What do I want in a doctor?

In 1964, following the retirement of his regular physician, 62-year-old novelist John Steinbeck was asked by his new doctor to complete a routine medical questionnaire for his records. Steinbeck did exactly that, and on reaching the last of its many pages, the Grapes of Wrath author discovered, and left blank, a small space reserved for "any other data you think may be of importance." Instead, he wrote a letter.

John Steinbeck passed away four years later.

(Source: Steinbeck: A Life in Letters; Image: John Steinbeck & his wife, Elaine, in 1963, via Stripes.)

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Dear Denny:

I have been filling out my mortal record called a medical passport. There it is—all down there—the past and the future just as plain as the varicosities on my mother's legs and my father's vascular difficulties. There is one thing pleasantly unconfusing about medicine. The direction and the end are fixed and the patient never works backward.

It does occur to me that clear as this picture is, there may be other matters, some taken for granted and others ignored intentionally or otherwise. What is the reason for having a doctor at all? It is a very recent conception. I suppose the present day reason from the patient's point of view is to get through his life with as little pain and confusion as possible and out of it neatly and decently. But for the duration the doctor is supposed to listen to frustrations and to cater to various whims of the central nervous system. I am interested in the line in this thesis of disintegration which indicates that on request, you will keep me in sweet ignorance of what is happening to me. I know it is desired in many cases but I can't understand it from my viewpoint.

What do I want in a doctor? Perhaps more than anything else—a friend with special knowledge. If you had never dived and I were with you, it would be my purpose to instruct you in the depths and dangers, of the pleasant and the malign. I guess I mean the same thing somewhat. We are so made that rascally, unsubtle flares may cause a meaningless panic whereas a secret treason may be nibbling away, unannounced or even pleasant as in the rapture of the deep. Two kinds of pain there are—or rather a number of kinds. I think especially of the teaching pain which counsels us not to hurt ourselves as opposed to the blast that signals slow or fast disintegration. Unskilled,
we do not know the difference and, I am told, even the skilled lose their knowledge when the thing is in themselves. It seems to me that one would prepare oneself differently to meet these two approaches, if one knew.

Then there is the signal for the curtain. I think, since the end is the same, that the chief protagonist should have the right to judge his exit, if he can, taking into consideration his survivors who are after all, the only ones who matter.

Then there is the daily regimen and I have always considered this a fake in most people—the diet, the exercise, the pills, the rest, the elimination. It is probably true that careful following of learned instructions will prolong a usually worthless life, but it has been my observation that by the time the subject needs such advice, he is too firmly fixed in his habits to take it. Oh! he'll do it for a while, but he soon slips back and that is probably a good thing. Pills he will take but little else unless terror should get to him, in which case, many men and women become voluntary invalids and soon find that they love it.

Of course I love to fool myself as well as the next person, but not to the point where I find it ridiculous. I am trying to give you a graph, Denny, so that you will know what you are dealing with.

I do not think of pain as a punishment and I will avoid it as much as I can. On the other hand, to use a common experience, I would rather have the quick and disappearing pain of the dentist’s chair than the drawn out misery of wearing-off novocaine. In most cases, I have been able to separate what hurts from fear of what might hurt.

In reporting effects I am reasonably honest. It is difficult to remember after any trouble has passed. Lastly, I do not find illness an eminence,
and I do not understand how people can use it to draw attention to themselves since the attention they draw is nearly always reluctantly given and unpleasantly carried out.

I dislike helplessness in other people and in myself, and this is by far my greatest fear of illness.

Believe me, I would not go on in this vein, and never do, were it not for the nature of this communication.

I shall probably not change my habits very much unless incapacity forces it. I don't think I am unique in this.

Now finally, I am not religious so that I have no apprehension of a hereafter, either a hope of reward or a fear of punishment. It is not a matter of belief. It is what I feel to be true from my experience, observation and simple tissue feeling.

Secondly—I have had a good span of life so that from now on in I should not feel short-changed.

Thirdly—I have lived very fully and vividly and there is no possibility of cosmic pique.

Fourthly—I have had far more than my share of the things men strive for—material things and honors and love.

Fifthly, my life has been singularly free of illness or accident. At any rate the wellness has far overbalanced the sicknesses.

Sixthly—I do not come to you as a sick man.
Oh! I know the heart syncopates and I have fainted twice in my life and a stretch of overindulgence blocked my gall bladder a couple of times, but all in all I am remarkably healthy. And I know that because my curiosity has in no way abated. And as I said before, I would rather live more fully and for a shorter time.

And now the last thing you should know. I love Elaine more than myself. Her well being and comfort and happiness are more important than my own. And I would go to any length to withhold from her any pain or sorrow that is not needful for her own enrichment.

I hope this is of some value to you. Now, we go on from there.

Yours
John