

President Ono, Provost Szeri, Dean Kelleher, members of the platform party, graduates, parents, and friends:

I'm truly honored and most grateful to be the recipient of the degree that I've just received. It's really a bonus for me in the career that I've enjoyed in biomedical research, teaching, patient care, and, occasionally, even medical administration. And I'm doubly delighted to address this convocation because, in many ways teaching and mentoring of students in healthcare has been the constant at all points in my professional life. So, I hope the rest of the audience will forgive me if I speak, primarily, to our graduates.

First, I want to assure all of the graduates that you've made your parents very proud. And, by the way, today they will likely forgive all of the angst you caused them as teenagers. I know that the past four years have not been a cakewalk and I'm aware that

as you were given a million dollars-worth of information, it sometimes seemed that you were getting it a nickel at a time.

Now at talks like this, there is always the desire to point out, somewhat philosophically, the problems in our society, and how you can repair them. But, I would rather address you as my colleagues, and about the work to which you've committed your careers.

So first, let's talk about how you got to be here. Unique as each of you may be, I think it can be said, that three things determine all of our lives: genes, environment, and luck.

As you know, we live in an age of '*omes*'. And, so, we have the **Genome** to look after the genetic aspects of our lives, and your donors here are your parents, and indeed the countless generations, that preceded them to have constructed the genome that you now carry and will, likely, pass along. But for the

moment, you represent endpoints in evolution, which I find a rather daunting thought.

The environment can be rolled into the **Epigenome** -- the alteration of genomic expression by both physical and psychological events, without a change in gene structure – insofar as we know today.

And finally, the third factor is luck. To be consistent, for luck I've coined the term the "**Fortunome**". This is not a molecular pathway, but the sum of all of the people who have influenced your lives in a fashion that has guided you to this day. In Tennyson's words, you can each say "*I am part of all that I have met*".

Now, that we've established how you've gotten here, what is it that we want of you? Nothing more, than for you to become very good, perhaps even great, at your endeavors. And this is not entirely altruistic. It's not uncommon in discussions with

colleagues to hear the plaintive cry of “*Who will look after us?*” Of course, you and your contemporaries will. So that’s why the faculty worked so hard in making sure that you will be able to deal expertly with a wide variety of healthcare and research problems in the future.

With that in mind and with the excellent backgrounds I know that you’ve been given already, what message can I leave with you today? We live in an era of rapid change in medical knowledge, but some things should, I believe, remain the same. And this is what I would like to address.

The Danish philosopher, Soren Kierkegaard, famously wrote that, “Life can only be understood backwards; but it must be lived forward”. The key, of course, is not to do anything going forward that may harm a patient, because of incomplete knowledge. *Primum non nocere*. First, do no harm.

In this regard, then, let me emphasize that *you are never alone*. There will always be those to whom you can turn for help, regardless of where you are in your careers. There are few days when any of us see patients without asking for consultation with specialists in particular areas. And so, in the next few years and beyond, you can always call on colleagues for their expertise and opinion, as they will turn to you for your thoughts, in areas in which you will become expert. And *never* hesitate to call, be it at 3 o'clock in the afternoon, or 3 o'clock in the morning. The person you call at 3 a.m. may not be happy to be awakened, but they'll be a lot less happy when they see you later that day, if you haven't called.

Then, I urge you to *listen* to your patients, and then act with that information. But first, *listen!* Of all of the writings of Sir William Osler, arguably the father of modern medicine, the line that stands out in my mind is, "*Listen to your patients, they are*

telling you the diagnosis". But few of us pay much heed to Osler's advice any more. In a recent book by Jerome Groupman entitled, "How Doctors Think", he makes the point that after asking the patient why they've come to the office, or the clinic, or the ER, the average time the patient speaks before the doctor interrupts is about 18 to 19 seconds. You can't learn much in 18 to 19 seconds. So please *listen!*

Beyond listening, *never extinguish hope*. No matter how bleak a situation may appear, the patient must be left with the feeling that everything will be done to alleviate or palliate their condition. Don't minimize the severity of their problem, but always leave the light of hope before you leave the patient.

Along the same lines, *always provide comfort*. Comfort, I think, is the best medicine that can be delivered through the ear. I believe that about a third of what we do is placebo, so use that

third to the patient's advantage. Provide the compassion that is, certainly, one of the reasons that you are all here today.

Finally, if I was asked to summarize Medical Professionalism in one word, it would be *Menschlichkeit*. It's a German term that's now part of many languages. I first heard it, decades ago, from my grandmother, in Yiddish. To be a Mensch, literally, means to be a person. But menschlichkeit means much more than that. It means to manifest humanity, that encompasses empathy, altruism, compassion, and commitment.

I believe that those of you graduating today are capable of those things. And, so, I'll take this opportunity to wish you all, good luck and Godspeed.