Ancestors and Ghosts

Bernard E. Trappey, MD

In Springsteen on Broadway, Bruce Springsteen tells a story about an early morning, when he and his wife were waiting for the imminent birth of their first child and were surprised by a knock at their door. Springsteen was shocked to find his own father, with whom he had shared a strained relationship, standing outside. As the father and son sat in the dining room nursing "morning beers," it became apparent to Springsteen that his father had driven across the country to make both an apology and a petition—an apology for the failures of his past and a petition for reconciliation. On the eve of Springsteen's transition to fatherhood, his own father was asking for the opportunity to alter their relationship.

Springsteen says, "*We are ghosts or we are ancestors in our children's lives. We either lay our mistakes, our burdens upon them, and we haunt them, or we assist them in laying those old burdens down, and we free them from the chain of our own flawed behavior. And as ancestors, we walk alongside of them, and we assist them in finding their own way, and some transcendence.*"

When a friend first showed me a clip of Springsteen telling this story, I found myself fighting back tears in the middle of a crowded coffeeshop on a sunny summer morning.

For weeks after, I struggled to understand why these words struck me with so much force. There was gratitude in my reaction for sure—I am fortunate in that my own experience with family has been filled with far more ancestors than ghosts. But there was also sadness. Inside me, there was something unexamined that resonated with the Boss's words. What was this haunted part of me, crying out to be named?

Finally, while watching the video again at the end of a particularly long and exhausting week in the hospital, that haunted part of me made itself known. The walls that had been holding the tears back tumbled down, and I allowed myself to enter into the valley of memory that contains both the haunted house and the hall of ancestors that have made me the doctor I am today.

Mastering the art of medicine is difficult, and the apprenticeship system that is medical education provides an effective path to competence. Many of the relationships that make up medical training are short-lived, but this brevity belies the intensity and long-term impact of the days and weeks that comprise them. Alongside the opportunity for growth and support, there is also ample opportunity for abuse and trauma, both overt and subtle.

I am certain I am not alone in noting that my early years in medicine are as full of ghosts as they are of ancestors.

Some ghosts haunt through the memories of active trauma. There is the department chair who attended every morning report, not to teach and support, but to belittle and terrify the residents and students in attendance. There is the attending who smiled the smile of a used car salesman as he handed his business card to every patient on rounds, but who behind closed doors never missed an opportunity to remind his trainees of the many ways in which we disappointed him and failed our patients. There is the fellow who refused to come into the hospital to see a critically ill patient in the middle of the night, but who then made a point to come to the hospital early to track me down to yell at me about a minor mistake in replacing electrolytes before I left in the morning. There are the many attendings whose increasingly esoteric questions about their subspecialty were clearly meant not to probe and extend the boundaries of my knowledge but to intimidate and diminish.

Too often trauma disguises itself as teaching. The facts and protocols learned via fear and intimidation are not easily forgotten, but each remembrance demands its pound of flesh.

But as painful and persistent as the hauntings are, I know that I am blessed that there are as many ancestors walking beside me as there are ghosts following behind.

There is the preceptor who took care to make time not just to share knowledge but to explain how to think like a doctor—leading my developing mind through the valleys of ambiguity and uncertainty. He walks beside me every time I try to help a learner make sense of situations in which there is no "right" answer, only what seems to be the "best" option at the moment, and how we will proceed if it turns out that we were wrong.

There is the hospitalist whose warmth and generosity of time and spirit radiated out in all directions.

DOI: http://dx.doi.org/10.4300/JGME-D-21-00171.1

Working with him was a daily lesson in how to treat coworkers, learners, and patients with genuine kindness, curiosity, and compassion. His light was extinguished far too early, but he continues to walk beside me. His example guides me through every personal encounter I have in the hospital.

There is the prominent cardiologist, who I had previously seen as somewhat unapproachable and aloof. But when a young patient who had presented with rejection of her heart transplant abruptly coded, just an hour after I had last seen her, he noticed that I seemed unusually withdrawn during rounds and pulled me aside afterward. He took time to help me walk through our patient's death and to unpack my feelings around the long and unsuccessful code. He affirmed my feelings of shock. He assured me that I had made no mistake in this patient's care—that there was nothing I could have done that would have saved her. He sits beside me every time I sit down to help a learner debrief around the death of a patient or other bad outcome.

And now, every morning as I prepare to walk through the doors of the workroom where I will meet the team of trainees who have been entrusted to my care as a teacher, I remind myself of both the burden and the buoyancy of my own medical education. And I ask myself a version of the questions that Bruce Springsteen asked his audience in that Broadway theater: "*Who will you be to these learners? Will you lay the burdens of your own training and mistakes upon them, or will you be an ancestor who continues to walk beside them long after you are gone?*"

Bernard E. Trappey, MD, is Assistant Professor of Medicine and Pediatrics, Division of General Internal Medicine, University of Minnesota.

Corresponding author: Bernard E. Trappey, MD, University of Minnesota, trappey@umn.edu, Twitter @bentrappey