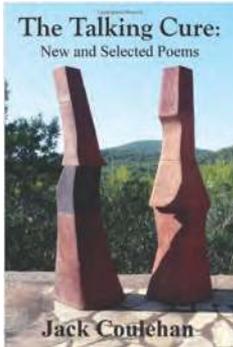


Book Reviews

David A. Bennahum, MD, and Jack Coulehan, MD, Book Review Editors



The Talking Cure: New and Selected Poems

By Jack Coulehan (AQA, University of Pittsburgh School of Medicine, 1969)
Plain View Press, Austin, TX
June 30, 2020, 214 pages
ISBN 1632100789, 978-1632100788

Reviewed by David Richard Jones.

Jack Coulehan recently published *The Talking Cure: New and Selected Poems*. The selections go back 30 years to his first books, *The Knitted Glove* and *First Photographs of Heaven*, and finish with recent work from the poet's 70s. These poems ought to be required reading for all medical students and printed on waiting room walls. They are for doctors, patients, and all the rest of us who have bodies and souls.

Poet-physicians go back at least as far as Erasmus Darwin and later John Keats, but the physician-poet Jack Coulehan most resembles is William Carlos Williams, one of the great modernists of the early 20th century and, for 50 years, a general practitioner in Rutherford, NJ. Coulehan's poems, like Williams', have short lines, modest lengths, lean language, and a clear view of real life. They show us an aware, awake mind interfacing with the emotional and spiritual turmoils of actual people's mostly medical trials.

The new book includes a lovely poem, "William Carlos Williams Circumcises Ernest Hemingway's First Son," a loose-limbed, Williams-style account of Bill and Hem, both hung-over from a night at the fights and standing with their wives around a kitchen table in Paris for the medical procedure. At the sight of a few drops of blood, Hemingway "fainted ker-boom/dead to the world." For his part, Williams decides to abandon the world of experimental art to return to "the pale complexities of practice... the grime/of Rutherford's bodies."

Bodies—patients' and his own—figure enormously throughout the book. Every body part comes into play, all the limbs, joints, organs, and secret passages of the brain. But page after page is about reacting and relating to those organic bits. The first poem, "Anatomy Lesson,"

Bibliotherapy

I winked when Helen Vendler propounded
another whirl on life's go-around
as Wallace Stevens. Smacked my muzzy
belly 'cause there's nothing soft or fuzzy
about Iffucan or Haddam or gray bare jar,
mind of winter, or Blue Guitar.
"With you, Helen!" I thought so ever-sure—
Until—until, I took Coulehan's *Talking Cure*
where stanzas march in formal plinths,
the kind that make wily widows wince.
And look as though they ought to rhyme
but don't, at least most of the time.
They light what's there, but dimly seen;
Things that are or might have been.
Chekhov, Osler, *Ronan's Finger*,
thoughts that roil and ring and linger.
They scratch the years on the wall behind:
Awe and wonder and piece of mind.
So, forget Wallace; in my new plan,
I want to come back as Coulehan!

— Francis A. Neelon, MD

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is about learning the body's "positions" and "connections" by dissecting a cadaver, to whom Coulehan gives a name, feelings, powers, and finally tears.

Other titles include "The Biopsy Room: Prostate," "Three for the Stethoscope," "The Conference of Germs," "Phrenology," "The Man With a Hole in His Face," and "McGonigle's Foot," the latter a particularly gory account of an 1862 amputation gone wrong. What nature was to the romantic poets, the corporeal landscape is to Coulehan.

Coulehan writes like a working physician. He narrates patients' fears, misconceptions, and reactions to bad practice. Also his own personal and professional failings. "Take Off Your Clothes" describes in specific steps how a physician should orchestrate getting a patient undressed, after which he has to confront "the roots of my bewilderment" while "reading a narrative in your flesh."

A few years back, Coulehan gained prominence as a patient when he wrote a *Washington Post* piece about seeking medical help with what he knew was a case of shingles, only to encounter a barrage of scans and "ologists" and an insurance bill for \$9,000. In the poems, he is intermittently the object, not the subject, of the medical relationship, comparing himself to a broken-down car under the care of a doctor who is "a good mechanic, but innocent, she lacks specs for my spark plugs."

On either side of the stethoscope, Coulehan's imagination fuses scientific and emotional experience. He rejects the simplicity of "Ockham's Razor" by saying, "My rogue imagination/colors, enhances,/My ear yearns to listen,/my thalamus dances." Struck by loneliness, he feels it in his esophagus. It's not every modern poet who could analyze "Compassion" by scrutinizing the "temporoparietal junction" and "right midcingulate gyrus."

Two great influences on Coulehan were Walt Whitman and Anton Pavlovich Chekhov. As part of his varied career, Coulehan has directed the Walt Whitman Birthplace Association on Long Island. The title poem of his 2016 collection, *The Wound Dresser*, has him reading Whitman's poem of that name about tending to Civil War casualties, and here, as he does elsewhere in the book, the writer takes on Whitman's voice, "embracing the scene" of damage, pain, and love.

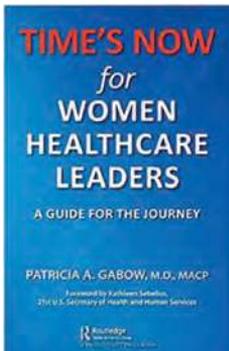
In another poem, he imagines Sir William Osler, founder of Johns Hopkins, paying a visit to Whitman in the late 19th century, and coping with his "sweet aromatic presence, "magnetic force," and "unruliness," how the old, bearded poet lived on "the edge of chaos." Coulehan doesn't write like Whitman, but he finds inspiration in his experience.

As with Whitman, Coulehan takes on the voice of Chekhov, whose medical tales he has published. *The Talking Cure* has a section of poems with first-person insights into the Russian's lifetime of medical and literary experience. He even gives out imaginative prescriptions, including "If you are afraid of stressful living/turn yourself into a smelt or sturgeon," and "If you talk too much/the blood will rush to your lungs/and deprive the brain,/so don't chatter/and avoid getting constipated." The grouping is called "So Many Remedies" after a line from *The Cherry Orchard*: "if a great many remedies are suggested for some disease, it means the disease is incurable." That sentence, referring to the end of a way of life in late-19th century Russia, is a reminder of the old saw that life itself is incurable, a thought that hovers over the medical dramas of Coulehan's poems.

Almost all of these poems are familiar modern lyrics, which for two centuries have been about encountering a situation and then watching it flower into a feeling or a thought—an interior reaction. They are contemporary in their short lines and free verse, though Coulehan is deft with more traditional forms like the sestina, villanelle, and a load of Shakespearean sonnets. The book includes a section of "Internship Sonnets" about Coulehan's education and five "Cosmic Sonnets" about the Big Bang and a relationship.

Coulehan has been a clinician, a teacher, an experimenter, an administrator, and a borderless doctor, and all these lives inform the poems of *The Talking Cure*. What holds them together is his probing voice, roaming imagination, and emotional sophistication. He is his own best subject as he opens "the rifled box I have of memory,/bulging with moments that may hold a clue/to what I am."

David Richard Jones was the founding Artistic Director of The Vortex Theatre in Albuquerque and is Professor Emeritus of English at the University of New Mexico. The author's E-mail address is djones@unm.edu.



Time's Now for Women Healthcare Leaders: A Guide for the Journey

Patricia A. Gabow, MD, MACP (AQA, Perelman School of Medicine at the University of Pennsylvania, 1969) Routledge, 2020, 214 pages ISBN 978-138-36558-2

Reviewed by Dee Martinez

Dr. Patricia Gabow's latest book, *Time's Now for Women Healthcare Leaders*, is a reflection on a distinguished career as a female health care leader, and a discerning retrospect from Gabow's colleagues, direct reports, and family members – female and male alike. Drawing on her 50 plus years in medicine, 20 of which were spent serving as the CEO of Denver Health, the city's public safety net hospital, Gabow is a nationally renowned leader in the delivery of high quality health care, especially for the underserved.

For full transparency, I had the honor and privilege of working with Dr. Gabow at Denver Health for nine years. She is an inspiring, committed, and compassionate leader who guided the organization through the best of times, and the worst of times. Through it all, she was able to lead with dignity, respect, and integrity, no matter the situation, the entity, or the person.

Time's Now is the second book Gabow has written since her retirement in 2012, the first being *The Lean Prescription: Powerful Medicine for Our Ailing Healthcare System*. Both leadership books, *Time's Now* focuses on women in health care leadership roles, as well as those aspiring to one day be in a leadership role. While Gabow focuses on women in leadership roles, she also includes insights and observations from men with whom she worked and supervised. Gabow includes insights gathered from interviews she conducted with several members of her executive management team and her directors of service – six women and five men. She also includes wisdom compiled from interviews she conducted with 12 female national health care leaders including Kathleen Sebelius, the 21st U.S. Secretary of Health and Human Services; Linda Burnes Bolton, DrPH, RN, FAAN, Senior Vice President and System Chief Health Equity Officer, Cedars Sinai Health System; Carrie L. Byington, MD (AQA, Baylor

College of Medicine, 1989), Executive Vice President, University of California Health; Karen DeSalvo, MD (AQA, Tulane University School of Medicine, 1992), Chief Health Officer, Google Health; and Donna Lynne, CEO Columbia Doctors and COO Columbia University Medical Center, and former Lt. Governor of the State of Colorado.

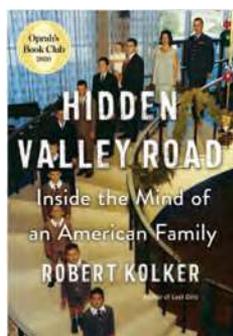
Gabow hits on myriad topics of interest to women leaders, many of which are standards but worth mentioning; many that are topical in today's health care environment; and many that are fundamental for an up-and-coming woman health care leader. Persuasive issues addressed throughout the book include gender and pay inequality; bias; sexual harassment; burnout and work-life balance; imposter syndrome; values and integrity; leading from where you stand; building teams and establishing relationships; life-long learning; working with boards of directors; accountability and communications; and role models, mentoring, sponsoring, and coaching.

Following each section, Gabow provides a "Thought Exercise," to encourage the reader to dig deeper in their own self-reflection and galvanize the lesson to be learned.

Gabow also intersperses each chapter with personal anecdotes, stories, and quotes from her grandfather (Denver Health employees will recognize several of these). One story that Gabow recounts is of the time in medical school when she was told by a surgical attending to "...not bother coming to the operating room, but rather sit in the front row and wear a short skirt."⁴³ While degrading and disturbing, Gabow didn't let this surgical attending dissuade her pursuit of a medical degree. She explains that it made her all the more determined to fight such injustices throughout her career as a physician, a department chair, a medical director, and a CEO.

Gabow's acumen is apparent throughout the book as she shares stories that depict her leadership style. She shares how when CEO she would stand in line at the pharmacy with the patients and have conversations with them while they had no idea who she was, and how when a director of service, she took the same rotations as her staff, including a monthly rotation in the detox unit. She encourages leaders to "stop the emails and talk to each other,"¹¹² to improve communication and ensure that much needed personal touch. Gabow explains that she was also strong and tough when needed, but knowing when, where, and how to use which approach is an important attribute of a leader.

Time's Now is an important read for women who are leaders, women aspiring to be leaders, and men who work for women leaders. It provides poignant lessons that we all can learn from. As Gabow's grandfather often told her, "If you have a gift and you don't use it, no confessor on earth can absolve you."^{pxix}



Hidden Valley Road: Inside the Mind of an American Family

by Robert Kolker
Doubleday; 2020, 400 pages
ISBN: 038554376X, 978-0385543767

Reviewed by Jack Coulehan, MD
(AQA, University of Pittsburgh, 1969)

Does schizophrenia result from heredity or environment? Kraepelin and other psychiatric pioneers thought the disorder must have a hereditary basis, but by the mid-20th century psychoanalysis had taken over and ruled-out nature in favor of nurture. The German analyst Erica Fromm-Reichmann, who arrived in the United States in 1935, offered the theory that the "dangerous influence of the domineering mother" was a major causal factor.^{p35}

In 1956, the anthropologist Gregory Bateson heaped additional blame on mothers whose communication style led their children into "double-bind" traps.^{p36} Schizophrenogenic mothers, or at least dysfunctional family environments, were considered the principal culprits in schizophrenia until the 1970s when investigators began to look seriously at genetic factors.

Meanwhile, Don and Mimi Galvin were raising a remarkable family on Hidden Valley Road in Colorado Springs, Colorado, where Don was a well-liked instructor at the Air Force Academy, and Mimi, a stay-at-home mother. The Galvin family grew quite large: 10 boys and two girls, all born between 1945 and 1965. A picture of domestic harmony on the outside, but a calamity within.

One by one, during their adolescence or young adulthood, six of the 10 boys developed schizophrenia. The manifestations varied—violence, religious delusions, sexual abuse, suicide—but all eventually required frequent and sometimes lengthy admissions to psychiatric hospitals. Amazingly, their parents and the other children endured, and, in a sense, adapted to this avalanche of mental illness.

In 1984, Dr. Lynn Delisi, a scientist at the National Institute of Mental Health (NIMH), learned about the Galvins soon after she began conducting a long-term study of families in which two or more siblings were schizophrenic. By that time, the schizophrenogenic mother had fallen by the wayside, and genetic factors were assumed. Delisi's goal was to elucidate genetic, biochemical, and physiological characteristics of the disorder. Thus, for 35 years Delisi and others have studied and restudied how the six psychotic Galvins differ genetically and biologically from their normal siblings. Robert Kolker's engrossing book, *Hidden Valley Road: Inside the Mind of an American Family*, tells the story of this family in parallel with the continuing research quest for the cause of schizophrenia.

The family narrative is deeply fascinating but becomes progressively more bizarre as each brother suffers his first psychotic break. Donald, the eldest, decompensates with a barrage of confused and destructive behavior while in college. Jim, the second son, violently abuses his wife and baby, and is later discovered to have sexually abused both of his sisters. Brian, the third son, kills his girlfriend and commits suicide while being treated for schizophrenia. Matthew's illness reveals itself when he appears stark naked in a friend's house and smashes a vase on the floor. Peter, the fifth son, begins talking gibberish in his ninth-grade algebra class and spends his adolescence in and out of psychiatric clinics. After being denied a promotion at his job, Joe, the sixth son, starts having hallucinations and sending threatening letters to his employer.

Meanwhile, Don and Mimi preside over "home base" on Hidden Valley Drive. Mimi, in particular, is amazingly resilient. She accepts and supports each of her mentally ill children, while providing a loving and somewhat stable environment for the others, especially Margaret and Mary, the two youngest, who both grow up to become strong, successful women. In later life, Mary serves as the family "convener," maintaining communication with her widely dispersed siblings, both sick and well, after the family has dispersed from their home in Colorado.

What have we learned from this remarkable family? How much did Lynn Delisi's research contribute to our understanding of schizophrenia? Certainly, a smoking gun never appeared. No genetic breakthrough occurred, although Delisi found tantalizing leads. For example, the six schizophrenic brothers all had a rare version of the SHANK 2 gene, which encodes a protein that facilitates rapid signal transfer at brain synapses.^{p270} But it remains unclear how this all relates to phenotypic schizophrenia; in

fact, others have reported a closer link to autism spectrum disorders, none of which were evident in the Galvin family. Nonetheless, Galvin data may one day contribute an essential piece to the jigsaw puzzle of etiology.

What about environmental factors? While the family was certainly dysfunctional, there is no question that Don and Mimi were good parents. A great deal of tension and dysfunction eventually developed, but these problems appear to be consequences rather than causes of schizophrenia.

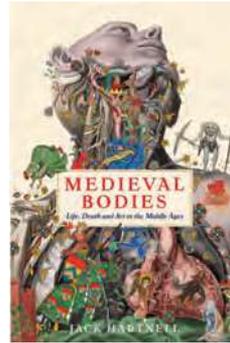
How about treatment? What if Donald, the eldest, had been born in 1995 instead of 1945? Would he have fared better? Perhaps, perhaps not. Donald and his brothers generally received state-of-the-art treatment. Antipsychotic drugs, along with intermittent hospitalizations, aborted acute episodes and stabilized them for varying periods of time. Peter, who received an additional diagnosis of bipolar disorder, was ultimately prescribed lithium, which he disliked, and received questionably beneficial electroconvulsive therapy treatments during one of his hospitalizations.

More recently, clozapine and other second generation (atypical) antipsychotics have been available to the Galvins.

The basic elements of therapy for schizophrenia haven't changed much in the last several decades. (See review of *The Mind Fixers* by Anne Harrington in *The Pharos*, Autumn 2019, p 48–9.) However, it is possible that intensive and comprehensive services are more available today than they were in the 1960s through the 1980s, and access to these could have improved the brothers' prognoses.

Hidden Valley Road is an engrossing story, well worth reading, but in the end, schizophrenia is just as mysterious today as it was when Donald developed his symptoms in the early 1960s.

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Medieval Bodies: Life, Death, and Art in the Middle Ages

By Jack Hartnell
WW Norton & Co., 2018
352 pages
ISBN 978-1-324-00216-1

Reviewed by David A. Bennahum,
MD (AQA, University of New
Mexico School of Medicine, 1984,
Faculty)

The author, Jack Hartnell, is a lecturer in art history who has held academic positions in the United States, Germany and Great Britain. His erudition is remarkable, and he writes with great warmth and verve. Using a large assortment of medieval images, he divides his chapters into the parts of the body, and then relates anatomy and function to cultural, religious, and political practices.

The author begins his survey of anatomy with the head, in particular with legends of remote headless men, the Blemmyae or men with heads sunken into their torsos. There were many variations on the theme of monstrous giants who lived beyond the fringes of the civilized world. The author writes:

We are left to wonder whether perfectly sensible medieval people really believed that such a different and strange race of men actually existed. In a world with no means of mass communication, where cross-continental travel was both expensive and dangerous, who was to know what lurked at the world's periphery? In the absence of proof, many would indeed have seen these figures as fanciful. Yet others may well have taken the popular ancient sources and contemporary tales of far-flung exotic travel at face value, a reasonable explanation of the globe.^{p31}

The 14th-century Italian physician Mondino de Liuzzi, one of the first medieval anatomists, wrote that man's upright form "shared with the Angels" is what gave men their moral and spiritual bodies. Hartnell writes, "Mondino is here following to the letter the biblical narrative of Creation, in which Adam was crafted from the earth in the image of god himself." He shows throughout the book the continuities between modern ways of seeing the world and the particular religious temperament of medieval thinking.

The author reproduces the image of a man's head from a 13th century trilingual encyclopedia found in the

Cambridge University Library, in which there are five round balloon-like structures, each of which has a particular label, *sensus communis* for common sense, carried to the brain by the *pneuma*. A second cell is labeled *ymaginati*, subsequent cells are labelled *cogitative*, *estimativa*, and *memorativa*. The author explains:

Together, this series of shapes presents a route map that allowed medieval writers to elaborate the many complex systems of their brains, from sense and thought to action and recollection.^{p36}

The head was also the symbol for the ruler of the state and when revolt threatened, a revolutionary's head could end on a spike on the walls at the Tower of London. It happened in 1282 to Llywelyn Prince of Wales when he sought to overthrow the English King Edward I. "His transgressions against the Body Politic were made as visible as possible."^{p44}

Hartnell has chapters on the skin and bone followed by the heart. Discussing tombs and burial practices allows him to reflect on the different religions and cultures that made up the medieval population. While Christians would be buried in consecrated ground in or near a church, Jews and Moslems were buried away from consecrated ground, but usually near each other. Those who died from contagious diseases such as leprosy or the plague, would usually be buried away from a town or city, and often in mass graves. The Bubonic Plague of the 14th century killed one-third of the European population. After 1347, when the plague first appeared in Europe, an individual's certainty about life and religion would be greatly challenged as both the church and the authorities of the state failed to suppress the initial and returning waves of the epidemic.

The heart was seen as an organ that maintained the warmth of the body, "the fiery core of the body." A rapid or irregular pulse could signify an impending crisis or catastrophe. There was little or no effective heart medicine. "The paucity of effective heart medicine was, in essence, down to the now familiar dominance of five classical texts such as those of Aristotle, Galen and Ibn Sina."^{p138}

The heart could be affected by external influences such as the stars, love, or internal influences. As the 10th century Jewish physician and poet Moses Abraham Dar'i wrote in Judeo-Arabic:

To the one who asks me to reveal the name of my Beloved, I cry out: "You suffer from a blind heart!" For when the light in one's eyes grows dim, The eyes of the heart will always see.^{p139}

Hartnell alludes to the same pairing of eyes and heart in the romantic lyrics of the Troubadour romances of the 12th and 13th centuries. Giraut de Bornelh writes in the language of the south of France, Old Occitan:

So through the eyes love attains the heart. For the eyes are the scouts of the heart, And the eyes go searching For what would please the heart to possess.^{p140}

Medieval authors used the heart's vital power "through metaphors of love, but also passion, greed, and vengeance. Just as beheading was a potent symbol of social control amid the Body Politic, when reaching for a six body part to represent the soaring highs and punishing lows of human existence—at once lovingly kind and viciously cruel—it was difficult to compete with the body's supreme center, the heart's intense emotional valency assured through both medical thought and popular romance."^{p145}

Hartnell continues his exploration of medieval thought and experience through his use of blood, hands, stomach, genitals, and feet. There is much for the reader in this book that is so rich in history, science, and metaphor.

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