



## **The Secret of Patient Care**

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Dr. Francis Peabody had all the bona fides of an early-day super hero of internal medicine. He was the first chief resident at Peter Bent Brigham Hospital in Boston and served at Johns Hopkins and Rockefeller Hospital. Dr. Peabody was a World War I Army field doctor and helped set up the first modern medical school in China. He was a founder of the Journal of Clinical Investigation.

But, at the age of 45—presumably in the prime of life and at the peak of his professional powers—Dr. Peabody became seriously and incurably ill. Suddenly, this legendary physician was a patient himself, an opportunity this die-hard teacher couldn't pass up sharing with his students.

Throughout the winter and spring of 1927 he delivered a series of talks about what it really means to be a physician. "Medicine is not a trade to be learned," he told his students, "but a profession to be entered."

"The treatment of a disease may be entirely impersonal," he said, "the care of a patient must be completely personal."

He called his final talk "The Care of the Patient." And at the very end he spoke the lines that I've known since I was a medical student. Speaking from a point of view more intensely private than anyone at the time imagined, he said, "the secret of the care of the patient is in caring for the patient."

Seven months later Dr. Peabody was dead. Here we are, 79 years later, talking about Peabody's great idea as if it were brand new! You'd think that by now patient-centered care would be a really big deal.

The Archives of Internal Medicine reported one recent attempt to measure how well physicians are practicing patient-centered care.<sup>1</sup>

Between 80 and 90 percent of physicians surveyed said they favored patient-centered care. Eighty-three percent said they support sharing medical records with patients, and 87 percent support team-based care. But they don't "walk the talk." In fact, fewer than a quarter of doctors practice patient-centered care.

The answer is in what the Institute of Medicine told us in "Crossing the Quality Chasm: A New Health System for the 21st Century." It's not that doctors need to work harder, but that we need to change how we work. The key to patient-centered care, quality, outcomes, cost, and changing physician behavior turns on converting our system from one of acute care to one of chronic care.

About 45 percent of us—suffer from at least one chronic health condition or about 130 million people.<sup>2</sup> Our total bill for all chronic care runs around one trillion dollars a year. That's almost half of everything we spend as a nation on health care.<sup>3</sup> If we can get control over chronic conditions then we'll get a lot closer to controlling and changing the system, rather than the system controlling and changing us.

But we're not going to find the answers to quality and performance in Washington. The answers can be found in the communities where doctors and health care professionals and patients look each other in the eye and talk to each other every day.

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<sup>1</sup> Adoption of Patient-Centered Care Practices by Physicians," Audet et.al., *Archives of Internal Medicine*, April 10, 2006. Commonwealth Fund national survey of 1,837 physicians in practice 3 years post residency and who were providing direct care of adults.

<sup>2</sup> Based on U.S. Census Bureau projection of United States total population of 291 million on June 1, 2003, with 45 percent having chronic conditions.

<sup>3</sup> National Center for Health Statistics estimated 2003 total health expenditures at \$1.7 trillion. Online at <http://www.cdc.gov/nchs/fastats/hexpense.htm>

We need to recalibrate health care market forces of supply and demand so that:

- The community understands and supports providers who improve the quality of care.
- The public and patients have easy, open access to information about the performance and the quality of their hospitals, health plans and physicians.
- Purchasers of care reward quality and performance.

It makes me wonder what Dr. Francis Peabody would think about all this. I imagine he'd probably conclude with the same words that closed his final lesson to his students – and to posterity.

“One of the essential qualities of the clinician is interest in humanity—for the secret of the care of the patient is in caring for the patient.”