

# H O U S E CALLS

With Her *New York Times Magazine* Column, Dr. Lisa Sanders '79 Visits Thousands of Homes Each Week

BY BRITTNEY PESCATORE '07

**Dr.** Lisa Sanders '79 is very different from the star of *House, M.D.*, the television show that she helped inspire and for which she now serves as medical advisor. Not only is she much nicer than the famously ornery Dr. House, she also has a very different approach to the practice of medicine.

In the pilot episode of the show, House sends some young doctors to break into a patient's home to try to find clues about what was wrong with the patient.

"I've never broken into my patient's house," says Sanders. "Not once. I've never even been tempted to."

Sanders, an assistant professor in internal medicine at the Yale School of Medicine, does have something in common with the fictional doctor: Like House, she is fascinated by diagnoses. Since 2002, she has

been writing a monthly column called "Diagnosis" for the *New York Times Magazine*. Her column typically focuses on specific stories where a patient's unusual problem at first confounds doctors until someone starts thinking creatively and the correct diagnosis is made.

Sanders says that it can be "tricky" to translate technical medical information into everyday language.

"I think of myself as a good communicator, but I have to say my editor often will send me back a note, 'What is this?'" she says. "I'll think

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it's a word that everybody understands and knows, because medicine is a language as much as it is a body of knowledge."

Despite the occasional lapse into obscure medical jargon, Sanders is as much a writer as she is a doctor. She majored in English at the College and then went on to a career in broadcast journalism, working for ABC's *Good Morning America* for a few years before moving on to CBS.

She stayed at CBS until the first Gulf War broke out and everyone was required to work 18-hour shifts, which interfered with her ability to go to pre-med classes. At that point, she had lost interest in journalism after coming to the realization that the news business was undergoing a fundamental change toward a more profit-driven enterprise. Medicine had always been something that interested her, and so she enrolled in the two-year Post-Baccalaureate Premedical Program at Columbia University. In the fall of 1992, at the age of 36, she entered the Yale School of Medicine as the oldest member of her class.

Sanders did her internship and residency at Yale's internal medicine program. She was made chief resident in 2000.

During that time, Sanders grew interested in the diagnostic process that doctors undergo when treating a patient; she couldn't help but share that interest with other people.

"What I didn't know about medicine is that the most interesting stuff that goes on is figuring things out. I didn't really know this from the out-

side," she says. "So when I got to med school and saw all these incredibly dramatic, compelling, intellectually stimulating stories, I'd come home and tell these stories at the dinner table."

Her dinnertime stories were not easily forgotten.

"One of the people who [used to hear the stories] eventually got a job at the *Times*," says Sanders. "He called one day and said: 'You know those stories you used to tell at the dining room table all the time? I think it'd be interesting to have them in the newspaper.'" His original plan was to go out and find a professional writer:

"But I guess no one saw them the way that I did," said Sanders. Her editor suggested that she write the column herself and she agreed. "He said, 'That's great; your deadline is in four days.'"

The column caught the attention of Paul Attanasio, one of the executive producers of *House*. Sanders says he called her up and told her he was working on a show about diagnoses that she might be interested in. She later found out that the show was inspired at least in part by her column.

Each episode of *House*, much like Sanders' column, tends to revolve around unusual medical problems that the characters, led by Dr. House, work to diagnose in time to properly treat the patients. As medical advisor for the show, Sanders sends the producers ideas for weird diagnoses when something interesting crosses her desk. She also



**Dr. Lisa Sanders '79 with fellow medical personnel, including Dr. Tracy Rabin '97 (center)**

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reviews each script a few weeks before they start shooting to make sure things make medical sense. For entertainment’s sake, her advice doesn’t always get taken.

“Sometimes things are more important than being medically accurate,” she says. “I don’t think anybody would mistake *House* for reality, so I’m just not too worried.”

One of the least accurate things about the show is Dr. House’s uncanny ability to make every diagnosis before the episode’s hour is up, saving most of his fictional patients in the nick of time.

Despite Dr. House’s amazing success rate, Sanders emphasizes that it is actually “ridiculously frequent” for a doctor to send a patient home after treatment without ever really figuring out what made them sick in the first place.

“The technology of treating a patient now is so incredibly good that there are often times when somebody will come in sick-as-stink, you treat based on what you see, they go home and you never really have a total answer,” she says. “Sometimes they come back because you only partially treated them, but often they’re fine and you never really know.”

Not all of Sanders’ columns have as satisfying an ending as a *House* episode. In one of her favorite columns, she tells the story of a 17-year-old boy who had a sore throat and kept insisting that it felt like something other than strep throat.

“But no one listened, because he was just a kid,” says Sanders.

Although a doctor eventually made the correct diagnosis, the appropriate treatment had been delayed. What he had was a rare infection, Lemierre’s disease, which had almost disappeared but is now making a comeback. What he didn’t have, as he knew from the beginning, was strep. The boy did not recover in time and died. The story is sad, but Sanders says it’s one of her favorites because it represents an important problem in medicine: “Doctors just don’t believe patients.”

Sanders does not share Dr. House’s view on patient input. In the show’s pilot episode, Dr. House shows no interest in talking to the patients, claiming that they lie too much. Dr. Sanders has a very different take.

“I think it’s the most important thing we do as doctors,” she says. “The most important information that’s transmitted from doctor to patient comes from the patient. Certainly it’s true that patients are likely to lie to House, but that has to do with who House is.”

In case there’s any doubt that Sanders is committed to hearing patients’ accounts of their illnesses, the title of her forthcoming book sends the message home: *Every Patient Tells a Story: Medical Mysteries and the Art of Diagnosis*. The book is the newest project that Sanders has added to her busy schedule of clinical teaching, column writing, show advising, and parenting her two daughters, ages 11 and 14.

"[The book] takes you backstage and to doctor's water fountains, where we talk and think about patients," says Sanders of *Every Patient Tells a Story*, which comes out this fall.

Only about a third of the book draws from material already discussed in her columns; the rest is new information that she's been researching over the past few years. She says that writing a book is a different kind of challenge from writing a column. Then there's the added difficulty of finding the time.

"I get up at 4 a.m., write until 7 a.m. when the kids get up," she says. "One and a half days a week are just my writing days, after I take my kids to school." But the rest of the week, says Sanders, she's busy writing her *Times* column and teaching at Yale.

Still, Sanders maintains that the tasks of writing her column, authoring a book, and even practicing medicine aren't all that dissimilar.

"Doctors are fundamentally storytellers, but the story we tell always has the exact same format, and that's the format I imitate and reproduce in my column and book," she says. The format begins by looking at the patient's story; next, it discusses the physical exam and then moves on to the diagnostic testing. The last part focuses on how doctors think.

Unlike her columns, the book focuses a lot more on where things go wrong in the diagnostic process. She says that, in her columns, she often glosses over the fact that somewhere in the story there was a doctor who made a mistake. The book focuses on what causes diagnostic error; looking mostly at failure in data collection.

Sanders' emphasis on getting the right diagnosis is where she and Dr. House can always agree.

"If something doesn't make sense to him, he's all over it. And I think that's what we all hope for in our doctors." ■

## DIAGNOSIS: Forgetting Everything

By Lisa Sanders '79, M.D.

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### 1. Symptoms

The flashing icon announced that an instant message had arrived. The young woman at her computer at work clicked on it eagerly. It was from her fiancé. Silly boy. She'd only left him an hour ago.

"Something's wrong," the message read.

"What do you mean?" she shot back.

"I can't remember anything," he wrote. "Like I can't tell you what we did this weekend."

The young woman's heart began to race. Her fiancé had been strangely forgetful lately. She thought maybe he was just tired. He'd been having trouble sleeping for a couple months — ever since they'd moved in together. The previous weekend they went to New York to plan their wedding. He had been excited when they set up the trip, but once there he seemed unusually quiet and hesitant.

"When is our wedding date?" she quizzed. "Can you tell me that?"

"No :("

"Call the doctor. Do it now. Tell them this is an emergency."

Over the next half-hour the 27-year-old man put in three calls to his doctor's office, but each time, he would forget what they told him by the time he messaged his fiancée. Separated by miles of Interstate and several suburbs, the young woman was frantic. Finally, at her insistence, the man, now terrified, asked a friend to take him to the closest hospital.

A few hours later, her cellphone rang. At last. He was being discharged, he told her. The emergency-room doctor thought his memory problems were caused by Ambien, the sleeping pill he was taking. The doctor said the symptoms would probably improve if he stopped taking the medication. Probably.

"Don't go anywhere," the young woman instructed. "I'll pick you up. I'm going to take you to your doctor." She found him wandering the street near the hospital, uncertain about why he was there and even what her name was. She hustled him into the car and drove to

his doctor's office. From there they were sent to Brigham and Women's Hospital in Boston.

For part 2 (*Investigation*) and part 3 (*Resolution*), visit [www.wmalumni.com/?summer\\_09](http://www.wmalumni.com/?summer_09). For more "Diagnosis," visit [www.nytimes.com/pages/magazine](http://www.nytimes.com/pages/magazine).



A scene from *House, M.D.*, the show that was inspired by Dr. Sanders' *New York Times Magazine* column. Pictured above (clockwise from bottom left) Jennifer Morrison, Jesse Spencer, Lisa Edelstein, Robert Sean Leonard, Omar Epps and Hugh Laurie (center) as Dr. Gregory House.

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