When Breath Becomes Air

Kalanithi P
Random House, 2016
256 pages, $15
ISBN-10: 081298840X

Dr. Paul Kalanithi was a chief resident in neurosurgery at Stanford University when diagnosed with stage IV lung cancer. His memoir, When Breath Becomes Air, chronicles both his journey into medicine and the drastic life changes that occurred after his diagnosis. Although the work contains the narrative of his illness, it is also an optimistic guide to living an authentic and meaningful life. His words encourage us to reflect on our own values and perspective on what it means to live a fulfilling life.

SUMMARY

The prologue paints a picture of Kalanithi’s life at his diagnosis: busy, on an upward path to success, and about to enjoy the fruits of his 10 years of medical training. This trajectory comes to an abrupt halt when he receives the diagnosis of stage IV lung cancer.

In part 1, Kalanithi reflects on a happy childhood in Kingman, AZ. We follow his path to college at Stanford University and medical school at Yale University, and end with the recent present, as a highly esteemed neurosurgery chief resident. He gracefully addresses complex themes from the perspective of a neurosurgeon, including the meaning of life and death, spiritual transcendence, the “moral mission” of medicine, identity, and the price of being a physician.

Part 2 focuses on Kalanithi’s experience of living, working, and making decisions about his suddenly finite future. His role dramatically shifts from physician to patient. His oncologist urges him to focus on his values, but at this point, he is no longer sure of his identity, much less his values. He agonizes over what role surgery can, or should, have in his remaining days.

ANALYSIS AND APPLICATION

Kalanithi’s work is particularly powerful on many fronts. His honest, open, and human account of his journey enables us to identify with him as a young physician, and his brilliance as an author—with frequent references to literature, religion, and philosophy—adds a complexity and beauty that is unexpected from a first-time physician-writer.

We all identify with his struggle to balance a rigorous medical training program with family issues such as marital troubles and the desire to have children. We feel kinship, making his subsequent diagnosis of cancer jarring. We are reminded of our own vulnerability and also of the humanity of our patients by demonstrating how suddenly and unexpectedly we, too, could be in their position. The future is not guaranteed.

Kalanithi’s perspective transitions from examining life’s meaning as an academic question during his years in training, through literature and neuroscience, to examining the same question with the urgency of someone for whom death is imminent, now as a patient. This transition is meaningful and instructive. As such, the book challenges us to examine the extent to which we delay other aspects of life while in medical training. When we enter rigorous training programs, we trade hard work in the present for the idea of future reward. Kalanithi encourages reflection on our own priorities and work-life balance.

Through his writing, Kalanithi helps us understand—whether for ourselves, our families, or our patients—a little more about “what lies up ahead on the road.” We should use this new comprehension to reassess our approach to seriously ill and dying patients. As emergency physicians, we must remember to attend not only to our patients’ medical needs but also to their human needs.

For further reading, please see the Academic Life in Emergency Medicine (ALiEM) Bookclub blog post and discussion (http://www.aliem.com/2016/aliem-bookclub-breathe-becomes-air/).

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The White Coat Investor

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White Coat Investor LLC, 2014
160 pages, $21.14
ISBN-10: 0991433106

“What’s the good life? My definition is a life free from financial worries, a career where you make a real contribution to society, a few luxuries along the way, the ability to help others financially throughout your life, and a comfortable retirement at a time of your choosing.”

—Dr. James Dahle, The White Coat Investor

The White Coat Investor by Dr. James Dahle (@WCInvestor), a board-certified emergency physician, seeks to provide the basic understanding of wealth management that he believes is missing from graduate and undergraduate medical education. Smart physicians in all specialties are graduating skilled in the art of medicine, but typically in the dark about the world of personal finance and investing. The book itself stems from Dahle’s feelings of frustration from being manipulated financially by others early in his career, so he seeks to share the wisdom that he has gained over the years with the medical community.

The book is organized into chapters with relevant information constructed so simply that even the most financially clueless is able to glean value. The narrative is interspersed with advice on loan repayment, asset protection, and estate planning, making a sometimes dry subject not only tolerable but also fun. Several anecdotes and specifically calculated examples give his advice a real foothold in the reader’s life.

Most relevant is the first chapter, “The Big Squeeze,” which lays out the argument for why financial literacy is more important than ever, citing the factors of increasing tuition costs, lower reimbursement rates, and increased regulations. Physicians need to understand these concepts and become financially literate, especially after spending a decade or more training during prime income-earning years. He concludes the chapter with the warning that a doctorate degree does not in and of itself guarantee financial success.

The book is also valuable regardless of the point in training or number of years after graduation it is read. The fundamentals of what is taught are simple and easily applied. For medical students, he advises seeking tuition assistance programs and considering forgoing time off before medical school. For residents, the advice is to establish an emergency fund and to prioritize bills and expenses before splurging on personal spending. Attending physicians are encouraged to continue to live like residents and build a solid financial base through debt payments, maximized retirement plans, and health savings accounts. Most of all, Dahle warns the reader of the so-called hedonistic treadmill.

Ultimately, The White Coat Investor offers a ground-floor entry into the world of finance; it does not delve too deeply into subjects, but provides further reading suggestions for persons interested in further exploration of the topics. All subjects are explained on a basic and digestible level, making the book highly accessible to all. His most salient points can resonate with everyone: Live below your means and do not fall into a “rich doctor” lifestyle. Be debt averse and use bonuses to pay down existing bills. Save a large portion of your salary and maximize your retirement contributions. Minimize superfluous purchases.

For readers who thirst for more knowledge on how to achieve “the good life” and strive to become a PAW (Dahle’s term for prodigious accumulator of wealth), the blog The White Coat Investor (http://www.whitecoatinvestor.com) is a great resource.

For further reading, please check out the Academic Life in Emergency Medicine (ALiEM) Bookclub blog post and discussion with the author (http://www.aliem.com/2015/aliem-bookclub-the-white-coat-investor/).

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http://dx.doi.org/10.1016/j.annemergmed.2016.05.014