

BOOK AND MEDIA REVIEWS

Family Medicine Editor's Note: This issue of *Family Medicine* is the last issue for which Cathleen Morrow, MD, will serve as editor for the Book and Media Reviews column. During the past 7 years, she has read and edited hundreds of reviews, bringing grace and wisdom to her work. Our journal and our discipline owe her a debt of gratitude. Beginning with the next issue, William E. Cayley Jr, MD, will assume these duties. Please welcome Bill to the journal's editorial team. He has tough shoes to fill!

John Saultz, MD
Editor, *Family Medicine*

Editors Note—Farewell

This is my final opportunity to rant about books, at least from the exclusive perch of editor. I have been editor of the Book and Media Reviews section of *Family Medicine* since 2005, but with this issue I pass the baton to my able associate editor, Bill Cayley, MD.

Editing the Book Reviews column has proven to be more fun and more challenging than I expected. The more fun component is that, as all writers know, it is much easier to edit others' writing than to create your own. I took genuine pleasure in finding cleaner or more effective ways to express authors' thoughts, and the act of clarification is one of the more satisfying exercises in our confused and chaotic world. Elegance of phrasing is an art and one that gives me particular pleasure. In that sense, I will miss editing the book reviews. On the other hand, it takes time, and new work responsibilities and challenges mean that squeezing in that time has become increasingly difficult. It is also the case that I have done it long enough. Seven years is plenty, and it is time to get out of the way and let others grow this section of the journal.

Another benefit has been the relationships and friends I have made along the way. Many of those who have written for the Book Reviews column have become as trusted friends, even if we have not met. I have enjoyed those relationships and getting to know some of you at meetings. I thank the many steadfast reviewers who have met deadlines, written clearly, and responded promptly, even when I have been late, lost reviews, or been otherwise disorganized. As for the group who still owe us a review, you know who you are!

My earnest thanks to Barry Weiss, MD, former *Family Medicine* editor, who "hired" me in the first place; to John Saultz, MD, current *Family Medicine* editor, who spared the Book Reviews section in the reconfiguring of the journal and allowed us to carry on; to Bill Ventres, MD, who stepped in to help when I was drowning in the complexities of putting it all together; and to Bill Cayley, MD, who has carried on with quiet and effective efficiency. However, perhaps the greatest thanks go to Jan Cartwright, STFM publications assistant, an unsung hero of the Book Reviews section and the entire journal. Jan is the one who brings it all together, pulls all the pieces into the whole, sends out the galleys with plenty of notice, and gently reminds me of deadlines. She has put up with more chaos from me than I care to admit, particularly before I gained an associate editor, and she has done so with grace and good humor. Thank you, Jan, for all you do for the journal.

Early on in my career as editor I wrote an opinion piece about the relevance of books in the electronic age, attempting to refute the ongoing clamor that continues to this day that books are dead and that learning from them is irrelevant in medicine. I am happy to report that time has not proven this to be the case; reviewers still eagerly clamor for books when they are offered, and we continue to learn from them. I know my bias toward books has influenced the Book and Media Reviews section, and I can't say that I am sorry.

The following review is mine, co-authored with three preclinical students at Dartmouth Medical School (now the Geisel School of Medicine at Dartmouth). We tackled this book during Martin Luther King Jr. week at the college

and were inspired to share with each other our thoughts on the book and its implications in writing the review. It was particularly enjoyable to explore the generational differences in our reactions to the book, and a wonderful reminder of the power of books to connect us to important ideas and to one another.

Thank you for reading, for writing, and for continuing to contribute to this great big learning community we call family medicine.

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Seeing Patients: Unconscious Bias in Health Care

Augustus White III MD

Cambridge, MA, Harvard University Press, 2011, 319 pp., \$27.95, hardcover.



The inside cover flap in *Seeing Patients* begins with a provocative statement: “If you’re going to have a heart attack, an organ transplant, or a joint replacement, here’s the key to getting the very best medical care: be a white, straight, middle-class male.” This caught our attention

and suggested a book that would be an indictment of the bias inherent in the American medical system, with race as the lens of view. While bias in medical care has become a commonly understood and increasingly studied source of health care disparities, it is rare to find a book on the subject written by a well-known and distinguished leader from within the traditional health care field. However, the book turns out to be more of a memoir of one man’s experience with racism throughout his medical career, with only a few chapters on the racism that patients encounter.

Augustus White III, MD, is a professor of Orthopedics and Medical Education at Harvard Medical School and the first African American department chief at Harvard’s teaching hospitals. He has had a long and distinguished career within clinical orthopedics and research and a long academic career, from a

private prep school to Brown University as an undergraduate, Stanford for medical school, and Yale for residency training. He grew up in Memphis in a middle-class family and lost his physician father at age 8. His mother and aunt proved to be strong and determined role models of speaking up in the face of outright discrimination.

The book is, more than anything else, a lovingly written memoir of growing up in the Jim Crow South, coming of age in the radical and challenging times of the 1960s, and succeeding, as an exceedingly bright and hard-working black man, in the exclusive and tightly sheltered “old boys” network that was academic medicine within elite institutions in those days. The stories that Dr. White shares about confronting outright bigotry are chilling and a reminder of how much has changed. During his medical school interview at Yale, he was told that he had no chance for admission because Yale “[has] taken a Negro student this year, so there’s no use in your applying for next year. It’s pretty much one every other year” (p. 53). Remarkably, his overall tone remains polite and restrained, and all of us as readers kept waiting for the outrage that would have rightfully been his. Ultimately, Dr White is sent to Vietnam as a combat surgeon in 1966; in this chapter, and a subsequent one about a research fellowship in Sweden, his voice comes alive, finally expressing some anger and challenging the system that he has managed to work very effectively within for so many years.

The final three chapters of the book tackle the literature on bias in diagnosis and treatment, the health care disparity literature, and culturally competent care, outlining the CLAS (Culturally and Linguistically Appropriate Services) standards and covering familiar ground for readers with background in these areas. Much of this section is handled in many other resources more effectively, though Chapter 9 on Diagnosis and Treatment is an efficient synopsis of the literature on this topic and could be useful in illustrating the issue for a medical school class or cultural competency workshop.

The book has strengths and weaknesses. It spends considerable time paying homage to extensive networks of mentors who helped Dr White achieve his goals and not enough time speaking from a deeper and more personal level about what it meant to be where and who he was at such a pivotal time in our country’s history. We all kept wondering where his outrage and anger had gone to, yet his clear-eyed

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