The Country Doctor Revisited, A Twenty-First Century Reader
Therese Zink, ed.

As Erik Brodt, one of the contributing authors, says in *Learning to Walk the Healer’s Path*, “I grew up rural, but I never realized the challenges of providing care to a close-knit community until I lived it from a provider perspective.” Having grown up in a town of 800 people, I experienced life in a poor rural community without medical providers. Thankfully the school provided fluoride for our teeth, and you could always visit the school nurse and take a rest on the cot in her office until you felt better, or your parent came to get you. I wonder how our lives might have been different if the authors (physicians, nurses, midwives, psychologists, medical students, residents, emergency responders) of this collection of essays and poems had been there for us.

The Country Doctor Revisited is one of a collection of books in the “Literature and Medicine Series” published by Kent State University Press. Therese Zink, MD, a family physician who has worked, taught, and done research in rural settings has brought together a group of diverse contributors who work or have worked or trained in rural settings. The authors relay their experience of the practice of medicine within 21st-century rural America. They bring us the faces of providers and patients, the changing practice environment, and how providers and patients make do with a fragmented, inadequate health care system, and one that offers incredible opportunities for rural care through technological advances. Most importantly, it is about relationships and connection, that force that has motivated so many of us to train in family medicine and work in primary care. The book provides an opportunity for self-reflection, a tool for influencing political systems and public opinion, and a resource for teaching students and trainees about the value of careers in rural communities.

The text is divided into four main sections: Who We Are, Where We Are, Whom We Serve, and Our Resources and Challenges. It describes practice in rural medicine filled with the joys and heartaches that are common to family medicine in general and also describes the issues and complexities that are specific to rural communities. The themes of “dual relationships” and boundaries with patients and staff runs throughout, as well as the value of connection with nature and the ability to quickly mobilize support and promote change in smaller communities.

**Who We Are**
As family physicians we’ve all experienced the challenges of dealing with our emotional reactions and the struggle to find appropriate responses as we deliver care to individuals and their families. These authors courageously document the emotional and literally physical vulnerabilities they experience while delivering care in rural communities. In “When Hostility Melted for the ‘Funny Accent,’” set in rural North Carolina, Godfrey Onime, a primary care physician originally from Nigeria, describes how “I learned to keep quiet when I felt rage.” On call, he hospitalizes an elderly, white male with a GI bleed. Managing what feels like a rude, questioning, family on edge, the relationship begins with a complaint to the patient representative about the long ER wait for admission. We empathize with Dr Onime, who, short on sleep, balancing the impossible demands of hospital, ER, and clinic responsibilities, maintains his cool and manages his time, thoughts, and feelings about this family through two hospitalizations. Ultimately impressed with Dr Onime’s care of their father, the family requests that he be their father’s
It is impossible, in a small town, to keep one’s life separate from that of one’s patients, “where one’s business is not so private” (“Whom We Serve-Synopsis”). This book exquisitely illustrates the complexity of “dual relationships” and boundary issues in rural practice. A medical student, Megan Wills Kulnat, reports the advantages and disadvantages, from both patient and provider perspectives, of friends as patients and patients as friends in “Boundaries.” Deborah Lee Luskin PhD, illustrates how business decisions for the economic survival of the office practice strike at the core of relationships and personal well-being (“Mom and Pop Doc Shop”), where staff are patients and patients are friends. Throughout these stories, the reader appreciates how thoughtfully and compassionately rural providers approach the lives of those they touch and their struggle with work-life balance and the risk of burnout. They also affirm how precious these relationships are and the privilege of caring for families and a community.

Where We Are
Though some of us may prefer the anonymity of more densely populated practice locations, these authors chose to work in rural communities where they are intrinsically linked to their patients in multiple ways. In “A Vow of Connectedness: Views from the Road to Beaver’s Farm,” David Loxterkamp, MD, a family physician who has practiced in Belfast, ME, for the last 24 years, describes this web of connection with a dairy farmer named Beaver, who “is a member of my parish, a patient in our practice, the host of our son’s summer camp excursions, and a grandfather figure for my daughter, who helps with summer milking. His daughter-in-law once worked in our medical office.” Loxterkamp is “linked to patients’ lives by more than the designation as their PCP.” He clearly conveys his parallel responsibility for the stewardship of the “human ecology” of this small community as Beaver has for his dairy farm. Richard Berlin’s (a psychiatrist from the Berkshire Hills of Western Massachusetts) poetry, interjected throughout the book, reminds us of the awe and beauty of the seasons’ natural rhythms and the reality of impermanence. Other stories take us on adventurous house calls on back-country roads, during dark nights, winding down gravel roads sometimes with “steep drops on both sides” (“Lost On Call”). We witness courage and commitment as these providers go about their house calls from delivering babies (“Learning from an Amish Birth”) to bathing the dead (“Lost On Call”). Other pieces describe the authors’ connection with the history and culture of the communities in which they live and practice.

Whom We Serve
The contributors to The Country Doctor Revisited aptly describe how the rural America of today is not that of the 1950s. Increasing diversity in provider and patient ethnicity and race has changed the face of rural America, as have the chronic illnesses of today, economic instability, and poor behavioral choice. In “Hanging for Your Life,” Lorence Gutterman personifies the ethical dilemmas we face in dealing with the complexities of human relationship, as he does hospital rounds on Carter, a cowboy with a new diagnosis of AIDS whose wife doesn’t know. Michael R. Rossman, a psychologist, portrays the anguish and suffering of Kent and Maureen as they sell their cattle and farm equipment to cover bank debt (“Cattleman”). We hear the locals’ reactions to the news that Rosa, an undocumented worker from the meat packing plant, smashed her pickup into a storefront while intoxicated in “Pursuing the American Dream: The Human Face of Immigration.”

Our Resources and Challenges
This section covers a spectrum of issues about how health services are constructed (or not) in rural America. How can a country continue to spend the most per capita for health care in the world and fail to provide for the most basic of health care needs of our populace (“Everyone Did Their Part,” “Inside the Mind of a Modern Country Doc,” “Dressing Change”)? How can we use technology to improve patient care and the health of our communities and not detract from relationships and the environment? Shailandra Prasad gives us an example in “Blog Rural Mississippi-Aftermath of Hurricane Katrina.” He creates a “Blog Family” to help connect the citizens of Picayune with one another. “Practice-Based Research-Blue Highways on the NIH Roadmap” reminds us of the necessity of research that reflects the realities of rural primary care, and Therese Zink ends this section with “Thank God for My Ass.” I’ll leave it to you to find out what this story is about!
Closing
This collection of essays and poems about the realities of life in 21st century rural medicine can complement, if not replace, the data-driven PowerPoint presentations we use to influence those who have power. It is a testament to acceptance, to the pain and suffering of daily life in rural America, and to the joy and appreciation that comes from making deep connections with our patients and the communities in which we live. You will feel relief reading how others struggle with the same issues you do and utmost respect for those of us who work in the complex environments of rural America. Consider buying three copies—one for you, one for the medical student or resident you’re mentoring, and one for the state representative you’re trying to influence regarding health care in America.

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