

# MIND TO MIND

Creative writing that explores the abstract side  
of our profession and our lives

*Carol Wiley Cassella, M.D., Editor*

## Molding Metaphors

### *A Tribute to My Anesthesiology Mentor, F. C. Kumar, M.D.*

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“Be true to your work, your word, and your friend.”  
Henry David Thoreau

A properly matched mentorship has the potential to make a profound impact on the mentee. In my case, I met F.C. Kumar, M.D., or “Kumar” in the operating room during the summer of 2010, two weeks after a flood had destroyed pretty much everything he owned. Magnificently, he still managed to keep a smile and would say things that would brighten anyone’s day. Several weeks later, Kumar showed up to my house with a large watermelon that was almost as big as my kids. I am not totally sure, but I think this is when our mentorship-mentee relationship began. Our friendship grew quickly. He was an admirer of civility and reminded me that respect for each other is always what mattered most. He would talk endlessly about Mother Theresa, Martin Luther King, Gandhi, Thoreau and other greats. He had a notable ability to make *extra* time for his patients and use his knowledge about the arts to provide exemplary clinical care.

About a year and half after we met, Kumar died unexpectedly. In retrospect, one of the biggest lessons that he instilled in me was to never let go

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of our passions, especially those outside the field of medicine. Through his actions he taught that religion, poetry, philosophy, art, and music, are food for the soul. He also made it clear that this type of nourishment needs to be a priority because the solace it provides. Perhaps a civility to oneself.

Before his death, he began to suggest to me that I should resume making porcelain pottery because he knew it was my first passion. Creating wheel thrown porcelain was my beloved career before going to medical school. Undeterred by his suggestion, I didn't heed his advice right away. But my thinking changed quickly after his passing as Kumar's death was an abrupt wake-up call. After some encouragement from a resident mentee, I assembled a makeshift studio and began making pots. What I began to see was a likeness between pottery, teaching medical students and residents, medicine and anesthesiology. I would have never imagined this serendipitous association 15 years earlier, but time and experience allows a more mature level of thinking.

I have been asked many times to explain the superficial differences between clay and medicine. It is a difficult task because I reckon that the similarities go much deeper. Kumar would understand this. There is an art to both medicine and pottery that cannot always be quantitatively or even qualitatively measured. The discipline and humbleness of being a potter and physician are similar. The hours are long and a lot of what we do goes unrecognized. Scientifically, clay provides many applications in the medical field.



Kaolin, a type of clay, provides surface activation for the activated clotting time (ACT) or speeds up the thromboelastogram process. Additionally, kaolin has therapeutic effects as an antidiarrheal. Porcelain type material is used in the transesophageal echocardiogram probes. Clay can be used as a chelator removing heavy metals from a person's body. Dentistry uses porcelain for implants and dentures. Clay's utility in medicine does not end here.



Most people do not know that pots are personified. They have mouths, lips, necks, goiters, shoulders, bellies, and feet. Lids act like hats, spouts like noses or other appendages and handles like arms. Pots are skinny, voluptuous, heavy, and light. The handcrafted cup nurtures like a mother's bosom. Some cultures believed that bowls and vessels possessed souls. To free these spirits, the bottoms of bowls were shattered. Some cultures look at clay as insignificant while others hold it with the highest prestige. In Japan, from what I've been told, a potter is regarded as high in society as being a physician.

In my quest to master teaching anesthesiology, I use clay as a metaphor. It is a Kumar-like way to combine art and medicine. It is the physical properties of clay that taught me more; as malleable as our students when they have the willingness to listen and we the patience to teach. Yes, I admit this idea probably verges on Zen or some fringe state but this analogy is pretty resilient. Let me explain further.

Some clay has a rough character; the finest, porcelain is smooth and pristine. Similarly, our learners and patients are not all from the same clay and should be treated as such. Each learner needs an individualized curriculum with special attention. Clay can be pushed, but only gradually, just like our medical students and anesthesiology residents. Knowing when to back off to avoid overstimulation is a skill in itself.

Clays have memories, some stronger than others. Accidental dents that were "fixed" while the clay was wet sometimes reappear or crack during the firing. We should keep this logic in mind when dealing with teaching residents or patients. The master potter knows that clay has certain time frames when the clay can be shaped and molded optimally. Our job as educators, which we all potentially are, is to find those most optimal times.

Tom Coleman, a master potter, states that making the best pots requires learning about our history and our context. To understand what has already been done. To

know where to pick up. It is surprising in our field how many do not know who the Aldretes, Apgars, or Gabas are. I agree with Coleman, knowing our past helps us look to the future. Historically, the potter educated the public about the difference between the handmade pot and that which was cranked out by industrialized means. In fact, this movement is said to allow the existence of potters through the industrial revolution. A recent senior project that I mentored mirrored the potters movement. It focused on educating dignitaries and the public about anesthesiologists to help preserve our specialty. We need to be more like the potters that resisted industrialization or in other words treating all patients the same.

Shoji Hamada, a master Japanese potter, taught his young apprentice to *live life* to make the best possible pots. Kumar, a master physician, through his actions echoed to me a similar sentiment that has been vitrified. I witnessed firsthand his appreciation of the arts and the “living of life” as he sang the lyrics of Johnny Cash or recited a poem from memory to make patients smile. He always fought against the routine, but at the same time provided the gentle guidance of a potter’s hand.

See Supplemental Digital Content 1, <http://links.lww.com/ALN/A957>, for pictures and descriptions of some porcelain pottery.