'Death is not a failure': Medical schools adapt end-of-life lessons

LINDSAY KALTER
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Local medical schools are in the process of a curricula revamp that will train students to focus more on end-of-life care, making Massachusetts the first in the nation to reach a statewide commitment to quality of life. "Massachusetts is really leading the way on this. It led the way on universal health care, on gay marriage, and it's leading the way on this, too," said Dr. Atul Gawande, a surgeon at Brigham and Women's Hospital and author of the book "Being Mortal." "I've learned the question is not do you fight or do you give up. The question really is, what are we fighting for? What's the quality of life we can fight for?"

The Massachusetts Coalition for Serious Illness Care has orchestrated the effort among four local institutions: Harvard Medical School, Boston University School of Medicine, Tufts University School of Medicine and University of Massachusetts Medical School.

Gawande, co-founder of the coalition, said Massachusetts has the opportunity to create a national model for medical schools across the country.

It's an important shift, he said, from the fix-it mentality that many doctors are taught to possess. He said the extent of his end-of-life training amounted to an hour of discussion in the first two years of medical school.

"You go in focusing on wanting to be a hero and fix things," Gawande said. "Teaching people in med school what it means to be an effective clinician for giving people cutting-edge care for quality of life — as opposed to quantity of life — is a neglected skill."

The medical schools are taking inventory of what skills they're already teaching and will add various training methods including role play patient actors. UMass Medical School's simulation lab is already starting to be used for skills that extend beyond sewing and suturing, said Dr. Jennifer Reidy, the school's chief of palliative care.

Medical students will be required to have conversations with people about breaking difficult news, prognosis and end-of-life planning.

"We're using it to teach complex communication procedures," Reidy said. "We want to ensure our newest clinicians are well-situated to practice these skills."

The changes will be implemented in full by the beginning of next academic year, Reidy said.

Tiffany Chen, a third-year medical student at UMass, said the topic of death is still taboo even in the medical field.

"It's really hard to talk about death, and it's hard to conceptualize," Chen said. "But death is not a failure and there's always something you can do for a patient. If we can infiltrate the medical field with that mindset, we could do a lot of good."

— lindsay.kalter@bostonherald.com