" some of its more controversial political material but the rabbi was undeterred. And although the title of the program focused on patients, when he began his talk Heschel said that we cannot speak about the "*patient* as a person" unless we probe the meaning of a *doctor* as a person.

I'd like to read some of Rabbi Heschel's more memorable remarks from that speech to the AMA:

Technology is growing apace. Soon the doctor may be obsolete. [In the future] data about the patient may be collected by camera and dictaphone, arranged by typists, proceed into a computer. Then diagnosis and treatment may be established by a machine. Who, then, would need doctors?

The mother of medicine is not human curiosity but human compassion, and it is not good for medicine to be an orphan. Physics may be studied as a pure science, medicine must never be practiced for its own sake.

Medicine is more than a profession. Medicine has a soul, and its calling involves not only the applications of knowledge and the exercise of skill but also facing a human situation. It is not an occupation for those to whom career is more precious than humanity, or for those who value comfort and serenity above service to others.

The weight of a doctor's burden is heavy and often grave. In other professions mistakes, inadvertency, blunders may be pardonable, even remediable; the doctor, however, is often like an acrobat, a ropewalker; precision and meticulousness are imperative; one mistake and the patient may be dead.

While medical science is advancing, the doctor-patient relationship seems to be deteriorating. In fairness to physicians, the relationship has changed because medicine has changed. The doctor of old may have had little more to offer the patient than understanding, sympathy, personal affection....Many of us fear a collapse of the old and traditional esteem for the character of the doctor, an increasing alienation between the healer and the sick.

The doctor is alleged by many people to act like an executive, viewing the patient as a consumer. Generalizations are unfair. Such an image may apply to a minority of men in this great profession. Yet attitudes of some may reveal a condition of concern for many....The crisis in the doctor-patient relationship is part of the ominous, unhealthy, livid condition of human relations in our entire society, a spiritual malaria, a disease of which high-powered commercialism and intellectual vulgarity are the only premonitory symptoms.

*Strictly speaking what is a patient? A human machine in need of repair; all else accidental? Or, as has been suggested, man could best be defined as an ingenious assembly of portable plumbing. [According to this approach] as a patient, what do I see when I see a doctor? Since I'm essentially a machine, I see the doctor as a plumber whose task is to repair a tube in my system....**[But]** to accept such a philosophy would be to perpetrate euthanasia on the spirit of medicine itself. The mechanics of medicine must*

not be mistaken for the very essence of medicine, which is an art, not alone a science.

The doctor is not simply a dispenser of drugs, a computer that speaks. In treating a patient he is morally involved. What transpires between doctor and patient is more than a commercial transaction, more than a professional relationship between a specimen of the human species and a member of the AMA; it is a profoundly human association, involving concern, trust, responsibility....The doctor enters a covenant with the patient, he penetrates his life, affecting his mode of living, often deciding his fate. The doctor's role is one of royal authority while the patient's mood is one of anxiety and helplessness. The patient is literally a sufferer while the doctor is the incarnation of his hope.

In our democratic society, where every individual insists upon being independent and authoritarianism is abhorrent, the doctor is the only person whose authority is accepted and even cherished and on whose judgement we depend.

Need I remind you, all that and much more was said 55 years ago! By 1964 the paternalism that had characterized doctor-patient relationships since Hippocratic times was yet to be tested in the courts and the seminal Karen Ann Quinlan decision that tilted the dynamic away from doctors and toward patients - so-called "patient autonomy" - was still a dozen years off.

Recently I had occasion to ask Rabbi Heschel's daughter Susannah what experiences her father might have had prior to that conference that could have influenced his feelings about the medical profession? She suggested that perhaps it was his friendship with an immigrant physician who practiced in an Old-World style on Manhattan's Upper West Side whose humble office was more like an intimate living room than a clinic. This doctor engaged patients in a personal way - in effect, as "people."

In his speech Rabbi Heschel spoke only briefly about religion and never specifically referred to Judaism, but he remarked that "It is a grievous mistake to keep a wall of separation between medicine and religion. There is a division of

labor but a unity of spirit. To minister to the sick is to minister to God. Religion is not the assistant of medicine, but the secret of one's passion for medicine." However, Rabbi Heschel quickly backed away from this theme and focused, instead, on a more fundamental concern for this audience - money!

The mortal danger faced by all of us is that of succumbing to the common virus of commercialism, the temptation to make a lot of money...The motivation to dedicate one's life to the great calling of medicine has its source in the depth of the person. Yet a great calling, whether teaching, healing or writing is a jealous mistress; she requires complete devotion, supreme appreciation.

Striving for personal success is a legitimate and wholesome ingredient of the person. The danger begins when personal success becomes a way of thinking, the supreme standard of all values. Success as the object of supreme and exclusive concern is both pernicious and demonic. Such passion knows no limit, According to my own medical theory, more people die of success than of cancer.

The nightmare of medical bills, the high arrogance and callousness of the technicians, splitting fees, vested interests in promoting pharmaceutical products, suspicion that the physician is suggesting more surgery than absolutely necessary - all converge to malign the medical profession. Man is often sick and medicine is indispensable for survival. But medicine today is believed to be afflicted with a Sisyphus complex and is itself in need of therapy.

(Dr. William Menninger agreed that one's religion, convictions, ideals and ethics are an extremely important part of a person's method of living; hence, they are a major factor in overall health. Focusing on the whole man or woman helps to counter a long-standing idea that people can be divided into parts - body and mind or body and soul. He said that at the Menninger Clinic three diagnoses are made for each patient - a physical diagnosis, a social diagnosis and a psychological diagnosis - and only by considering each patient as a physical organism, a social being and a spiritual entity can a doctor gain insight into their condition.)

The AMA's president, Florida surgeon Dr. Edward Annis, was not impressed. In informal remarks made afterward, he denied that doctor-patient relationships had declined but admitted that doctors weren't seen as much as in the past; indeed, some people were complaining where were the beloved family docs of yesteryear? Dr. Annis was more interested in outcomes than relationships and although he acknowledged that those old-timers had given unstintingly what they could, their patients died of illnesses that now could be cured. He admitted that today's doctors may not be around long enough for a patient to remember their faces, but now they were able to prescribe an effective remedy; although they may be gone quickly, the patient lives. Dr. Annis insisted that decline in personal contact doesn't mean that doctors no longer care about their patients: "The doctor as a person is still very much here. He is always where he is most needed."

The next day a headline in the *San Francisco Examiner* read "Dr. Heschel's Bitter Pill" - but his prescriptions were generally well received and there were many requests for copies of the speech. One congratulatory letter to "Dr. Joshua" (sic) cautioned that his fine words would do no good since "that group doesn't even speak to Cabots and Lodges" - presumably only to God. For the next decade although great interest continued about the spiritual dimensions of medicine enthusiasm gradually waned and the DMR and the related Committee of Medicine and Religion (CMR) were discontinued in 1972. (It's been suggested that the demise may have been linked to the AMA's contentious internal debate on abortion.)

For decades the conservative AMA had successfully resisted any incursions of government into the profession. When President Roosevelt's Secretary of Labor Francis Perkins, who was one of the most vocal proponents of universal health care, directly appealed to FDR, he lamented "we can't go up against the state medical societies; we just can't do it." But Harry Truman was ready for a fight. Listen to this extract from his message to Congress in 1947:

National health insurance is the most effective way to meet the Nation's health needs...If the financial risk is spread among all of our people, no one person is overburdened...more people can see their doctors and will see them earlier....The total health program which I have proposed is crucial to

our national welfare and the heart of the program is national health insurance. Until it is part of our national fabric, we shall be wasting our most precious national resource and shall be perpetuating unnecessary misery and human suffering.

President Truman insisted that a single program was *not* “socialized medicine” and that we can afford to spend more for health; but the AMA was adamant and claimed that the Truman plan would enslave doctors. In 1961 the actor Ronald Reagan, acting as spokesman for the AMA, in a ten minute recording warned “If you don’t [reject national health care] I promise you this program will pass as surely as the sun will come up tomorrow. And behind it will come other federal programs that will invade every other area of freedom as we have known it in this country. Until one day...we will awake to find that we have socialism.”

(In 1971 when Princeton professor Paul Ramsey, who taught Christian ethics here at Princeton for nearly forty years published a seminal book in the emerging field of bioethics, he used the same title as had been discussed by Rabbi Heschel seven years earlier at the AMA convention, *The Patient as a Person*.....)

Once again, these days, universal health care is being debated and the pejorative “socialized medicine” is being employed and, to my mind, Rabbi Heschel’s words from more than a half century ago remain relevant:

Socialized medicine may be a dangerous thing, but what shall we think of socialized sickness, of socialized despair of the aged? It is both sterile and dangerous to be involved in defensive and obsolete thinking. We must be open to the situation and seek to make available to all men the blessings that the genius of medicine has discovered. It is not enough to battle socialism. What is needed is fresh creative thinking, openness to the situation.

Many of us are expecting the AMA to serve as a major moral force in the life of our society. Whatever affects the health of man - care for the aged, the prevention of illness, the use of nuclear weapons - is within the scope of the AMA....Eclipse of sensitivity is the mark of our age.

The calling and conduct of the doctor is care for others and the meeting of doctor and patient is an occasion for being human...The doctor is a major source of moral energy affecting the spiritual texture and substance of the entire society...The doctor is not only a healer of disease; he is also a source of emanation of the spirit of concern and compassion. The doctor may be a saint without knowing it, and without pretending to be one.

At the same convention as Rabbi Heschel's speech, the AMA voted to permit nearly two thousand county and district societies to discriminate against doctors and patients of color. The next year, while some AMA leaders called for "pragmatism", hold-outs accused them of "appeasement" or "surrender" - of leading them like sheep into involuntary servitude. In 1965 Lyndon Johnson finally was able to sign Medicare into existence, but the AMA successfully lobbied for a clause that doctors were not required to participate or, if they did, wouldn't have to accept the "assigned" fee.

These days many people are again seeking to heal address dehumanizing and depersonalizing forces in medicine. Movements for "patient-centered" medicine have embraced the influence of patients' cultures, religions and spiritualities on their experiences of illness and medical decisions. It appears that Rabbi Heschel was prescient when he rebuked the medical profession 55 years ago - and because many of the same concerns remain today, his admonitions still resonate.

So as we move forward, it's necessary for the profession to address questions of meaning, value, and relationship that too often are ignored or insufficiently appreciated. As medicine increasingly is driven by technology and profit margins, our great challenge remains how to restore medicine's primary purpose which is how to humanely provide what is in the best interest of the patient as a *person*. Perhaps no one expressed that sentiment more succinctly than Harvard's Dr. Frances Peabody who in 1927 famously told his students that the art of medicine is that which carries us beyond the patient to the man." Again: the patient as a person.

In their extensive review of the history of the AMA's Committee and Department of Medicine and Religion, Daniel Kim et al concluded:

Many within academic medicine today are again seeking to heal the rift between medicine and religion and to engage spiritual and religious resources in addressing the same dehumanizing and depersonalizing forces that led to the AMA's initiative in medicine and religion half a century ago. They testify to the persistence of spiritual or religious needs in the practices of medicine. Much has changed since the 1960s, of course, but modern medicine's more recent interest in religion seems to spring from the same sources. The concept of treating patients as whole persons continues to be revisited....(they continued)

Movements for "patient-centered medicine" have embraced the influence of patients' cultures, religions, and spiritualities on their experiences of illness and medical decisions. For physicians, efforts to promote professionalism in medicine have stirred thinking about the virtues in medical practice and about medicine as a spiritual vocation, and a growing body of research suggests physicians' religious identities and commitments strongly shape their clinical practices, especially in certain domains....Despite the establishment of bioethics as a permanent feature of medicine's landscape, patients and practitioners alike seem to express needs that are more spiritual than moral.

Addendum: CIVIL RIGHTS

In the canon of Abraham Joshua Heschel's published and unpublished work that is digitally archived at Duke University, as well as in many biographies that I've read, I could find no other instance where he spoke specifically about the medical profession. In order to delve deeper I researched some of the rabbi's correspondence from just before and after the San Francisco speech and one letter in particular suggested that during his brief stay in the city, Heschel must have been distracted by events far removed from medical matters. Indeed, the same weekend of the AMA convention was a pivotal time in the civil rights movement.

The letter just referred to was written to Rabbi Heschel by a man whom he'd first met that weekend. Edward M. Keating was the publisher of *RAMPARTS* a

politically progressive Catholic magazine and, in addition to praising the speech, Keating referenced a conversation the two had in which they expressed mutual dismay over the public humiliation that week of 29 year old Rev. William DuBay of Los Angeles. The young prelate had sent a 700 word message to Pope Paul VI asking him to remove Cardinal McIntyre as archbishop of Los Angeles for “coordinating a vicious campaign of intimidation against priests, nuns and lay Catholics who supported the Civil Rights movement.” The pontiff was unimpressed and several days before the AMA meeting, DuBay genuflected before the cardinal, kissed his hand and publicly begged forgiveness. Writing two days after their meeting, Keating said that he was “sick with regret”:

The case, as far as the Los Angeles Archdiocese and the public press is closed. I read an editorial which is enough to drive even a saint to despair. In fact, a nun in my home last night asked me to read it and I could not do so. She read portions and in her beautiful voice it sounded like an angel of Heaven calling God for help. Locally the situation in Los Angeles is hopeless since the rallying point has been taken away. I can only wonder how all those hundreds of thousands of Negroes must feel now that an even more iron-clad silence has settled over the community. (June 23, 1964)

Three days after Heschel’s speech to the AMA, he was back in New York City to speak at the annual meeting of the Catholic Theological Association. He also held informal meetings about Jewish-Catholic relations that recently had been addressed in the Vatican’s Second Ecumenical Council, but whether he discussed the Dubay affair. (Rev. Dubay was reassigned but continued anti-Vietnam war, anti-segregation and pro-gay rights activities and eventually was suspended from the priesthood. in Los Angeles is unknown.) William Dubay’s moral outrage reflected a national crisis during that turbulent summer of 1964.

While Rabbi Heschel was in San Francisco he surely was distracted and profoundly disturbed by news coming that same weekend from St. Augustine Florida, the nation’s oldest city where Jim Crow was especially virulent. The previous year President John F. Kennedy had initiated the Civil Rights Act that was intended to outlaw segregation and racial injustice and after his assassination (Nov. 22, 1963) Lyndon Johnson took up the cause. Among the goals of LBJ’s Great Society legislation was elimination of racial injustice but

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when legislation was introduced, Dixiecrat senators led by Strom Thurmond and Robert Byrd filibustered for 75 days until on June 11th - ten days before Heschel's speech - a compromise bill, crafted by Hubert Humphrey and Everett Dirksen passed the Senate.

Martin Luther King and his supporters had gathered in St. Augustine to protest segregation and the KKK's influence. Non-violent demonstrations were being sponsored by black organizations, including CORE, SNCC and the NAACP and two hundred rednecks and KKK night-riders attacked marching blacks. The police were unable or unwilling to restore order and forty-five people were injured. Rev. King was arrested and from jail wrote a letter to his friend from earlier demonstrations, Rabbi Israel Dresner of Springfield New Jersey, urging him to come down and bring as many rabbis as possible, as he said, "to bear witness with us for self-respect and human dignity." When sixteen Reform rabbis arrived in St. Augustine, they were met by dozens of segregationists armed with broken bottles and bricks screamed threats.

Several days before Heschel's speech to the AMA, the Reform rabbis led a "pray-in" in front of a segregated restaurant and joined black people at the lunch counter of another. It was a decoy maneuver while, at the same time, black and white demonstrators jumped together into their motel's segregated swimming pool. The angry manager poured acid into the water and a fully clothed police officer jumped into the pool to make arrests. The rabbis were jailed along with two dozen civil rights activists - the police brutally using cattle prods to move them along - but in the next week several more so-called "swim-ins" were held at public beaches. During their one night in jail Rabbi Eugene Borowitz and activist Albert Vorspan composed a widely publicized letter in which they explained:

We came as Jews who remember the millions of faceless people who stood quietly watching the smoke rise from Hitler's crematoria....We came because we know that second only to silence, the greatest danger to man is loss of faith in man's capacity to act.....We shall not soon forget the stirring and heartfelt excitement with which the Negro community greeted us with full-throated hymns and hallelujahs, which pulsed and resounded through the church; nor the bond of affectionate solidarity which joined us hand in hand during our marches through town, nor the exaltation which lifted our voices

and hearts in unison; nor the common purpose which transcended our fears as well as all the boundaries race, geography and circumstance. We hope we have strengthened the morale of St. Augustine's Negroes as they strive to claim their dignity and humanity as we know they have strengthened ours..

The incidents in St. Augustine had a grim accompaniment in Mississippi for the day after the Civil Rights Bill passed the Senate, more than two hundred mostly white college students had set off from Ohio for Mississippi to encourage black voters to register. The first contingent arrived on Sunday June 21 - the same day as Heschel's speech to the AMA - and that evening three of the volunteers: Andrew Goodman, Mickey Schwerner and James Chaney (a local African-American) were reported missing. Several days later their abandoned and burned car was discovered in a nearby swamp and for the next few weeks their photographs appeared on the front pages of national newspapers. Two weeks later their mutilated bodies were found buried in an earthen dam. They'd been assassinated by the Klu Klux Klan but, although eventually nineteen men were arrested, none ever were tried for murder. Surely Rabbi Heschel was with the demonstrators in spirit that summer weekend in 1964, but he was busy in San Francisco but the next March he made sure that he was front and center beside Martin Luther King in Selma, Alabama.

Senator Richard Russell had warned President Johnson that his support for the Civil Rights Bill would cost Democrats the South, but LBJ signed it into law on July 2 and four months later he won the presidential election in a landslide over Barry Goldwater and the next year (1965) Congress passed the Voting Rights Act. Nevertheless, Senator Russell had been correct since in following elections the Democrats did lose the formerly "Solid South" and today we're still paying the political price.

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