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Man of Many Missions

Daniel P. Sulmasy, MD, PhD, is a physician and an ethicist, a writer, teacher and New Yorker. He's also a Franciscan friar.

by Vida Foubister, AMNews staff

It's not yet 8:30 a.m., and Daniel P. Sulmasy, MD, PhD, needs to make his first transition. "You can wait here. I'm going to go into the nearest phone booth," he says as he rushes off down the hall of the St. Francis of Assisi Friary in Manhattan.

Within minutes he's back. The long, dark brown habit worn by Franciscan friars has been replaced by the casual and conservative garb of an academic -- patterned tie, yellow shirt, plaid sport coat and brown pants.

Keeping up with Dr. Sulmasy on the 20-block walk down Seventh Avenue from the friary to Saint Vincents Hospital and Medical Center, where he chairs the John J. Conley Dept. of Ethics, leaves one breathless.

Like a true New Yorker, he stares down cabbies who might dare run him over and judges if he has time to cross the street by how many potholes will slow oncoming traffic's arrival at the intersection.

Dr. Sulmasy keeps up the pace as he goes about his day as a physician, an ethicist and a friar. He traverses between multiple professions with ease, from the church to the academic office to the bedside to the medical college to the clinic.

Jeremy Sugarman, MD, MPH, who was a fellow with Dr. Sulmasy at Johns Hopkins School of Medicine, struggled to find an analogy to describe his handling of these multiple roles.

"Juggling's not quite there because he really hangs on," said Dr. Sugarman, director of the Center for the Study of Medical Ethics and Humanities at Duke University Medical Center in Durham, N.C. "He remains committed to medicine, medical ethics and his faith."

Dr. Sulmasy is in his hospital office before 9 a.m. After a couple hours of academic work, and a quick espresso, it's time for another transition. The white doctor's coat goes on and he's ready for rounds. Once a week, Dr. Sulmasys day begins with shouts of "Two lines for coffee. Step to the left, two lines." It's an attempt to keep an orderly flow among the homeless people who gather at the friary at 6:30 a.m. each morning for sandwiches and coffee.

In contrast, there's peace and quiet within St.,Francis of Assisi Church -- steps away from the busy streets of New York's Chelsea neighborhood. Dr. Sulmasy joins an eclectic group of worshippers -- from Wall Street bankers to homeless people -gathered for Mass, communion and prayers.

This is one of Dr. Sulmasy's worlds. The other is medicine.

A day at the hospital might include an ethics committee meeting. Recently, the issue of language -- calling people patients and not consumers or covered lives -- was discussed as a means to interest the administration in organizational ethics.

Later in the day, at the faculty practice, there's a drop-in patient with a never-ending cold who admits she's a social smoker. "That's becoming a common New York answer: 'When I have a drink,' " he responds, adding that he'll leave it to her primary care physician to counsel her further.

On another day, there's academic paperwork and hospital rounds, where he communicates with one patient in "Spanglishiano" -- Spanish heavily influenced by his better knowledge of English and Italian. Then a 30-mile drive north to Valhalla, N.Y., for an ethics lecture on privacy at New York Medical College, where he is the director of the Bioethics Institute. Afterward, he gathers a group of first-year medical students around him to discuss whether a physician should disclose a patient's positive genetic test for BRCA1 to her three sisters against the patient's wishes.

Many in today's secular society might see a duality between the two worlds he crosses. Not Dr. Sulmasy. "It's as natural as breathing for me to move between the religious side of things and medicine," he said. "What did Jesus do during his ministry? He healed people and he prayed."

Dr. Sulmasy, 45, was born in Flushing, Queens. As a Catholic schoolboy, he was inspired by the story of St. Francis of Assisi -- particularly Francis' conversion through embracing a leper that, according to legend, turned into Christ.

A dual calling

By the age of 18, Dr. Sulmasy believed he had a religious vocation, possibly as a priest. Then, as a college freshman, his early interest in ecology shifted toward a science that he could use to serve people: medicine.

Once in medical school, the profession's failure to care for dying patients with compassion and dignity led him to ethics.

"The only thing you can really do is be present in this time," he explained. "It says you care. It says that this person is still a member of the human community even as the bonds that keep us and them together are slowly dissolving.

" His decision to pursue both a religious vocation and medicine surprised many, including his family.

"There's a line from my father: He said at one point, 'We sent you to those Catholic schools, but we didn't expect you to take it so seriously,'" Dr. Sulmasy said.

At each step along the way, Dr. Sulmasy had to forge a path to bring his chosen professions

together -- an experience he describes as "disconcerting but fun."

Even though there are other sister, brother and priest physicians, their numbers are few enough that some in medicine were "freaked out" by his decision to take a leave from training to become a Franciscan, Dr. Sulmasy admitted.

Then, coming out of his internship year, the friary had to make an exception to accept someone with so much personal debt.

"The two most conservative institutions known to humankind, medicine and the Catholic Church, compromised on my behalf," Dr. Sulmasy jokes. Then, more seriously, he adds, I know God's there somewhere."

Few physicians have pursued rigorous training in moral philosophy. But Dr. Sulmasy's ability to bring medicine and philosophy together is inspiring medical students to follow in his footsteps.

"He is able to step back from the bedside and analyze the dilemmas of both physicians and patients more systematically," explained Lisa Lehmann, MD, an instructor in medicine and medical ethics at Harvard Medical School. Dr. Lehmann was a student at Johns Hopkins when Dr. Sulmasy was chief resident.

Spirituality in medicine

Despite the current surge of interest in spirituality and health care, Dr. Sulmasy rarely blurs the boundaries between his personal life as a friar and his professional life as a physician and ethicist.

Most of his patients don't know that he's a Franciscan. "There are things that patients probably want to tell doctors that they don't want to tell their priests and vice versa," he explained. "It's helpful to have those roles separated."

At the same time, he strongly believes that physicians need to be more sensitive to the spiritual needs of patients. His book, *The Healer's Calling: A Spirituality for Physicians and Other Health Care Professionals*, calls on them to recognize the transcendent meaning of their work.

"We need to offer patients the opportunity for healing that's more than simply the physical and recognize that the illness they're experiencing is more than simply a disturbance in their biochemistry or anatomy. It's a disturbance in them as persons," he said.

The manner in which Dr. Sulmasy treats patients embodies his faith without raising it, explained Janet Yoon, a third-year student at New York Medical College. "Though he doesn't wear the cloth [in his practice], you can see the representation of that in what he does and how he acts."

This also rings true in his ethical deliberations. "The positions he arrives at are rarely in conflict with his theological perspective, yet he gives as strong philosophical and secular arguments for them as theological ones," said James Tulsky, MD, associate professor of medicine at Duke

University Medical Center.

Yet his faith remains at the core of who he is. Lynn Jansen, RN, PhD, who works with Dr. Sulmasy in the ethics department at Saint Vincents, described a situation in which, after a contentious ethics consult, he prayed with a woman whose son was dying. "These are human beings that we're letting go, and human beings are left behind," she said. "He was reaching out to her as a spiritual person."

This compassion is something that Dr. Sulmasy's PhD mentor, Edmund D. Pellegrino, MD, emeritus professor of medicine and medical ethics at Georgetown University, in Washington, D.C., also has witnessed in his practice. "He is, as a human being, sensitive and responsive to the predicament of being ill and facing the possibility of one's own death," Dr. Pellegrino said.

From St. Francis to "Wit"

Dr. Sulmasy's research and writing hits on topics that are as varied as his professions.

His first academic paper was on the illness he believes took St. Francis' life, a tuberculoid form of leprosy unrecognized by physicians.

Late in 1999, Dr. Sulmasy wrote an article for the Archives of Internal Medicine that found physicians were willing to lie to third-party payers to secure care for their patients. Though he admitted it was a small study and far from his best work, the article hit a nerve with both patients and physicians and their growing disillusion with managed care.

Much of his empirical and philosophical research has focused on ethics education, end-of-life care and cost containment in medicine.

One recent study, which he refers to as the "bioethics version of 'The Newlywed Game,'" put patients and their surrogates in separate rooms to answer questions about which end-of-life treatments the patient would want. Right now, he's looking at how people's decision-making preferences change during a terminal illness.

A more topical paper that recently set a popular ethics listserv on fire explored the case of the conjoined twins in Britain. Last year the court there ruled that the children must be separated against their Catholic parents' wishes, even though the operation would save the life of one child and cause the death of the other.

"Everybody got this wrong," said Dr. Sulmasy, whose PhD thesis was on the distinction between killing and allowing to die. "My view was that the Catholic teaching would allow either decision to be made, and good secular ethics would allow either decision to be made. It really was a case for the parents to decide."

Another, in press at the Journal of General Internal Medicine, came to the same conclusion about the profession's response to the play "Wit." In it, Vivian Bearing, PhD, a professor of English literature, comes to grips with her cancer, her life and her death.

"When doctors see it as a play about themselves, they miss the point," he explained. "They won't be able to figure out how to improve the care of the dying until they've figured out that it's about being human."

Scratching the surface

Dr. Sulmasy draws both intellectually and spiritually from his bedside experiences with patients.

"He's one of the few people who has made me want to be a doctor," said Kari Esbensen, an MD-PhD candidate at Georgetown University. "He does it just for the mission of serving people."

That's true not just figuratively but literally. Dr. Sulmasy's salary and any fees he receives from numerous invited lectures go directly to the friary. His work earns him a monthly allowance of \$200.

Dr. Sulmasy, however, is far from confined by either his long hours or limited means. "It's amazing how many levels he operates on," Esbensen said. "You know him for years and you think you know all about him and then, all of a sudden, something else pops up."

Say, for instance, that Dr. Sulmasy has been a "fanatical fan" of the Green Bay Packers since he was a small child. Or that despite the illegible handwriting in his patients' medical records, his calligraphy is beautiful. And that, in addition to peppering his conversation with quotes from Immanuel Kant to T.S. Eliot, he writes poetry.

"If you were to hear of all his degrees, you would not understand that he also has a keen interest in the arts and in laughter," Dr. Sugarman said.