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# Better: A Surgeon's Notes On Performance



## **Synopsis**

National Bestseller The struggle to perform well is universal: each of us faces fatigue, limited resources, and imperfect abilities in whatever we do. But nowhere is this drive to do better more important than in medicine, where lives may be on the line with any decision. Atul Gawande, the New York Times bestselling author of *Complications*, examines, in riveting accounts of medical failure and triumph, how success is achieved in this complex and risk-filled profession. At once unflinching and compassionate, *Better* is an exhilarating journey, narrated by "arguably the best nonfiction doctor-writer around" (Salon.com).

## **Book Information**

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## **Customer Reviews**

First, as a quick proxy of how good it is, and as a way of enticing busy readers, I should note that I finished Atul Gawande's book *Better: A Surgeon's Notes On Performance* in less than four hours. I can't remember the last time that happened. True, it's a relatively short book, and I had some uninterrupted time on a bus. But mostly it's that Gawande is a straightforward, energetic, thoughtful writer whose essays relentlessly pull you forward. Each discusses one or two ideas in enough depth to make you realize that they're not easy problems -- which is all most people need, and which does a world of good on its own. Every country has its unquestioned assumptions; it's the rare writer who helps us question them and gently remind us that if there were easy solutions, we'd have found them by now. Gawande is good at that. The most moving and thought-provoking of these essays, to me, was "The Doctors of the Death Chamber," in which Gawande interviews four doctors (whom he

labels "A," "B," "C" and -- wait for it -- "D," in order to secure their anonymity) who help states carry out the death penalty humanely. The use of "humanely" here is questionable; it's humane in the sense that, if we are to use the death penalty, we must not be needlessly cruel at the time of the criminal's death. But it's inhumane in the larger sense that we are furthering a corrupt system -- we are "tinker[ing] with the machinery of death," to use Justice Blackmun's words. Since a doctor's role is to protect human lives, are anaesthesiologists who help execute people painlessly violating their roles? To put it more succinctly: should a doctor make the best of the machinery of death, or should he take no part in the machine? The American Medical Association has its answer and its role.

Atul Gawande is a general surgeon at the Brigham and Women's Hospital in Boston and -- from everything I've heard and read about him recently -- one of the best of the new breed of medical writers who devote their prose to informing the general public about important concerns in the world of medicine. If this new book, "Better: A Surgeon's Notes on Performance," is a representative example of his usual writing talent, I will completely agree with the above assessment. This collection of original and previously published essays is highly readable and very interesting. Normally, I am not all that interested in reading about medical topics unless it impacts me personally. I'm not a great fan of hospitals nor am I enthusiastic about going to a physician. Fortunately, for most of my life I have enjoyed relatively excellent health. My attitude, however, changed five years ago and Gawande's book takes on some genuine relevance for me. How so and why? In a section of his book, entitled "The Mop-Up," Gawande discusses polio and the campaign to wipe it out in Asia wherein he was a momentary observer in the field in 2003. Way back in ancient history, when I was a mere child in the 1940s and America was hit with a polio epidemic, I was diagnosed with polio and almost died. Hence the relevance here for me. But more than that, I am convinced to this day that I was "saved" because of the efforts of a nurse -- I'm sure she was one of Gawande's "positive deviants" which he describes in his book -- who insisted on treating me and others with a controversial treatment (opposed by most of the medical "establishment" at the time) called "The Sister Kenny Method." She never lost a patient, by the way; we all recovered without any significant aftereffects that I know of.

This book will be a great read for you if you're interested in the practice of medicine and how it could be done better. You'll love it if you simply enjoy lucid writing about the practice of medicine. But this book also offers you great lessons if you want to understand how science and performance management come together as they should in business or any other field of endeavor. That's

because the author sets out to answer a question that is as important for people in business as it is for people in medicine. What does it take to be good at something when it is so easy not to be? Gawande ways that most people, especially physicians, think that success in medicine comes from canny diagnosis, technical prowess and the ability to empathize. They think that progress in medicine comes from scientific breakthroughs and sophisticated equipment and procedures. The reality, though, is quite different. Improved performance, according to Gawande, comes from Diligence Doing Right Ingenuity Again and again Gawande demonstrates how concentrating on patients and on performance leads to improvement for both individuals and for medical practice in general. He does this with a mix of historical examples, patient stories, statistics and stories from his own life and practice. He divides the book into three sections corresponding to his three necessities for improvement. In the section on Diligence the chapters are on washing hands, dealing with polio in India, and dealing with casualties from the Iraq war. The chapter on military medicine and the concentration on process improvement is worth the price of the book if you're in business.

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