

Johanna Shapiro, PhD
Feature Editor

Editor's Note: In this column, teachers who are currently using literary and artistic materials as part of their curricula will briefly summarize specific works, delineate their purposes and goals in using these media, describe their audience and teaching strategies, discuss their methods of evaluation, and speculate about the impact of these teaching tools on learners (and teachers).

Submissions should be three to five double-spaced pages with a minimum of references. Send your submissions to me at University of California, Irvine, Department of Family Medicine, 101 City Drive South, Building 200, Room 512, Route 81, Orange, CA 92868-3298. 949-824-3748. Fax: 714-456-7984. jfshapir@uci.edu.

The Wizard of Osler: A Brief Educational Intervention Combining Film and Medical Readers' Theater to Teach About Power in Medicine

Michael D. Feters, MD, MPH, MA

Family medicine learners often appreciate alternatives to didactic approaches to medical ethics, and many faculty believe that learners remember medical ethics issues better when using alternate approaches. Readers' theater provides an innovative approach to teaching medical ethics. Interested in using a readers' theater approach for teaching power in an introduction to ethics session for family medicine residents, I developed a brief film and readers' theater educational intervention titled "The Wizard of Osler."

According to Savitt, medical readers' theater involves adapting short stories about medicine into scripts, inviting medical students to serve as the readers (actors),

performing the stories to public and medical audiences, and holding post-performance discussions about the issues raised by stories with the audiences and the cast.¹ My modest goal in the development and use of the Wizard of Osler was to augment the didactic component of the introduction to ethics overview for incoming family medicine house officers.

Each year, the roughly 10 newly entering house officers in family medicine come with varied backgrounds in their medical ethics education as undergraduates. As there are many competing demands for incoming house officers' attention in their intensive introductory "block month," a 2-hour session is the only time available for introducing medical ethics. This renders the introductory session a crucial component of the residents' medical ethics education. The introductory session objectives are (1) to know the expectations for their training in medical ethics

as a family medicine resident, (2) to understand the overall strategy for medical ethics education during their family medicine training, (3) to understand the centrality of power in recognizing and resolving ethical dilemmas, and (4) to experience the role the humanities can play in their education.

After discussing with the residents the American Academy of Family Physicians guidelines for medical ethics education (www.aafp.org/PreBuilt/curriculum/Medical_Ethics.pdf), I present the overall structure for their ethics training over the upcoming 3 years. Intent on the residents being able to at least recognize the various ethical frameworks that can be applied to moral reasoning in medicine, such as principles, virtues, casuistry, and feminism, I review these based on their historical development, as articulated by Pellegrino.² I provide an overview of these moral frameworks and then emphasize the unifying theme of

(Fam Med 2006;38(5):323-5.)

power, its three different types in medicine (aesculapian, charismatic, and social), and the potential dangers of the “dark side” of power.³

Subsequent to this overview, the residents watch a short clip from the movie “The Wizard of Oz,” the scene when Dorothy overcomes the Wicked Witch of the West by melting her with water. Afterward, Dorothy returns with her friends to the palace of the Great Oz, spirits high in the expectation of being rewarded for her accomplishment with a return home only to find there is no wizard.⁴ I distribute to all participants an adapted script, “The Wizard of Osler” (Appendix), the members select a part they would like to play, and a lively readers’ theater ensues.

In the script adaptation, I depict the Wicked Witch of the West as cancer because disease, and especially cancer, are often portrayed in medicine as something wicked and evil. Dorothy stands for the patient who is seeking a cure from illness and a journey home. For her, home symbolizes health. I cast the Tinman, the Scarecrow, and the Cowardly Lion as family members, and the Great Oz I portray as the infamous physician, the Wizard of Osler. After completing the reading, the residents discuss their perceptions about the readers’ theater activity. Residents comment on their initial reactions and, as time permits, the questions in Table 1 are debated among the residents.

This brief educational activity was developed with the intent of breaking up the monotony of an introductory ethics didactic session. The activity’s innovation lies in its use of film combined with readers’ theater. The program engages the residents actively in an educational experience that increases their understanding about the ubiquity of power and its influence in medicine. After a series of mostly didactic sessions during the block month about predominantly medical topics, the residents appear to enjoy the activ-

ity. Most years, a dynamic Dorothy earns the praises of her colleagues for a spirited rendition.

Typically, the residents can identify conflicts in power and identify the three different kinds of power. For example, the residents readily note the charisma the Wizard of Osler personifies and his resourcefulness to find ways to heal through his interpersonal skills. Though not part of the skit, the residents know the end of the story when the Wizard of Oz helps “heal” through a heart for Tinman, a certified diploma for Scarecrow, and a medal of bravery for Cowardly Lion. Though his attempt to help Dorothy fails, she discovers her own power for finding her way home (to health). The residents identify the social power the Wizard of Osler has achieved by his preeminence in the community. Residents discern how his aesculapian power derives from his knowledge of his profession. On some occasions, a resident discusses a physician she/he has known with the paternalistic attitudes characteristic of the Wizard of Osler. Metaphors for illness as a journey, hospitals as impenetrable and intimidating palaces, and the recognition of the physician as a fallible human prone to the “dark side” are topics examined. As an illustration of this latter tendency, the Wizard of Osler refers to the patient Dorothy, her family (Scarecrow and Cowardly Lion) as “ungrateful

creatures” and chortles maliciously about their indignity for wanting an immediate appointment rather than his “generous offer” to see them back in 2 weeks. Rather than being all-powerful wizards, physicians are humans whose “magic” shines when they heal with resourcefulness, caring, and kindness.

As with all teaching sessions during block month orientation for the new house officers, the interns each complete a standardized evaluation form about this teaching session. This session generally receives favorable scores that reflect levels of satisfaction similar to the other teaching sessions they experience during this intensive month.

Though receiving a truncated overview of medical ethics, the residents, regardless of their previous training in this area, typically leave this session with a general understanding of the concepts involved in the major ethical frameworks applicable to medicine, as well as an awareness of how power differences can contribute to or help resolve the ethical dilemmas that occur in patient care. Residents have virtually all seen the movie “The Wizard of Oz” and most hold fond memories of it. During discussions, we address the imagery of illness as a long journey and the disappointment of medicine’s frequent inability to provide the complete recovery of health and wholeness that patients desire most.

Table 1

Discussion Questions About the Wizard of Osler

1. How does the Wizard of Osler resemble any doctors you have known or know?
 2. How does Dorothy’s circumstance resemble the situation of a patient?
 3. How does the palace resemble a hospital?
 4. How do the dwarfs and the guards working at the palace resemble staff in the hospital?
 5. Do you see anything in the relationship between Oz and Dorothy that may resemble relationships between the doctor and patient?
 6. What analogies do you see between Dorothy’s desire to go home and the image of illness taking the patient on a journey?
 7. How is Osler the Wizard different from Osler the Doctor?
 8. How do the concepts of paternalism and respect for autonomy relate to the events portrayed in the skit?
 9. Name at least three different ways Osler the Wizard personifies power.
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Having conceptually tied power in medical ethics to the popular movie “The Wizard of Oz,” I suspect subsequent exposures and references to the movie will stimulate residents to think about this session and the need for physicians to have a mindful consideration of

the potential for both healing and destruction that power differentials wield in clinical encounters.

Correspondence: Address correspondence to Dr Fetters, University of Michigan, Department of Family Medicine, 1018 Fuller Street, Ann Arbor, MI 48109-0708. 734-998-7120, ext. 341. Fax: 734-998-7335. mfetters@umich.edu.

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1. Savitt T. Medical reader's theater: a guide and scripts. Iowa City, Iowa: University of Iowa Press, 2002.
2. Pellegrino ED. The metamorphosis of medical ethics: a 30-year retrospective. *JAMA* 1993;269(9):1158-62.
3. Brody H. The healer's power. New Haven, Conn: Yale University Press, 1993.
4. Wizard of Oz. Director: Victor Fleming, Producer: Mervyn Leroy. Metro-Goldwyn-Mayer Production, 1939.

Appendix

The Wizard of Osler Script

Cast:

Narrator
 Wizard of Osler/Doctor
 Dorothy, the patient
 Scarecrow, the patient's husband
 Lion, Dorothy's sister

Narrator: Dorothy applies medicine to her open wound. Foul-smelling odors roll off the wound and reveal granulation tissue. The previously scary nurses all rejoice, “Hail to Dorothy, the wound is healing!” Dorothy, Scarecrow, Tinman, and Lion go back to the hospital for an audience with the Great Wizard of Osler.

The receptionist escorts Dorothy and her family and friends to the office of the Great Wizard of Osler, who speaks to them through billowing flames and green and orange smoke.

Wizard of Osler: Can I believe my eyes? Why have you come back?

Dorothy: Please sir. We've done what you've told us. We've followed your instructions and cleared the infection. The wound is closing and I want to be cured now. We irrigated it...

Wizard of Osler: (in a surprised voice) Ohh, you irrigated it, eh? Very resourceful.

Dorothy: Yes sir. So we'd like you to keep your promise for a cure, if you please sir.

Wizard of Osler: Not so fast! Not so fast! I'll have to give the matter a little thought. Go away and come back tomorrow!

Dorothy: Tomorrow?? Oh, but I want to be cured now!

Scarecrow: You've had plenty of time already!

Lion: Yeah!

Wizard of Osler: (angrily) Do not arouse the wrath of the great and powerful Osler! I said come back tomorrow!

Dorothy: If you were really great and powerful, you'd keep your promises!

Wizard of Osler: Do you presume to criticize the Great Osler?

Narrator: Meanwhile, Toto the dog runs over to a heavy curtain. He pulls back the curtain to reveal Osler standing in a control booth, belting out his indignant response.

Wizard of Osler: You ungrateful creatures! Think yourselves lucky that I am giving you an appointment tomorrow instead of 2 weeks from now!

Narrator: Scarecrow points out Osler, the doctor behind the curtain. Osler panics as he realizes he's been discovered. He hurriedly closes the curtain.

Wizard of Osler: Ohh! The Great Osler has spoken!!! Ohh! Pay no attention to that doctor behind the curtain!!! The Greatest Osler has spoken!

Dorothy: (shocked, she walks to the booth and opens the curtain) Who are you?

Doctor Osler: (in a faltering voice through the microphone) I am the great and powerful Wizard of Osler.

Dorothy: You are? I don't believe you!

Doctor Osler: (humbly) I am afraid its true. There's no other Doctor except me...

Scarecrow: You humbug!

Osler: Yes, yes, exactly so... I am a humbug.

Dorothy: You are a very bad doctor!

Osler: Oh no, my dear, I am a very good doctor. I am just a very bad Wizard.