

BECOMING A QUALITY-OF-LIFE DOCTOR

The number of Americans who could benefit from palliative care could double in the next 25 years says the Center to Advance Palliative Care. As baby boomers age, the current estimate of six million people in need of palliative care is expected to grow quickly. For those like Sunita Puri, medical director for palliative care at the Keck School of Medicine of USC, a key question leads the work of the team: "If a patient cannot be cured, what medical care will help them live the life they have left to its fullest?"

"I define my job as being a quality-of-life doctor," says Puri, a recent co-recipient of the Etz Chaim Tree of Life Award of Compassionate Care.

Puri trained in internal medicine, but she has a passion for writing and language. She's published essays with *The New York Times* and *Slate*. Her attention to language has let her recognize the ways that patients understand and implement their care. She points out that "palliative care" as a term can be an obstacle. "Many people think receiving palliative care services means they're about to die," she says, or they "fear we're going to come in and hasten people's deaths, convincing them or their families to stop treatment."

Puri's first book was a literary memoir, and she describes the draw to her medical specialty this way: "I've had an obsession with the power of language for as long as I can remember. Compulsive attention to language is so important in palliative medicine. It's not going in and asking, what do you want us to do for you. It's shifting the conversation to, 'Given where we are medically, what is most important to you? We can then match our medical plan to prioritize your goals.' That's a very different conversation."

In her work, Puri says the word "better" is key. If a patient can't be cured, how might they describe getting "better" in the time they have left? The answers vary widely, and listening to those responses is a big part of her job.

"If you're living with a cancer we can't cure, does it mean being able to walk around or garden?" she says. "Does it mean being strong enough to go to your daughter's wedding? Tell me what better means, and we need to get really granular. The choices we make in death are as personal as those we make about life."

The field of palliative care is both an art and a science. Puri has established a fourth-year elective to explore the daily routines of palliative care, in large part due to students lobbying for its creation. Students spend two to four weeks rotating with Puri and her team, learning to conduct sensitive conversations, to treat troubles, pain, and anxiety.

"The level of excellence of these students is consistently far beyond what I've encountered at other places," she says of her students. "As a group, they have a unique combination of humanity and compassion, intelligence and drive to be intellectually good doctors but with a huge heart. Having students like that on rotation

gives me confidence they will serve their patients with a real understanding of this important work." ([USC News](#))