



ELEGANT SCIENCE

An Interview with Dr. Dawn McGuire '71

| Photography by Kirsten Lara Getchell

Dr. Dawn McGuire '71 is a pioneering physician, poet, and mother of two. She serves on the faculty of the Neurosciences Institute of the Morehouse School of Medicine, and she is a member of the Academy of Neurology's Ethics, Law, and Humanities Committee, where she serves as chair of the Humanities Subcommittee. Dawn's first collection of poetry, *Hands On*, was published in 2002. She has received poetry prizes from Princeton University, the Academy of American Poets, and Sarah Lawrence College; and, she has garnered awards from several literary journals, including a Villa Montalvo Biennial Poetry Contest Award (1999), an Erskine J. Poetry Prize (2007), and the Campbell Corner Poetry Prize (2011). Dawn's new book of poetry, *The Aphasia Café*, will be published in the spring of 2012.

Q. How did you arrive at the study of medicine?

A. I took a circuitous path to medicine. I certainly did not think of medicine while at St. Tim's. I was interested in philosophy and literature. I suffered, really suffered – through dissecting a fetal pig. I was the editor of "The Steward," which we took really seriously as a creative outlet for St. Tim's, and I was happily consumed with poetry. Even as a freshman in college, I can remember saying, "I would never waste my liberal arts education on pre-med!" I really didn't

think about medicine until I was in graduate school, and then it hit me like a bolt of lightning.

What was your time like in graduate school?

I was getting a master of divinity degree at Union Theological Seminary in the program for psychiatry and religion. I was on my way to becoming a lay psychoanalyst and, as part of work-study, got a job as a research associate in medical ethics. My mentor was working with Columbia's medical school, the leaders of which wished to figure out how to identify and

recruit more humanist physicians. As I researched the types of people who were drawn to medicine, I found what I expected: the Phi Beta Kappa biology majors who thought formaldehyde was cologne; the ear-twisted firstborns whose fathers were physicians, etc. But I also found people with deeply humanist sensibilities, in addition to being comfortable with the rigor science requires. I realized medicine was not only open to the likes of me, it was calling me. The next three years were a blur. Graduate school, plus the pre-med courses I had so proudly

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scorned at Princeton. I remember bicycling across Manhattan every day for my 8 a.m. calculus class; then physics, chemistry, organic chemistry, biology, molecular biology.... It was, believe it or not, an enchanting time, because, as it turned out, I loved science. I had found my place. Now it was about the awkward bit of getting into a medical school! And, of course, I wondered who would accept an unconventional student like me. It's an epidemic, still, among girls and young women, this unrealistically low sense of worth. But I got kicked in the pants with acceptances, even from Harvard. My heart, though, was at Columbia, and that's where I got my M.D.

If you had to choose, would you say that we become more our memories or our dreams?

Maybe a little of both. Here's a memory: where I grew up, my dad used to make horse-and-buggy rounds with the country doctor; and my most loved and respected family friend was Dr. Shuff, the one doctor in the town where I grew up.

It's also interesting you should ask about dreams. That "bolt of lightning" I mentioned actually came

after a dream where I saw myself as a little girl, maybe seven or so, in an old-fashioned painting. It was a side view, and in the background was Dr. Shuff. It hit me that somewhere, very secretly, I had wanted to be a doctor for a very long time. But coming of age on the cusp of the feminist movement, I had let some old expectations about roles of women live in my brain, rent free and unexamined. This special "side" of me had gone unrecognized.

Why did you choose to go into neurology?

At Columbia, as far as neurology goes, resistance was futile. Columbia's Neurological Institute is world-renowned, and I had great mentors. Dr. Eric Kandel, who won a Nobel Prize in physiology in 2000, was my first neuroscience teacher. He was the founder of the Neuroscience Department at Columbia and a brilliant, charming man whom I adored. I did my neurology rotation at Harlem Medical Hospital with residents and attendants deeply devoted to the care of their patients, many of whom were on the wards for months. These patients had no place else to go after their stroke or heroin



overdose. Dr. Brust, who headed the service, was a perfect example of the way many neurologists combine love for brain science with a persistent and deep engagement with art. He used to quote Wordsworth on rounds! There was just no turning back. Recently, I was reading research on which medical schools produce the most professors of neurology—no surprise: Columbia is number one.

The practice of medicine today is beset by so many challenges that might interfere with the sense of optimism and desire one has to treat the whole person. How do you structure your practice in the best interests of good medicine?

Most of my work is in research – in therapies for diseases like multiple sclerosis or Huntington’s disease. But my clinical practice, the work I do with patients, is almost entirely devoted to people with neurological complications of HIV/AIDS. I started a clinic as a junior resident at UCSF because AIDS patients were literally dying before they could get in to see a neurologist. So it was a need – and my department was very supportive of me starting a neuro-AIDS clinic. I believe it was the first clinic of its kind in the United States.

Now, more than 20 years later, I would have hoped my clinic would no longer be needed. But it is needed, and I am happy to give this service to a profession and a community that has given me so much. My clinic is, for all intents and purposes, free. A colleague generously gives me space, and I practice medicine as I was trained to do, tending to the whole person, trying to piece together a narrative that can guide me, however long it takes, and however many visits are required, to make a dent in the patient’s chief complaint. No HMO or department tells me how much time I can spend with a patient, so I can take on patients who need more services and support.

It’s a catch-22 today in medicine: if you need to make your living taking care of the sick, the exigencies of modern

practice make it nearly impossible to really “care” in the way doctors are trained to practice – for example, not typing into the computer while talking; not ordering a test instead of listening; not taking hours from patient care to waste them on the phone with insurers, just trying to get the right test or pill approved.

Doctors are now facing government-mandated Medicare cuts of up to 30% in caring for the patients who need them most. I don’t criticize my colleagues who stop accepting Medicare patients; but it does break my heart. When I get an insurance check for \$15.73, as I did last week, for an hour’s patient visit, it’s a call to action—not because it’s rice and beans for me and my kids tonight, but because my colleagues and the health care system will collapse; and the sick will just get sicker.

What challenges does the contemporary practice of neurology present? Do the HIV/AIDS patients that you are seeing today have different medical issues than patients neurologists might have seen ten or fifteen years ago?

First of all, with regard to HIV/AIDS, there are so many combinations of antiviral medications today, and these positive medical advances bring an entire set of new challenges. Which combination? Which drugs might make HIV-associated brain or nerve disease worse instead of better? Often my patients take twenty pills a day – how do they interact? If they are also using supplements or Chinese herbal medicine – how does this affect their immune system? Many unanswered questions.

Overall, the practice of neurology, especially in the last ten or fifteen years, is much different than it was, say, in the mid 1980’s as I was beginning to learn my field. I entered the field at a time when no one wanted to be “an interesting case” because if you were, you simply could not be helped. A neurologist could pinpoint illness in the brain with elegance and accuracy – and then, unfortunately, have to walk away.

The year I became board certified in neurology, the first drug for multiple sclerosis was under review. Now there are eight drugs, one of which I was privileged to help develop. The complexity of the therapeutics has grown enormously; for example, we even use electrical devices, deep brain stimulators, for Parkinson’s disease. We use lethal toxins, very carefully, for cancer pain. The older generations of neurologists were often therapeutic nihilists – not much worked. Now, happily, our lives have gotten quite complicated with options. Still, Lou Gehrig’s disease, Huntington’s disease, muscular dystrophy, all need treatments. Alzheimer’s needs something to slow or stop the loss of brain cells. We need to complicate the life of the neurologist even more!

Can you describe a typical day – if there is, indeed, such a thing – in your practice?

I take care of patients a few days a month, including keeping my hand in general hospital coverage. In my research, I act as a “chief medical officer” in drug development, selecting drug candidates, designing development programs in novel gene and cell therapies, designing and



V.A. Nights

His hands are bound to the bedside
because the nightshift feels imperiled
by the old Army drunk, drying out.

We sit together in the flame-tipped twilight,
even my pager at a hush
for that half an hour between us.

Tonight this is the port
I reach and rest in.

He with the terrible nest
of bees he sees dropping from the ceiling;
me with my childish dread of night.

*But, he says,
We'll handle it together.*

Dawn McGuire

helping to execute human treatment trials, and navigating the FDA and worldwide regulatory agencies so that the treatments, if successful, get approved. I have a high appetite for risk. I will go to the mat to help a program if the science is elegant and rigorous; addresses an unmet need or a bad disease; and the therapies have a decent safety profile. Research ethics are extremely important to me, going back to those jobs that kept me employed in seminary. I am on the Academy of Neurology's Committee on Ethics, Law, and Humanities, and I chair the Humanities Subcommittee. At various times these duties dominate my days.

What do I do most of the time? Generally, I try to balance the time-consuming and close work of data interpretation and trial design with the larger questions we really must ask – often awkward questions, the ones that challenge assumptions. These turn out to be the questions that sometimes bring us closer to good drugs for bad diseases. “Let’s go over that trial design: what did we do wrong – and, you can come out from under the table, Murray.” Every clinical trial that succeeds has been informed by multiple failures; and, every failure can be mined for clues that will guide the next success. I’ve just finished co-authoring a paper on a multiple sclerosis trial that “failed,” from which the whole MS research community stands to gain insight.

I am also a part-time professor of neurology at the Morehouse School of Medicine, a traditionally African-American institution. I am working with the Neurosciences Institute to try to reduce health disparities among

African Americans with a high burden of stroke, MS, and other neurological diseases. One way I am trying to do this is by building out an infrastructure where more African Americans are brought into the research. Typically, the African-American community is understudied; and, then, – surprise! – we find that the approved drugs don’t work as well in this population. This is fixable. I would like to help fix it, and it feels like the right thing for me to be doing at this point in my professional life.

At St. Tim’s, I think that the school has always tried to teach girls about the value and rewards of working hard and doing one’s very best in all that one undertakes – all the while, maintaining a balanced life in mind, body, and spirit. With a demanding career, how do you continue to add important balance to your life?

Well, I have two teenagers, so neuroscience is the easy part of my life. I wouldn’t say that I have balance in strictly Zen terms. I’m creatively off-balance most of the time, in fact, and I am okay with that.

A friend of mine once described my life as “visionary clutter.” I love the creative arts and writing, but there were years when I didn’t write – I lost my voice. I didn’t know how to write authentically when confronted every day with dramas and intimacies that staggered me with their “realness.” After I completed my residency, I started to use electronic sound in poems – crazy stuff. I performed all over the place with the brilliant feminist poet Judy Grahn, and it broke me out of my impasse. I began to write again. I had a book out in 2002, and

I have just finished another book of poetry which is being published in 2012. This year, I won the Campbell Corner Poetry Prize sponsored by Sarah Lawrence College for “poems that treat larger themes with lyric intensity.” It comes with an April 2012 reading at Poet’s House in New York, which should be huge fun.

Writing and reading poetry –W.H. Auden, Wisława Szymborska, Sharon Olds and, among more newly recognized poets, Claudia Rankine and St. Tim’s own Chase Twichell – help me keep a semblance of balance. Poetry is a powerful mirror; it tells me about my life as I am living it; it lets me in on my own secrets.

On your most challenging days, what kind of challenges are you confronting? At the end of the day, what do you do to set these challenges aside, so that you are ready to tackle tomorrow?

Have you ever looked at *I Ching*? It’s the world’s oldest book, a Chinese book of oracles and their Confucian interpretations. One part goes: “Inner truth. Pigs and Fishes.” It means when you have to deal with stubborn intractable people – people as hard to influence as pigs and fishes – you have to first get rid of your own prejudices. So the challenges are twofold: the “pigs and fishes” whom I encounter a fair bit, and my own my prejudices about them.

Prejudices are like empty calories – they don’t sustain you, they just keep you lazy and craving more of the same; and, they can give you a migraine. To get any traction, whether it’s with a government bureaucrat, an arrogant colleague, or a scientist



Dawn McGuire with son Kellon and daughter Hana Hope

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blinded by the desire to be right, you have to start with an open heart. It's the place where spiritual and practical approaches meet.

At the end of a tough day, I try to "stretch my mind," as Mrs. Warner used to exhort us as fours to do at St. Tim's. I can still hear her say this when I try to put myself to sleep with some strange and new idea. Last night, a pea-sized tree frog somehow got on my radar screen – it lives inside a carnivorous plant! Just about anything that strains or defies expectations, which succeeds against the odds, gets my respect. Last night, reading about

this little frog thriving in the jaws of its predator made today seem easy.

Are there certain things that you try to do each and every day that help contribute to your personal or professional growth and your overall sense of well-being?

There are a lot of moving parts to my life, but I don't like to feel fragmented. I try to bring as much of myself as I can into the room. My son and I talk neuroscience, for example. He has a keen mind and an insatiable appetite for anything to do with the brain. So talking with Kellon about,

say, dopamine, and then maybe a few minutes later about slant rhyme in a rap poet he likes gives me a bit of a sense of coherence.

Similarly, I take what I learn from him into the other rooms of my life. I credit raising a son with giving me huge insight into my colleagues, most of whom are men. I need to connect with both of my children and have them know me in more than one dimension. My 16-year-old daughter just came to Atlanta with me and visited Spelman College, right across from Morehouse. She met some of my

dearest colleagues in my “other life” at the medical school. And, I think I she liked Spelman – but I know better than to push. My kids have me well-trained in certain things.

I do try to write every day. Two close friends, both serious poets, and I have vowed for almost a year to send each other new work every day by email. We mostly keep our vows, even if barely coherent haikus are all that hit the inbox.

What is the most valuable, positive lesson that you learned at St. Tim’s that you have been able to carry with you into your adult life?

When I came to St. Tim’s, I had never had a bagel and had never seen the ocean. I had never read a classic in Western literature or in any canon. I thought Freud was a philosopher. My books pretty much were whatever the bookmobile brought to the strip mall. I can still remember the smell of the thousands of books in the St. Tim’s open stacks. And at St. Tim’s, even more importantly, were some extraordinary girls who weren’t afraid to think and question. They were speaking up and challenging each other, passing around Aldous Huxley and Karl Marx, Lao Tzu and Carlos Castaneda – stuff that would have landed me in the counselor’s office in eastern Kentucky. Whoever left e.e. cummings on my bed, thank you. I had only read John Milton before that. By the time I went to college, it never occurred to me that a young woman couldn’t be successful, even in a former men’s university. Cynthia Chase, the first St. Tim’s alumna to graduate from Princeton, did so as valedictorian!

In 2005, you were the honored recipient of the People to People Award for your work in establishing a virtual clinic that helped physicians who were treating patients with HIV/AIDS in Ethiopia. How does the virtual clinic work and what have its outcomes and results been to date?

There are too few neurologists, even in this country, with experience in the complex problems of HIV in the nervous system. In Ethiopia, there was roughly one neurologist per forty million people. The virtual clinic was set up to help clinicians discuss difficult cases and get advice in diagnosis and treatment with whatever limited treatments there were available. Today, partly with the help of People to People and the World Federation of Neurology, there is a full-fledged neurology training program in Addis Ababa.

In your life and work, how would you say that you are living out St. Tim’s motto: “Truth Without Fear?” And, of the values – “truth, trust, and kindness” – represented by the three stars in the school crest – which one, at this time in your life, leads the others?

“Truth Without Fear” – at St. Tim’s, this message held a kind of personal, unassailable beauty. It has remained a personal mantra for me; but, I wouldn’t be telling the fearless truth if I didn’t also admit that it has cost me. I like to be direct; sometimes I can be blunt. I realized a long time ago that if speaking a necessary truth put me at a severe disadvantage, then I was in the wrong place. Because of this, I have left more than one position

and lost a few lucrative opportunities; and, I’ve gotten a few people rather steamed. I think of the motto more as “truth despite fear” – or, at least, despite some realistic trepidation; as truth without being naive to its very real consequences. Vérité sans peur is a practice; one that prepares you, and then calls you when it’s time to step up.

At St. Tim’s, I learned a sense of personal accountability, and acquired a conviction of moral agency from people in the school community who did things worth admiring every day.

We also did many absurd, funny things that we’re still laughing about forty years later. But that’s another story.

Dear Salvation Army

You can have the goat
I got for reading my poems
In Willits
He has balded my yard

Now he’s grazing my books
The bible from when I was baptized
is his favorite so far
He is a brindle-colored goat

and under other circumstances
a fine reward for a reading
The poet before me
got fish

Please arrange pick up very soon
I am okay with losing Leviticus
Would like to save Mark
and Ruth

Dawn McGuire