Staying Present: Mindfulness in Health Care

The long nights of studying, and the culture shock of medicine, had left me feeling exhausted and uncertain as I completed first year of medical school. Had I made the right decision? How am I possibly going to learn everything that I need to know to become a doctor? Fortunately, I had scheduled a mindfulness retreat at Plum Village meditation center in France that summer.

I met with Sister Dang Nghiem, a former physician-turned-Zen-nun, and author of *Mindfulness as Medicine*, who has become a teacher and inspiration for me. I asked her, “How can I find time to develop my mindfulness and meditation practice when I have so much medical studying to do? I feel like every piece of medical knowledge I learn could save someone’s life someday, and there aren’t enough hours in the day to study, much less to practice meditation.” She breathed calmly, paused, and turned to me. She said, “Think about the lives that you might be able to save if you can learn to be truly present for every person you are caring for.” That moment was a turning point for me, and I made the commitment to do my best to bring mindfulness into the heart of my life as a human being, and my training as a healer.

**What is Mindfulness?**

The word that is translated into English as “mindfulness” has a history thousands of years old, going back to Buddhist meditation and other Eastern contemplative practices. That said, cultures throughout the world have something like mindfulness, even if they don’t use that word. Dr. Jon Kabat-Zinn at the University of Massachusetts defined mindfulness as “Paying attention in a particular way: on purpose, in the present moment, and without judgment.” “Mindfulness” is also sometimes translated as “heartfulness” which highlights the inherent mindful quality of compassion. Decades of research have shown mindfulness to be a powerful tool for helping people cope with a variety of stress and illness, including chronic pain, anxiety, depression, and cancer.

Mindfulness is about staying present with whatever is happening in the present moment. It means not turning away from pain and suffering. I sometimes describe mindfulness as “Paying attention in a particular way: On purpose, in the present moment, and with unconditional love.” In this spirit, I try to stay present with every situation with compassion, whether it is an easy situation or challenging. Cultivating mindfulness can involve “formal” practices like sitting meditation or walking meditation, where we stop whatever else we are doing and focus on mindful awareness of our breath or our bodies. That same mindful presence can be practiced any time, anywhere, including daily activities in the health care setting such as walking down the hospital corridor. Sometimes, before entering a patient’s room, I stop, take three slow mindful breaths and remind myself, “This person is suffering. This is a sacred space that I am about to enter.” This simple practice puts me in an entirely different frame of mind as I begin the next clinical encounter.

**Why Mindfulness for Health Care Providers?**

One common stereotype of mindfulness is someone who spends their time navel-gazing, is self-absorbed and oblivious to the world. That image could not be further from my own experience of mindfulness as an active practice that helps me to engage in my clinical work with more focus and attention and less distraction. Dr. Michael Krasner and Dr. Ronald Epstein at the University of Rochester have developed and researched mindfulness programs specifically for physicians. In a landmark study published in the Journal of the American Medical Association in 2009, they demonstrated that physicians who undertook a tailored 8-week intensive mindfulness training program showed less burnout, better mood and emotional stability, and improved physician empathy. Dr. Epstein and Dr. Krasner proposed that mindful practice in medicine can impact three inter-related areas of care: (1) Quality of Care (safe, timely accessible, effective, patient-centered); (2) Quality of Caring (empathy, compassion, responsiveness); and (3) Clinician well-being (improved mood, lower burnout).

**Mindfulness practice improves the quality of care.** When I was in medical school and learning how to conduct emergency “Code Blue” situations, a wise teacher told me to “Check your own pulse first” – even before checking the patient’s pulse! This lesson

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Mindful practice improves the quality of caring. Sometimes lost in our high-tech, intervention-focused health care system is the ancient healer’s art of compassionate and empathic communication with patients. Master clinicians know, however, that earning trust and effectively caring for patients who are experiencing serious illness requires a high level of compassion—the capacity to face, stay present with, and relieve, suffering. A trusting and compassionate clinical relationship is necessary for optimal communication and care. Moreover, the “bedside manner” of the clinician has an enormous impact on how patients experience illness and healing.

One of the most powerful (and challenging!) of mindfulness practices is mindful communication. When I’m listening mindfully to a young person or family, instead of interrupting or forcing through my own agenda, my primary intention is to be present with them. I want to really hear what they are saying, to attend to what they are experiencing emotionally, and allow them to feel fully heard and understood. When I am speaking mindfully, I bring a heightened awareness to what I am saying, in the moment that I am saying it, with the primary intention of generating compassion and relieving suffering. In my experience, I’ve found that the practice of mindful communication has helped me to manage some extremely difficult situations with youth and families in crisis, and to defuse and de-escalate conflicts in the health care setting.

Mindful practice improves clinician well-being. Studies have shown that almost 50% of physicians experience significant symptoms of burnout at some point in their careers, and are at significantly increased risk for suicide and substance abuse.

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Resources

For me, developing my mindfulness practice has become a lifelong path full of joy and reward. Those new to mindfulness might enjoy Dr. Jon Kabat-Zinn’s Mindfulness for Beginners, or Thich Nhat Hanh’s The Miracle of Mindfulness. Dr. Ronald Epstein’s Attending: Medicine, Mindfulness, and Humanity is a masterpiece that makes the case for bringing mindfulness into the practice of health care. That said, reading about mindfulness is no substitute for experiencing it yourself, with the guidance of a skilled and experienced teacher. I recommend taking an eight-week Mindfulness-Based Stress Reduction (MBSR) workshop http://mbsrbc.ca/ or a mindfulness course or retreat tailored to health care providers. For those interested in mindfulness for teens, I offer my website http://mindfulnessforteens.com/ and my book The Mindful Teen: Powerful Skills to Help You Handle Stress One Moment at a Time. — Dr. Dzung X. Vo
compared to their peers. This is hardly a surprise given the pace and pressures of the modern health care environment. Adding to this, we are confronted with pain and suffering among people we serve, on a daily basis, and to a degree that is hard to imagine for most of our non-medical family and friends. These experiences put us at high risk for “secondary trauma.” If we do not know how to handle these experiences wisely, we risk “absorbing” them physically and psychologically, which degrades our physical and mental health, and impairs our ability to be at our best in our clinical work and in our lives.

For me, mindfulness practice is a powerful tool for me to take care of myself, and to increase my own resilience. When I practice mindful walking on the way to work, I can let go of my anxious “to-do” list for the day, and arrive more refreshed and alert. When I practice sitting meditation after the death of one of my patients, I hold my heart in my hands, breathe with self-compassion, and allow myself to experience, and let go, of whatever emotions are arising in me in that moment. This allows me to continue serving as effectively as I am able to.

As clinicians and healers, our clear and compassionate presence is one of the greatest gifts that we can offer to our patients – just as much as our scientific knowledge and our technical skills. We have the opportunity to tap into, and strengthen, this capacity through the practice of mindfulness. Mindful providers will heal the world.

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Patient/Parent Advocate- Oncology/Hematology/BMT Program

My name is Suzanne Dunbar and I am so honoured to have the position of Patient/Parent advocate for families in the Oncology/Hematology/BMT program at BC Children’s Hospital (BCCH). As a past oncology parent for 6 1/2 years, I know firsthand the challenges that families face. It is comforting for parents to speak with someone who has been where they are now. I describe my job as being a bridge between patients/parents and the health care professionals. I advocate for patient’s and family’s needs and am the liaison between parents and the health care team to develop and nurture a cohesive and collaborative relationship. Also, I am the voice of patients and families when they have concerns or questions which I then can provide feedback to our team. I work closely with the psychosocial team to best determine a family’s needs and then direct them to resources for support. I organize Teen and Family programs throughout the year. Along with our recent partner organization, Power To Be, we collaborate on 3-4 trips per year for the Teen Adventure program to places like Whistler and Tofino. About 10-12 teens participate in each trip. Siblings are welcome if spaces are available. Two medical staff from the Oncology/Hematology program volunteer their services. Each trip is 4-5 days long and usually happens in the spring, summer and early fall. Here is a quote from one of our teens who attended a trip:

“I really enjoyed the activities but my most memorable time was the last night when everyone stayed in the loft and talked. The bonding and sharing of feelings and emotions was honestly the rawest yet healing experiences in my whole life.”

To hear this from teens shows me the importance of these trips. For families, I organize events such as rock climbing, theatre tickets, and invite speakers to discuss topics such as taxes, social media and nutrition for parents. Various topics and speakers are arranged based on the needs of parents and caregivers. Each event has been attended by 8-10 families. These events bring patients and families together and provide a relaxed venue to get to know one another and share their experiences. All of these events are supported by the generous donors from Balding for Dollars. I am thrilled to be a part of the Oncology/Hematology/BMT care team!
Balding for Dollars (BFD) is head shaves, chopped locks and other FUNdraising events initiated by parents and staff, friends, families, teams, clubs and communities touched by childhood cancer and blood disorders and is part of the BC Children’s Hospital Foundation community events. This one day event “Shave for the Brave” has grown to include the many independent community events that are held throughout the year, all in support of children with cancer and blood disorders. BFD provides support to patients and families, child life supplies, teen and family programs, research at BCCH, and Survivorship Education and Bursaries. Any teen or young adult who has had his/her treatment here in the Oncology/Hematology program at BCCH can apply for a bursary for post-secondary education. Approximately 30-40 bursaries are granted per year.

This year’s Main Event for Balding for Dollars is on May 13, 2017 from 11am-4pm at the BC Children’s Hospital Research Institute. Please come join the party as we cheer on those who are cutting their hair and shaving their heads in support of the oncology/hematology patients and their families. There will also be good food and amazing entertainment.

To register http://www.bcchf.ca/events/event-calendar/2017-balding-for-dollars/

We have recently revised the disease specific long term follow up guidelines for patients who have completed their therapies. They are posted on the webpage http://www.bcchildrens.ca/health-professionals/clinical-resources/oncology

If you are interested in organizing an event in your own community, please visit Balding for Dollars event package webpage http://baldingfordollars.com/event-package/ or contact Christine Tulloch, Balding for Dollars Admin Assistant at ctulloch@cw.bc.ca for more information.

Our mission is to improve the health and welfare of children in BC with cancer and blood disorders through research, education, and care.

THE PROVINCIAL PEDIATRIC ONCOLOGY/HEMATOLOGY NETWORK

The Network is an interdisciplinary organization whose goal is to ensure appropriate diagnosis, management, follow-up, and end-of-life care for pediatric patients with malignancies and blood disorders.

The Network supports community hospitals and practitioners, and develops partnerships with other health care facilities to enable seamless and integrated care for patients and families on treatment and off treatment.

It will further develop and enhance the research programs of basic, translational, and clinical research to better childhood cancer control and improve outcomes for these patients and their families.

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