



## What Doctors Feel: How Emotions Affect the Practice of Medicine

*Danielle Ofri*

[Download now](#)

[Read Online](#) ➔

# What Doctors Feel: How Emotions Affect the Practice of Medicine

Danielle Ofri

## What Doctors Feel: How Emotions Affect the Practice of Medicine Danielle Ofri

**A look at the emotional side of medicine—the shame, fear, anger, anxiety, empathy, and even love that affect patient care**

Physicians are assumed to be objective, rational beings, easily able to detach as they guide patients and families through some of life's most challenging moments. But doctors' emotional responses to the life-and-death dramas of everyday practice have a profound impact on medical care. And while much has been written about the minds and methods of the medical professionals who save our lives, precious little has been said about their emotions. In *What Doctors Feel*, Dr. Danielle Ofri has taken on the task of dissecting the hidden emotional responses of doctors, and how these directly influence patients.

How do the stresses of medical life—from paperwork to grueling hours to lawsuits to facing death—affect the medical care that doctors can offer their patients? Digging deep into the lives of doctors, Ofri examines the daunting range of emotions—shame, anger, empathy, frustration, hope, pride, occasionally despair, and sometimes even love—that permeate the contemporary doctor-patient connection. Drawing on scientific studies, including some surprising research, Dr. Danielle Ofri offers up an unflinching look at the impact of emotions on health care.

With her renowned eye for dramatic detail, Dr. Ofri takes us into the swirling heart of patient care, telling stories of caregivers caught up and occasionally torn down by the whirlwind life of doctoring. She admits to the humiliation of an error that nearly killed one of her patients and her forever fear of making another. She mourns when a beloved patient is denied a heart transplant. She tells the riveting stories of an intern traumatized when she is forced to let a newborn die in her arms, and of a doctor whose daily glass of wine to handle the frustrations of the ER escalates into a destructive addiction. But doctors don't only feel fear, grief, and frustration. Ofri also reveals that doctors tell bad jokes about "toxic sock syndrome," cope through gallows humor, find hope in impossible situations, and surrender to ecstatic happiness when they triumph over illness. The stories here reveal the undeniable truth that emotions have a distinct effect on how doctors care for their patients. For both clinicians and patients, understanding what doctors feel can make all the difference in giving and getting the best medical care.

## What Doctors Feel: How Emotions Affect the Practice of Medicine Details

Date : Published June 4th 2013 by Beacon Press

ISBN : 9780807073322

Author : Danielle Ofri

Format : Hardcover 232 pages

Genre : Health, Medicine, Medical, Nonfiction, Psychology, Science



[Download What Doctors Feel: How Emotions Affect the Practice of ...pdf](#)



[Read Online What Doctors Feel: How Emotions Affect the Practice o ...pdf](#)

**Download and Read Free Online What Doctors Feel: How Emotions Affect the Practice of Medicine  
Danielle Ofri**

---

## From Reader Review What Doctors Feel: How Emotions Affect the Practice of Medicine for online ebook

### Tim says

Articulate, insightful, an important read for clinicians and patients alike.

---

### Alyssa Foll says

Another great read by Dr. Ofri! I appreciate her candor and her vulnerability in writing about difficult emotions such as shame, disappointment, and failure. Anyone who works with physicians or offers care to physicians should read Ofri's works!

---

### Samantha Wickman says

Wow this book is fabulous. As a medical student, it deeply affected and changed me. Would recommend to any/all health professionals.

---

### Derek Emerson says

Physician Danielle Ofri's latest book, "What Doctors Feel," is part of her ongoing attempt to bridge the patient/doctor gap, as seen in her earlier works. While this latest work focuses on the emotions doctor's go through, Ofri's point is that those emotions impact care. Learning more about what doctors feel can help, not only the medical profession, but patients as well. What becomes alarmingly clear is that little is done to help doctors deal with the range of emotions that run through them. As a result, doctors suffer burnout, patients are treated with more distance, and the medical profession as a whole suffers.

As medicine becomes more high tech, there exists the possibility that the distance will grow. Ofri cautions us not to be fooled by such possibilities. "No matter how many high tech tools enter the picture, the doctor-patient interaction is still primarily a human one. And when humans connect, emotions by necessity weave an underlying network."

Much of the issue is found in the training of the doctors. Ofri shares the work of the 19th century physician and teacher, Sir William Osler, who encouraged young doctors to create a distance between themselves and the patient. The idea centers around the ability to make more logical decisions when the mind is not clouded by emotion. Osler did not want the doctors to treat their patients as mere subjects, but he did not want them distracted from making clear medical decisions.

That training remains, and Ofri uses stories to tell about the times when ignoring the complete care of the patient, in the interest of medical care, led to disasters. Conversely, she shares stories of when doctors have failed to keep that emotional distance, and as a result, better decisions were made. Nevertheless, she bemoans "the consistent and depressing observation that medical students seem to lose prodigious amounts

of empathy as they progress along the medical training route."

Not surprisingly, doctors hit the normal range of emotions. Grief, joy, sadness, guilt, shame, anger, and frustration are all part of the range any normal doctor, or person, will go through. What is different, is the intensity of the emotion. If I make an error in this book review, I may feel guilty, but I do not carry the weight of causing the death of someone due to that mistake. Doctors do.

Where the book wanders at times is when Ofri focuses too much on lawsuits and medical errors. But her point in addressing those areas point out the feelings of guilt and shame that doctors experience. Our tendency to sue for every real or supposed error, contributes to our own problems in the medical world. "Unless we can somehow defuse the shame and loss of self-definition that accompany the admission of medical errors, the gut instinct to hide an error will always be the first lynx to pounce upon the heart."

Ofri clearly wants us to address the emotional needs of doctors, for their sake and for the sake of patients. Doctors who feel safer making an emotional connection will provide better care for their patients. How we are to improve the system is not clear, but Ofri's intent seems to simply get the issue recognized. There have been inroads made, and she highlights the work of Herdley Paolini at Florida Hospital, where they have developed a program to address the emotional needs of all their staff. But, clearly, much work remains.

While doctors and patients will benefit from reading Ofri's work, perhaps legislators and hospital administrators, those with the most power to change the situation, should read this book. Regardless, Ofri's point is clear. When a doctor and patient interact, they are really two humans interacting. Emotions will be part of the relationship. Perhaps we should pay more attention to what those emotions mean in the medical world.

---

### **Tim says**

An important book to read if you're a doctor, or interested in becoming a doctor. Or if you know someone who wants to be a doctor. Or if you know a doctor.

It's even useful if you ever plan to see a doctor. In short: read this book.

As the title suggests, it's about the emotional life of physicians. Ofri connects that theme to many aspects of the medical-care world. The lucid, penetrating, thoughtful, heartfelt, even heartbreakingly honest prose gives us readers a banquet-for-thought about everything from our relationships to our doctors to the Gordian knot of the American health-care system.

---

### **Juli says**

I received this book as a First Reads winner on Goodreads. It is an eye-opening account of the many issues that doctors face while trying to give good patient care. As patients, we expect to go to the doctor, have them listen attentively to our concerns, accurately diagnose us, while having a respectful, caring bedside manner. Yet, maybe the doctor is in the middle of a lawsuit and questioning every aspect of the care they give. Maybe one of their patients just died and they are grieving. Maybe they just made a medical error and are feeling the

repercussions from that. Not only will these issues affect the doctor, but the emotions involved and how the doctor handles them will have consequences for all future patients of that doctor.

I wish every patient would read this book. As patients we expect all the best from our doctors without a thought of all the stress they have in their lives. The long hours they put in, the immense amount of knowledge they are expected to keep on top of, and the fact that they have lives outside of being a doctor, too! Doctors are human beings and have emotions just like the rest of us. I gave this book 5 stars because this is one that will stay on my mind for a long time. I found it very thought provoking. I will never have another interaction with a doctor without thinking of this book.

---

### **Sultana Alassaf says**

This was recommended by my sister and I think that it's a must read if you are a doctor or thinking of becoming a doctor. It demonstrates the human side of medicine it's really effective and touching. It shows you the doctor's emotions and feelings when they practice medicine, the fears, frustrations and nervousness that they face when performing their duties.

---

### **Laura says**

Disclosure: I received this book through Goodreads First Reads.

Dr. Ofri is an excellent writer who speaks directly from her heart, and gives great insight into the simple truth, all too often forgotten, that doctors are people too. Ofri examines a great many of the difficulties doctors face: scores of paperwork, difficult patients and/or families, insurance and legal problems, sleep deprivation. Doctors are in a difficult position; as she notes, medicine is one of the few professions where the general public (and most patients) simply do not allow you to make a mistake. It's nearly impossible, too, especially when doctors see so very, very many patients and have such a limited amount of time to spend with them. There simply isn't enough time in the day for a doctor to be at a patient's bedside as much as both they and the patient would like. Things get missed. Exhausted doctors (especially residents) make tiny errors which, if viewed from most other professions, would be forgivable. Doctors (and anyone in medicine, really) don't just run the risk of losing money as a result of mistakes; the loss of life is a very real possibility. How could that not be terrifying to all involved? And yet the last thing a patient wants to see is a frightened doctor (or nurse, or anesthesiologist, etc) so the medical professional must tamp that emotion down. All too often, though, that makes the doctor seem cold and removed. It's a very difficult line to walk.

Back to the issue of time: I've worked as a nurse both on inpatient floors and in the emergency department for several years now and see it all the time. Patients complain that the doctor "blew through the room", only stopping in long enough to check a few quick things, put an eyeball on the patient (so to speak), and then move on. It's frustrating for the patient who feels unimportant, and for the nurse who then has to explain what the doctor said and, frequently, hunt him or her down to pass on a question they didn't give the patient a chance to ask. I realize, of course, that the doctor cares about what happens to the patient, but it often isn't conveyed and so both the patient and nurse tend to forget that fact, I think. I know hearing the frustration in Ofri's words really made me pause and remember what I am ashamed to admit I allowed to drift from my conscious thought. Of course they care. That's why they wanted to become a doctor, just like that's why I wanted to be a nurse - to make a difference, to help, to heal, because we care about people as a whole.

Ofri uses facts and figures as supporting evidence, but weaves them in seamlessly so they don't come across dry at all. She also gives very real, very personal examples of every emotion she touches on and I don't doubt for a moment that every doctor has been in similar situations. I also loved how she used the ongoing story of Julia to emphasize the emotional reality of working in medicine. The story is beautiful and wonderful and heart-wrenching, as is, unfortunately, sometimes the case when caring for patients with chronic illness.

I absolutely recommend this book to anyone. People in medicine will be reminded that they're not alone in the emotions that so often come up. Patients and families will get some insight as to what it's like to be on the other end of the stethoscope. Touching, beautiful, though-provoking. A truly excellent read.

---

### **Cristopher Hernandez says**

This book is captivating due to the new perspective it offers. I found it uplifting at times, and depressing at others. Having read it now, I think I will always see the medical profession differently.

---

### **Andi says**

I just narrated Dr. Ofri's book for Audible and am so honored to have been entrusted with this beautifully written, important book. Whether you read or listen, you will come away from the experience with a much deeper appreciation for what our physicians and nurses go through as they begin and continue their careers in medicine. There were passages that brought me to tears, especially the passage about the nurse Eva and the infant she cared for.

As it happens, at the same time I was recording the narration, we found out that my 11-year-old daughter needed surgery involving an overnight stay in the hospital. While the condition was not at all life-threatening, our family was suddenly spending a great deal of time in the environment Dr. Ofri writes about so eloquently. During the time I spent with my daughter in the hospital, I talked with several people on the medical staff about this book. The overnight nurse told me that her own 18-month-old spent time in the ICU, and the experience forever changed her approach to nursing.

I've been recommending this book to friends and family as a must-read / listen. I look forward to Dr. Ofri's next book!

---

### **Bufo Calvin says**

The old terminology for how good a doctor was with patients was "bedside manner".

Now, of course, they rarely see you in your own bed...and "**hospital bedside manner**", "clinic manner", "telephone manner", "videocall manner", and so on are more appropriate.

All of these, though, have talked about how the doctor makes the **patient** feel.

Very little consideration has been given to how the doctors themselves feel...and how that could impact the care patients receive.

That's the topic of What Doctors Feel by Danielle Ofri...and it's an important one.

Contrary to what a lot of people might want to think, doctors are human beings. :) As such, they have emotions (unless something is seriously wrong), and those emotions affect them...positively and negatively.

The author, a doctor, does a good job of presenting the gut-wrenching things with which doctors deal. Be warned that this is not an easy book to read. You can imagine the horrors that might happen in medicine.

At one point, I considered being a veterinarian. Someone said to me, though, "What are you doing to do if a customer is treating an animal in a way of which you don't approve...but that doesn't rise to the level of illegal animal cruelty?" That put another whole perspective on it.

With doctors, sometimes the issue is how patients are treating **themselves**, from drug abuse to negligence. It's not just them: it's their families, friends, and "the system".

One of the best points in the book is the sudden jarring switch from a highly-regimented academic life (in which you know exactly what you will be doing at what time of day) to the chaotic, unpredictable life of medical internship and residency (especially in hospitals). The people who are best at medical school may not at all be the people who are best in medical practice...and that has to affect your self-perception.

Shaming is a topic in the book. I think it's important to separate "shame" from "guilt", and that's addressed in the book. "Guilt" is when you feel bad about what you did. "Shame" is when you feel bad about who you are. Doctors are often shamed by the people who should be leading them. It's not, "Did you consider this?" It's, "How could you be so stupid?"

That is, of course, not always true...but may be true too often.

The book is heavily supported with citing studies and providing other sourcing. It will give you a lot to consider, whether you are in healthcare or not.

It won't, however, give you answers, and that can be considered a weakness. While it does provide examples of attempted solutions, and it helps to identify when certain things (such as the loss of empathy and disillusionment) tend to occur, it doesn't tell us what to do about it.

That may be understandable: we may not know.

We also don't see much about how positive emotions help medical care. Oh, we get recognition about how some people do that better, and we get some positive experiences from the author...but generally, the book is geared towards the negative.

One area of emotion about which patients often wonder, and is unaddressed, is dealing with the intimate nature of healthcare. Many laypeople can't imagine seeing "attractive", often healthy people naked and not having it affect their judgement in some way. How does that impact doctors? Do patients flirt with doctors sometimes? One has to imagine they do. How does that affect doctors...and their relationships? It would have been interesting to see that impact weighed.

While I recommend the book, the one other thing I would say is that it does seem in some ways to be substantially put together from previous writings. The author doesn't disguise that, but it can make it feel...reheated.

This is an important book, because it raises issues, and does so in a human way, well-written, and yet supported by documentation. If you can handle the accounts of human tragedy, injustice, and frustration, this is a book you should read.

---

### **Kevin says**

Amazing read. This book delves into an often neglected area of medical care. One that both doctors and patients can innately connect with through their shared humanity.

---

### **Vanessa Rogers says**

I read this because I had realized that I'm over a quarter done my residency already and I fear I will never know enough to be useful to my patients.

Were my fears assuaged? To put it bluntly, no, but the job of this book wasn't necessarily to take away my fear. It was just a relief to read actual stories of other residents and staff (in the US) and their experiences with mistakes, bad luck, and the pressures of being a physician. All of the stories were relatable, and I felt my stomach sink and my heart race as they unfolded because I imagined myself in those same situations. (view spoiler)

The only thing I didn't agree with in this book was one of the author's earlier points about humour in medicine. I don't think that all humour erodes empathy. I agree that there are degrees of humour that is deemed acceptable, but I do not believe her assertion that in general, medical jokes contribute to a loss of empathy throughout medical training. It's part of my style to have some fun with my job and relate to my patients and if that happens to be through humour, then think it's valuable. The jokes made behind closed doors are sometimes coping mechanisms (as Ofri insists) but I don't think that this necessarily undermines the relationships that I build with my patients. Some people are harder to relate to than others but I can't say I've ever blamed it on the degree of inappropriate humour.

Read if you're interested to see how physicians actually respond to the traumas and stressors in their lives. Empathy goes both ways, and all of us are trying to do the best that we can; unfortunately when something goes wrong, this is often overlooked.

---

### **Joel Foo says**

"The goal of this book has been to attune both doctors and patients to the emotional *basso continuo* of this interaction."

Ofri's decision to discuss what most medical professionals brush aside as "part of the job" is indeed commendable; that doctors **feel**, and they feel not only positive emotions but negative ones as well. It is

negativity that ultimately sucker punches the doctor, and this can in turn manifest as a problem in providing optimal patient care. Admittedly, being more wary about the standard of care a doctor is able to provide is important, however, I'd like to argue that it has brought forth much more repercussions than any benefit at all. The problem of "defensive medicine" is starting to come out of its latency (rightly pointed out in Ofri's book). Unnecessary tests are ordered "just to be safe", treatment options that are aggressive but more effective aren't considered, and most importantly, doctors start questioning their competency in providing proper care to a patient.

In the end, the fundamental problem we have is how there exists the assumption that doctors **choose** to provide substandard care and carry on with their jobs in a self-seeking, self-gratifying manner. Yet, Ofri provides us a solution, in the form of this book. *What Doctors Feel* reminds the idealistic medical student of these very real problems they know exist but sometimes choose to ignore. It reminds the practicing doctor of how common 'disillusionment' is and how ultimately, they are still able to initiate change in their reception of and response toward the situation. Most importantly, it makes privy to those outside the medical field the reasons behind "my doctor is always rushing", "my doctors do not understand me", "my doctors do not listen to me, they're only doing it for the money". This can change just by us realising and acknowledging the goal of this book.

I highly recommend this book to anyone.

---

### **Bruce Campbell says**

A remarkably self-revelatory and insightful work.

What are the powerful influences that mold young physicians? Dr. Danielle Ofri's fourth book is a well-written and accessible attempt to probe the unseen forces, blending well-drawn patient narratives with summaries of the relevant research. A myriad of surprisingly similar experiences shape young doctors on the path that incrementally assigns life-and-death decision making responsibilities. By any objective standard, the one-size-fits-all process through which physicians pass is absurd but as I read *What Doctors Feel*, I frequently recalled my own training and kept thinking, "Yeah, I've been there. I've seen that. That happened to me."

Dr. Ofri lingers on the crushing of empathy. She explores how good and bad role models and the "hidden curriculum" exert pressure to change the young doctors. She explains the common experiences of fear and stress, the widespread yet rarely articulated reactions to death and sadness, and the feelings of shame and guilt that persist after medical errors and "near misses". She worries about the effect of being overwhelmed and burned out. She reports feeling suffocated after being judged harshly.

More than many physician-writers, Dr. Ofri is strikingly honest, finding insight in her own human lapses and failures.

Physicians of all ages will relate to her insights. Patients and families will better understand what makes us who we are.

---