Dean and CEO Robert I. Grossman, M.D. IN TOUCH

Last week, at the White Coat Ceremony, I spoke to the Class of 2017 about becoming a force for good in the world. As this theme really applies to everyone, and because it involves some of my deepest beliefs, I also wanted to share these thoughts with all of you.

Good morning, ladies and gentlemen,

It's great to see you again, now that you've begun navigating your exciting new world!

You're sitting here today because we—you, your families and friends, your future teachers...and I!—all want you to become the very best doctors you can be.

That of course means acquiring in-depth knowledge of the mechanisms of disease. It also means honing the communications and cultural competency skills that will shape your interactions with your patients.

But no matter how thoroughly you master the various forms of expertise involved, the essential ingredient in becoming a great doctor is...who you are as a *person*.

It's that dimension I'd like to talk to you about this afternoon.

As you may know, the author Dan Brown has prefaced his new book, *Inferno*, with a quote from the master Italian poet Dante Alighieri.

"The darkest places in hell," it says, "are reserved for those who maintain their neutrality in times of moral crisis."

Well, it turns out that Dante never said that. It was John F. Kennedy who *claimed* he had...in a 1963 speech inaugurating the German Peace Corps in Bonn.

Dante or no Dante, however, the observation remains a powerful one.

In essence, what it tells us is...that when you're confronted by trouble and fail to act...you're complicit in the outcome.

Now for doctors, this bears special reflection, because at the heart of our profession is the admonition "Primum non nocere"—"First, do no harm."

(Strangely enough, by the way, and contrary to popular assumption, that phrase isn't actually part of the Hippocratic oath. Another iconic misattribution!)

At first glance, "Do no harm" may sound simplistic: What physician worth the name would ever intentionally harm a patient?

On reflection, however, you see that it could also constitute a call to do nothing...unless you're absolutely sure what the outcome will be.

Well, I have to tell you that doctors rarely have access to that kind of certitude.

Before science permeated medicine, it was—alas—perilously easy to do harm, despite the best intentions. Any number of old-time interventions made things worse instead of better. And many substances once thought to be curative turned out to be poisonous instead.

The astonishing progress we've enjoyed these past decades has equipped physicians to avoid most such pitfalls...as well as to treat patients we never used to be able to help.

But the risk of doing harm never leaves us. Take, for example, the recent findings that estrogens for menopause—so long prescribed to protect bone health in aging women—can actually cause breast cancer.

In parallel, we're confronted with challenges that are—if anything—more complex than ever before. Just because something is medically possible, for example, is it necessarily in the patient's best interest?

There's a *reason* that today, bioethics has become a demanding discipline in its own right. And in a few minutes, you'll meet Dr. Arthur Caplan, professor of bioethics and director of our Division of Medical Ethics.

For a doctor, in other words, the moral imperative to "do no harm" is a lofty, demanding goal...filled with subtlety and nuance. It takes *courage*—and humility!—to shoulder the responsibility of taking care of people who are sick.

Beyond the confines of medicine, however, it's a different story. In the wider world, it's **not enough** to avoid the negative.

There's an obligation—in my eyes anyway—to become a force for **good**.

And you don't have to be powerful in order to do that.

Think of people who have put their reputations and livelihood on the line to counter institutional malfeasance, for example. Or those who have risked their lives to aid victims of persecution. For sure, we live in a world fraught with problems. Today, for example, we worry—as we should!—about our planet becoming inhospitable to life.

But you know, I suspect that every stage in history...has seemed to many living through it...dire beyond saving.

And yet...we're still here.

We're here because brave pioneers set out to tackle the deadly organisms in the water people drank....

Or the food they ate....

Or the air they breathed....

Or the conditions they lived in.

You are here today because you're exceptional people.

The more talent you were lucky enough to get born with...the more opportunity that's come your way...the more determined I hope you are...not to live a "bystander life."

Thank you very much.

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