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## When Stories Trump Facts in Health Care

By [ABRAHAM VERGHESE, M.D.](#)

Every time I see a new patient, I take a history. And the more years I spend in medicine, the more I make of the patient's story: It resonates with my repertoire of patient histories and thereby makes me suspect this disease or that.

But very often the medical history isn't about diagnosis; it's about acknowledging the patient's story. I think what frustrates patients more than anything else is that no one listens to their story. One study found that the average physician interrupts the patient in less than twenty seconds. Patients think we doctors are too willing to slap on disease labels, or order tests that are painful and expensive in order to find the right label; or else we seem to cut up and piece out their problems to specialists so that no one has the whole story. For doctors, the money is in poking, prodding, needling, cutting, not in listening to and understanding patients' stories.

I've been reflecting on this lately as I've watched the vigorous debate over how to change our wasteful, expensive health care system. Stories have turned out to be much more compelling than facts.

When the Clintons tried to bring about health care reform in the 1990s, it was the story of Harry and Louise, in slick ads funded by the health insurance industry, that took hold. The fact that Harry and Louise were fictional creations of a PR firm mattered little. This year, Harry and Louise are back, this time in ads that tell a story intended to drum up support for reform.



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Perhaps it is a lesson that President Obama has taken to heart; he is now frequently telling the story about his grandmother and her death from cancer. The story is poignant, and it reminds us that no one is spared such experiences.

My newspaper recently ran pictures of thousands of Los Angelenos lining up for free medical and dental care; I was struck by a picture of a kid grinning out with wonder at a world he could now clearly see through his new glasses. That story said to me: We have priced so many Americans out of getting any kind of health care.

Another story rose and quickly faded from view. A newspaper editorialized that the famous physicist Stephen Hawking, confined to a wheelchair by Lou Gehrig's Disease, would be dead if he had been forced to rely on Britain's National Health Service for his care; turns out he's been getting treated by the NHS for decades.

And we've heard stories of so-called "Death Panels" that would be created in the future if health reform legislation is passed. These stories seem to have no basis in fact. They also obscure the fact that many patients in our current system suffer needlessly at the end of their life, because physicians often feel that the patient's story is at standstill unless the doctor orders more treatments, more tests.

But this is exactly the moment when a physician can be of great value by helping the family and the patient come to terms with illness and death; it is the moment we can promise to be with them through thick and thin, to blunt pain, to reduce suffering and anxiety. There is only one ending to all our stories — and part of the art of medicine is helping patients and families find their way through a full healthy life to a peaceful end.

*Abraham Verghese is a practicing internist and a professor of medicine at Stanford. His most recent book is Cutting for Stone.*