THE REST OF YOUR LIFE

Revering the Work of Physician Writers

rell before he attended medical school at Columbia University in New York, Dr. Daniel C. Bryant had been captivated by reading and writing, underscored by an undergraduate degree in French literature that he earned from Princeton (N.J.) University in 1961.

In the 1980s, he began to notice that scores of physicians both past and present had written books on nonmedical topics, so he started combing through reference books and secondhand book shops to collect them in earnest.

"The original motivation to collect these books was a combination of my own interest in writing and vicarious writing in a way," explained Dr. Bryant, who practiced internal medicine for 28 years in Portland, Maine, before retiring in 1999. "But also it occurred to me in my practice that doctors are so privileged in their access to human experience. They generally have such wonderful educations and wonderful opportunities to see all sorts of people and to travel and to have cultural experiences. They are the ideal people, it seemed to me, to comment on human experience."

Tapping Many Sources

Names of physician writers such as Dr. William Carlos Williams (1883-1963), a pediatrician and poet, came to mind right away, Dr. Bryant said. To locate nonmedical works by other physicians, he tapped into a number of sources, including the reference guide "Contemporary Authors"; "Poetry and the Doctors" by Charles L. Dana (Woodstock, N.Y.: The Elm Tree Press, 1916); and "Literature and Medicine: An Annotated Bibliography" by Joanne Trautmann and Carol Pollard (Pittsburgh: University of Pittsburgh Press, 1982); as well as secondhand book



Dr. Daniel C. Bryant donated his collection of physician-penned books to New York University's Ehrman Medical Library.

shops in the United States and abroad.

During occasional trips to England with his wife he located many books in Hay-on-Wye in Wales, which is "just a village in Wales, but it's almost entirely book shops," Dr. Bryant said. "We would often spend a few days there, and I'd get a backpack full of books."

Before the Internet, "the only way to really find out who had what books was through catalogs," he said. "I was on the mailing list of many secondhand book shops. I'd get these lists in the mail and spend a few hours a week going through them."

Favorite books he collected include Dr. Williams's first editions and "The Silver River" (out of print, 1938), the first book by Dr. Alex Comfort, who is perhaps best known for "The Joy of Sex" (New York: Crown, 1972).

Dr. Bryant also became a fan of the poet Dannie Abse, a radiologist in Wales who writes poetry and plays, and has penned

five novels. "[Dr. Abse] did incorporate his medical experience into his work somewhat," Dr. Bryant said. represents what I was hoping to find: using the medical experience as a window into the bigger human experience commenting human experience as a doctor."

By 2004, his collection grew to more than 1,100 physician-penned

books, so he donated them to New York University's Ehrman Medical Library, which established the Bryant Collection of Physician Writers, a permanent collection that is believed to be the largest of its kind (library.med.nyu.edu/library/eresources/featuredcollections/bryant).

A Humanistic Outlook

"I always liked the idea that physicians have a little bigger perspective and humanistic outlook on things and figured that if these books were in an area where medical students, residents, and staff passed by, they would think about that," said Dr. Bryant, who lives in Cape Elizabeth, Maine. "I thought that a medical library would be a good place for them."

Over the course of his 20-plus years of collecting the books, he came to realize that he's not alone in his high regard for the craft of writing. "I've had many e-mails and contacts from doctors who write or try to write," said Dr. Bryant, who has had

poems and essays published in medical journals, has written half a dozen short stories accepted by literary magazines, and has composed crossword puzzles that were printed in the New York Times and Los Angeles Times.

"It does seem that a lot of doctors write about medical subjects; there's a lot of interest in medical thrillers. That seems to be a common theme," he observed.

His interest in collecting more physician-penned books "has waned a bit in the last few years, but occasionally I'll send a few more to the Erhman Library that I come across."

He called the avocation "an escape into something that I quite enjoyed. It was my golf, I guess."

As for the Bryant Collection of Physician Writers, he hopes that "it will be added to, that it will inspire medical students and other medical people to take down a book and look at it or even spur them on to do a little writing themselves."

By Doug Brunk, San Diego Bureau

E-MAIL US YOUR STORIES

Do you subscribe to DogSport magazine and pine for your border collie to be "le pooch du jour" on www.agilityevents.net? Have you trained your pug to round up sheep and walk the length of a seesaw? Can your beagle play extreme Frisbee better than you can? If so, you may be a dog agility fanatic, and we would like to hear from you. Please send your story to d.brunk@elsevier.com.

Aetna Exec Defends Its Preferred Provider Rating System

BY ALICIA AULT
Associate Editor, Practice Trends

SAN FRANCISCO — Speaking at the insurance industry's annual meeting, an Aetna executive defended the company's performance-based physician networks, saying that they were a way to keep costs down and to let patients know which physicians offered the best and most cost-effective care.

Dr. Gerald Bishop, senior medical director for Aetna's West division, spoke at the AHIP Institute, at a conference sponsored by America's Health Insurance Plans.

Preferred provider networks have been the subject of legal challenges around the country, most recently in Massachusetts and Connecticut.

Physicians have claimed that the networks use inappropriate

methodology to rate their performance.

In 2007, New York Attorney General Andrew Cuomo struck a settlement with several insurers in which they agreed to publicly disclose rating methods and how

much of the ratings is based on cost, and to retain an independent monitoring board to report on compliance. Aetna was one of the first insurers to sign on to that settlement, and has continued to comply, said Dr. Bishop.

He noted, for instance, that Aetna reviews and updates its provider list every 2 years and notifies each physician in writing if there has been any change in his or her status. Physicians have the opportunity to appeal if there is an error—before any data are made public, he said.

The company also encourages physicians to submit any relevant information from medical records if they have a question about the rating.

Aetna first began developing its Aexcel network in 2002, said Dr.

When considering which physicians were eligible for the network, Aetna looked at the number of Aetna cases managed over a 3-year period; there was a 20-case minimum.

Bishop. The goal was to mitigate rising costs, ensure patient access to specialists, and find a way to recognize the variations in costs and practices in each individual market, he said. The company found that 12 specialties represented 70% of spending on specialists and 50% of the overall spending: cardiology, cardiotho-

racic surgery, gastroenterology, general surgery, neurology, neurosurgery, obstetrics/gynecology, orthopedics, otolaryngology, plastic surgery, urology, and vascular surgery.

When considering which

physicians were eligible for the network, Aetna looked at the number of Aetna cases managed over a 3-year period; there was a 20-case minimum.

The company also uses nationally recog-

nized performance measures to gauge clinical performance. Physicians who score statistically significantly below their peers are excluded.

The company also uses the Episode Treatment Group methodology to evaluate 3 years of claims for cost and utilization patterns. A physician is consid-

ered efficient if his or her score is greater than the mean for that specialty and that market, said Dr. Bishop.

The Aexcel network now exists in 35 markets, covering 670,000 members. Aetna members in most, though not all, those areas can log onto a secure patient Web site and see costs for various procedures and information on why his or her physician has been designated a preferred provider in the network.

Dr. Bishop said that Aetna has determined that physicians in the Aexcel network typically perform 1%-8% more efficiently than their peers. Each client could save up to 4% of annual claim costs if all its covered workers used the network, he said.

Although some physicians have been unhappy with the designations, "amazingly few physicians balk at this," said Dr. Bishop.