

# The Cauldron of Life Experiences that Creates the Geriatrician: a Personal Perspective\*



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None of us are born to be physicians, although some parents claim that ever since their child was a toddler they seemed drawn to medicine. Maybe they played “doctor” or saw a parent who was a doctor at work, or maybe they watched television shows in which a doctor was the “hero.” For most of us though, it is a combination of happenstance, external influences, and internal drive, that results in the choice of medicine as a career and in our choice of specialty.

For me, there were many factors that influenced the sort of doctor I would become—not so much the specialty I chose, but the personal qualities and values that would become the core of my medical practice. Many factors molded my personal qualities, attitudes, and mode of human interaction and practice as a physician. The choice to become a doctor was probably determined by my love of books. But in addition to my penchant for reading, I also recognize the impact of the childhood experiences that drew me to medicine.

I was raised just two blocks from the ocean at Brighton Beach in Brooklyn, New York, where I was influenced by many family and external factors. My maternal grandmother, a seamstress from Lithuania who was an active member of the Ladies Garment Workers Union, shared a bedroom with me and my sister until I was 12 years old. Of her many wonderful qualities, one that influenced me was the fact that she had a beautiful voice and sang in a Yiddish choir. She would take me to many musical performances which helped give me a life-long love for music.

Due to the need to visit a dentist out of my neighborhood, I was lucky enough to have to go on my own out of my neighborhood on the subway. There I was, at nine years old, realizing that the world was now open to me via the subway system. As a budding photographer, I began to roam the camera stores around the 34th street section of Manhattan, to

the point that the salespeople at the venerable Willoughby’s camera store helped me buy a \$3 lens cover. They let me handle cameras more expensive than I could afford, with the anticipation that one day—which of course did happen—I could afford to trade up my more basic camera. Eventually, I had a very sophisticated secondhand Zeiss® Contax which, as a collector’s item, is still in my possession.

One of the great influences on my childhood was the experience of going to the local public library every Saturday with my father and younger sister. We lived in a very financially modest home so we depended on the library for many resources. We would find our books while my father read international newspapers. When we left each week, carrying the four or five books we could take home until the following Saturday, my father would say the same thing, “The library is the greatest invention of mankind”—to which we learned to respond, “Why Daddy?” He would then say, “Because in it is all the knowledge of the world.” The love of reading started before the library visits through bedtime stories, a tradition I followed with my own children.

Of the many influential factors that affected my life substantially was the junior high school I attended. It was out of my neighborhood—so I learned again independence in public transportation. It was a school with a more diverse student population than my neighborhood school and had two unique “experimental classes.” The first one was typing, for both boys and girls—quite novel in mid-1950s (when the Brooklyn Dodgers were still playing in Ebbet’s field in Brooklyn). My initial reaction (which I expressed to my teacher in my best Brooklynese) was, “But teacher, typing is faw goils.” It was probably the single most important course I took in junior high school as it prepared me for high school and university papers, and was used for hundreds of letters home, as well as for reports during medical school years. Of course when computers came into being, I was one of the few doctors of my age who could actually type quickly on the new digital keyboards.

The second of these special classes was called home economics—to which I probably said the same thing about “goils” to my teacher. I learned to cook and use a stove and

\*This blog was developed as part of CGS efforts to share the relevance of medical humanities to geriatric practice. In Dr. Gordon’s case, his love of books affected many parts of his career, including the path that led him to be one of Canada’s best known geriatricians.

many years later, during a period as a single father of two pre-teenage children, I was able to run the household. Were these two courses high up on the list of academic blockbusters or courses in preparation for studying medicine? Of course not. They allowed me, however, to pre-empt the digital computer age via typing, and cope with single parenthood for a period during the early days of my medical practice.

My high school education also played a profound role in my becoming a doctor. I went to a special engineering high school (Brooklyn Technical High School) with the thought I that, like my father I would study engineering. I was good in the sciences and math and loved to “make things,” so I thought engineering would be perfect for me. “Tech” as it was called, was an outstanding school. After a day of academic-focused classes, we had about two hours of “shop”, and at the end of the years of school we all knew how things worked and could fix or build most things necessary for life. But the most important thing was that, despite being in an engineering high school, the decision to study medicine was almost a natural outcome of that school experience.

I have been an avid reader all my life. Towards the end of high school, having already put in my applications for engineering programs at various universities, I came across the book, *The Citadel* by A.J. Cronin. It’s the story of a man becoming a doctor in Wales and England prior to the National Health Services. Why I decided to read it I do not know, but it became the key factor in my rather sudden decision to study medicine instead of engineering. It had such a powerful impact on my plans that, within a short period of time, I told my parents that I had decided to do pre-med instead of studying engineering—to which they expressed somewhat reserved pleasure. As it turned out, I accepted a place in one of New York’s free public colleges, Brooklyn College, which allowed me to pursue a pre-med curriculum without any financial strain on my family. What turned out to be a hidden plus of going to Brooklyn College was that it was, in essence, a liberal arts college. Although I was on the books as a chemistry major in the pre-med stream, I was obligated to take a whole range of introductory (“101” courses) in English literature, classics, history, philosophy, and social sciences.

When I look back on my university education, I attribute my “101” courses as the underpinnings of what became the most important areas of education during those formative years. From the English course came an increased and deeper love for reading, especially a great respect and affection for Shakespeare. I developed an intense appreciation for philosophy, which ultimately led me into pursuing a master’s degree in ethics a long time later, after years of clinical medicine. Social science studies led to my appreciation of cultures and started my understanding of health-care systems, which has played a major role in my late life educational pursuits and has provided a focus for my career in medical writing.

Many of us find that there is an event that changes everything. Mine was the professor in my social sciences

course, who spurred on my desire to travel. After working on my parents for a year, they granted their permission and support to take time off during my junior (3rd) year of college. I travelled around Europe, with the help of a Renault Dauphine, a car I could bring home tax-free in those days. It was those six months meandering around Europe that resulted in the decision to try and undertake my medical studies in Europe rather than in the United States. It was a complex process to apply and then convince my parents that it was a good decision (using financial benefits as the main argument). In the end I was accepted at the University of St. Andrews, Dundee campus, into the second of a six-year medical school program. From the moment I arrived at Glasgow airport, my life changed in personal, educational, and ultimately professional domains. The bus ride to Dundee on a typical Scottish rainy day sealed my fortunate fate.

As mentioned, the novel *The Citadel* made me think about practicing medicine. Looking back, I can identify many other books that played in role in my getting to medical school, and which would affect my understanding of many aspects of life and many of my professional values. Among them are:

*Look Homeward Angel* by Thomas Wolfe, one of the great American writers and novels—on the process of growth and development of a young man yearning to leave his home and find his way in the world.

*Portrait of the Artist as a Young Man* by James Joyce—a tale of coming of age and the tension between the Catholic religion and the desires of the flesh and coming to terms with both.

*King Lear* by William Shakespeare—one of the Bard’s great plays, a tale of family conflict, duplicity, and subterfuge by family members (perfect for a geriatrician).

The philosophical writings of Emanuel Kant had a major impact on my later pursuit of medical ethics and are still a foundational part of my understanding and basis for teaching ethics.

*The Iliad* by Homer—one of the greats of the classical Greek writings. Some say it is the basis for all western literature; certainly a great work that, like other classical works, has withstood the passage of centuries.

## CONFLICT OF INTEREST DISCLOSURES

The author declares that no conflicts of interest exist.

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