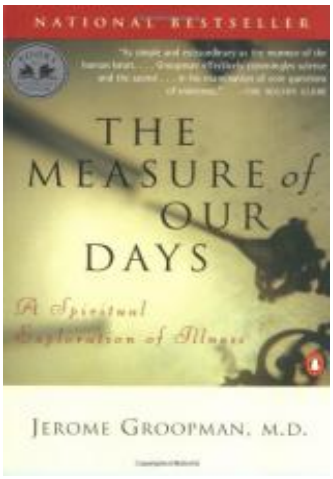
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# The Measure of Our Days

by Jerome Groopman, M.D.




## About the Book

Jerome Groopman's The Measure of Our Days is about what we can learn about living from the experience of severe catastrophic illness. Dr. Groopman has gained a rare understanding of the value of confronting one's mortality, both for the person who is ill and for his or her loved ones. The eight patients he profiles vary widely in their personalities and in their illnesses, yet each of them ultimately demonstrate heroism, strength, and the power to alter their lives no matter what their prognosis.

These tales of illness also illuminate the physician's role as healer, confessor, teacher, and friend. Dr. Groopman is an accomplished and thoughtful physician, one who is willing to engage in relationships with his patients that transcend office visits and hospital rounds. Still, it is the patient who wages the real battle against illness, and Groopman shows us how each of his patients develops his or her own combat strategy: Kirk, the venture capitalist, approaches his cancer as aggressively as he would pursue a risky investment; Debbie, a follower of New Age philosophies, turns to the Tao for treatment; Alex, a Swiss architect, draws strength from the devotion of his partner; and Elliott takes comfort in a "gut" feeling that he will survive a dangerous bone marrow transplant. Some of Groopman's patients lose their fight with death, but the resources they develop during their ordeals greatly enhance the remainder of their lives and the lives of those who love them.

The phrase "the measure of our days" comes from a Psalm of David and suggests the limit of our time on earth. To the uninitiated, it may seem that patients undergoing treatment for life-threatening illness measure their lives in doses of medicine, amounts of radiation, months between treatments, odds for survival. In fact, though, these eight portraits show that with guidance from physicians like Groopman, days lived in the shadow of death can be characterized by the counting of blessings.

## Discussion Guide

**1.**In what ways has facing death even temporarily improved the lives of the patients profiled here?

**2.** What makes a good doctor? Compassion? Good medical decisions? Being up on the latest research? Which is the most important of these traits? What other traits are important?

**3.** A deeply spiritual person, Groopman draws from his religious background in treating his patients. How does this added dimension enhance his medical knowledge?

**4.**Groopman grew up with the specter of the Holocaust and the damage it did to members of his family. How do you think this legacy of physical and emotional suffering prepared him for a life in medicine? What about the effect of his father's death of a heart attack in front of him while Groopman was still a medical student?

**5.** In Kirk's story, Groopman asks the question "How rational can our decisions be when we are desperate and feel unprepared to die?" (pp. 18-19) Does the doctor ever have a responsibility to assert his or her will over that of the patient? What should be taken into consideration before a doctor allows a patient to do something that is not medically advisable?

**6.**What do you think of Cindy's decision to bear a child even though she has AIDS? Was it wrong for her to risk the health of her future child, or does the desire for children, and the certainty that they will be cared for, outweigh that risk? Does she, as an AIDS victim, have the right to bear a child?

**7.** What do you think of the way Groopman handled Debbie's resistance to radiation therapy? Should he have been more forceful in trying to convince her that it was necessary to her recovery, or does he have a stronger responsibility to honor her belief system?

**8.**Discuss, in light of the recent controversy over assisted suicides, the plight of Alex, who asked to be allowed to die when he was actually only suffering from an allergic reaction to a drug situation that could be, and was, easily reversed. Does the potential for these types of situations justify the prohibition of assisted suicides?

**9.** In Elliott's story, Groopman refers to his "choosh," a Yiddish word for a feeling that emanates from the spirit that Elliott will survive his cancer. Does this kind of intuitive, rather than practical, prognosis have a place in medicine? Why or why not?

**10.** Groopman writes, "There is magic and intimacy in the moment when death appears defeated. It envelops the patient and his doctor in an almost mystical embrace. A powerful force, the force of reclaimed life, flows between you." (p. 97) Death is a force as well; should we avoid it at all costs? When is death the natural, and correct course? Groopman has taken steps to educate himself in the theories and practice of alternative medicine. Does this enhance his effectiveness as a doctor of traditional western medicine?

## Author Bio

Jerome Groopman, M.D., is the Dina and Raphael Recanati Professor of Medicine at Harvard Medical School, and the chief of Experimental Medicine at Beth Israel Deaconess Medical Center in Boston. He is one of the world's leading researchers in cancer and AIDS; his laboratory helped to develop the new protease inhibitors for the treatment of AIDS, and in January of 1998 his laboratory identified another gene that appears to play a role in breast cancer. Groopman has written widely for such publications as The New York Times, The Boston Globe, The New Yorker, and The New Republic, and he and his work have been featured in The Wall Street Journal, Time, and The New York Times. He lives with his family in Brookline, Massachusetts.

## Critical Praise

"To deal constantly with the worst diseases but to preserve all one's humanity, one's hopefulness, one's dedication to life, makes for an ideal physician; and if that physician can also write beautifully, tenderly, truthfully of his patients, and of his complex, delicate relationships with them, you have a remarkable book, you have The Measure of Our Days. "

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