



This won't hurt a bit

(And other white lies): My education in medicine and motherhood

Michelle Au

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Reviewed by Halina Brukner

University of Chicago, Chicago, Illinois, USA.

E-mail: hbrukner@uchicago.edu



I entered medical school in 1978, the year that Samuel Shem's novel *House of God* was published. I recall devouring the book, as did my classmates, anticipating with fear but also with some relish the rigors and horrors that awaited us in internship. This seminal work in the medical-reality genre seemed to stoke the endless appetite among the public and those inside the profession for the real story behind medical training and medical practice. Michelle Au's *This Won't Hurt a Bit (And Other White Lies): My Education in Medicine and Motherhood* provides an inside look at the author's personal evolution from medical student to pediatrics resident to anesthesiology resident, as she simultaneously negotiates the demands of training, marriage, and motherhood. I can imagine students, residents, practicing physicians, and the curious public devouring Au's memoir with the same enthusiasm (and trepidation) that my classmates and I experienced many years ago.

Au is the author of a popular online journal, *The Underwear Drawer*, which she started in 2000 during her second year of medical school at Columbia University. She is also the artist/author of *Scutmonkey* comics. *This Won't Hurt a Bit* is written in a first-person conversational style that feels very much like blogging, or even like reading the panels of a comic strip. This very informal you-are-there style can be a bit sensationalistic and off-putting, especially at the beginning of the book, where the use of italics, exclamation points, and capital letters emphasize (in case you missed it) how important or intense the experience is. I was pleased to find that as the book

progressed, Au let the story tell itself; this was not going to be a nonfiction version of *House of God*, but rather a heartfelt and genuine look into the heart and mind of a woman undergoing tremendous personal and professional stress and growth.

Au chronicles her years in medical school at Columbia, from the first years, which seemed to be completely devoid of clinical context, to her clinical rotations, in which all the previously learned scientific material seemed to be irrelevant to the survival of the students or the patients. I suspect her experience was not so black and white, but rather, that is how she remembered those years in retrospect. This very personal internalized style is most effective when the story unfolds of her day as a third-year medical student on surgery rotation on September 11, 2001. She is observing a circumcision when the initial news of the attack comes into the operating room through a nurse, and Au provides a masterful description of the team's slow realization of the enormity of the events, the waiting for victims who never come, and the panic and concern about loved ones. Though a brief side story in the overall narrative, this description is beautifully rendered and memorable.

Au's residency years, first in pediatrics, then in anesthesiology, were intertwined with the challenges of marriage, dual careers, pregnancy, and parenthood. Au portrays a loving and supportive relationship with her husband, a resident in ophthalmology, but what strikes the reader is her lack of an outside support system. Where are her colleagues, her advisors, her close friends, her family? They seem to play a peripheral role at most as she negotiates

such challenges as firing a nanny, caring for a sick child, and patient and team responsibilities. Again, the reader feels the author's isolation as she must have experienced it. Au poignantly describes her anguish in leaving her own child in order to care for strangers. I found myself wondering why she didn't just quit — and I am someone who truly believes that medicine and family life can be wonderfully compatible. Her arguments for leaving medicine seem more compelling than the vague rationale she articulates for continuing: "... just because something is *hard* is no reason not to do it..." That's not a very convincing argument, yet the episodes of satisfaction and even joy she found in patient care seemed to be enough for her to push forward.

I suspect that most current students and residents will have a considerably different set of experiences than the constant sleep deprivation, mistreatment, and autonomy that Au describes. Current work-hour rules, supervision and documentation requirements, and the generally increased priority given to patient safety issues have changed the experience and the culture of residency training. However, the isolation, the feelings of inadequacy, the stress of decision making, and the difficulty in balancing work and home life remain, no matter what the duty-hour policies might be. And the privilege of being on the front line for patients when they are most vulnerable remains daunting, but irresistible. *This Won't Hurt a Bit* provides a complicated but ultimately satisfying insider's view of medical training and its many challenges.