

Raymond C. Barfield, *The Practice of Medicine as Being in Time*, Studies in Medical Philosophy, no. 8, Stuttgart: *ibidem*-Verlag, 2020, 160 pp., ISBN 978-3-8382-1427-6

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Raymond Barfield is uniquely placed to examine medical practice through a philosophical lens. Integrating a deep philosophical understanding of Martin Heidegger's thought with extensive experience as an oncologist and palliative care physician, he successfully brings forth a series of fundamental philosophical questions and impressions regarding the current state of the medical field.

In this endeavor, Barfield discusses Heideggerian concepts such as "Dasein," "clearing," "falling," "thrownness," "average everydayness," among others. He uses these as a framework to analyze modern trends in the medical institution. From the language and terminology that is used in hospitals,⁵ to the place and role of death,⁶ all imaginable aspects of medical practice are addressed in this book. Barfield goes so far as to wonder why patients must wear gowns,⁷ what a medical practice ruled by algorithms, AI and machine learning would look like,⁸ and why it was once considered that newborns do not feel pain.⁹

Such an analysis is not an easy undertaking. This results in dense chapters, filled with insights and observations combining medicine and philosophy, which sometimes require prior knowledge in both fields. Luckily, Barfield cleverly applies the Latin maxim *bis repetita placent* and repeats some of the pillars of his analysis through the book, such as questions regarding language and the broader critique of modern medical education.

⁵ Raymond Barfield, *The Practice of Medicine as Being in Time* (Stuttgart: *Ibidem*-Verlag, 2020), 58.

⁶ *Ibid.*, 67.

⁷ *Ibid.*, 78.

⁸ *Ibid.*, 85.

⁹ *Ibid.*, 41.

Indeed, concern about the inappropriate training of future doctors is a recurring theme. Similarly, the prominent notion of language is presented several times from different angles.¹⁰ Doctors, says Barfield, are taught to speak in terms of biology, law, finance and risk management. Yet what the practice needs is storytelling.¹¹ By this he means being able to make sense of the experience of disease and death, instead of merely focusing on the technical elements and the cost-benefit calculation of medical intervention. Storytelling allows for a much deeper understanding of the experience of suffering by fully embracing the philosophical questions surrounding the practice of medicine. In fact, Barfield goes further and claims that the ignorance of philosophical questions in medicine amounts to a form of malpractice.¹²

There is a parallel between Barfield's insistence on storytelling and the style and form of this work. The author practices what he preaches. He generously uses pertinent analogies and metaphors, and is quick to capture the reader's attention with smart, to-the-point, and sometimes even shocking illustrations. To take just one example, when Barfield challenges modern-day gnostic medicine and suggests that it may be blind to perhaps crucial aspects of life, he explains that the medical field is prone to paradigm shifts.¹³ To demonstrate this, he recalls that until the late 1980s newborn infants were operated on without anesthesia as it was assumed that "they could feel no pain the way older children do."¹⁴ For the uninitiated reader, such disturbing passages strike a chord.

Perhaps one of the strongest and most vivid stories Barfield tells is of the (hopefully wrong) vision of a dystopian future of corporate medicine.¹⁵ A vision based on artificial intelligence and machine learning, rendering the field of medicine entirely focused on economic efficiency, and thereby leaving aside all human aspects. He describes a system that would sink into indiscriminate utilitarianism, under the yoke of what Heidegger would call the demands of modern technology. This draws upon another central theme of the book: the corporate transformation of

¹⁰ Ibid, 58.

¹¹ Ibid, 89.

¹² Ibid, 62.

¹³ Ibid, 103.

¹⁴ Ibid, 41.

¹⁵ Ibid, 87.

medical practice. A transformation which Barfield profoundly laments.

The title of the book, *The Practice of Medicine as Being in Time*, which Barfield himself admits is odd,¹⁶ sums up the two Heideggerian dimensions which serve as the background against which the entire framework of this book is set: Being as embodiment and Time as limitation. Barfield illustrates embodiment as the cornerstone of Being in medicine, visible in the way in which medical students are taught the technical and biological aspects of the human body. They are also, or at least should be, taught the experience of engaging with the body as part of their profession. This is a dimension which, according to the author, is sacred and must not be neglected in favor of some purely biological or anatomical understanding.¹⁷ As disease attacks the body, Barfield wonders why we become anxious about the disease, why we are not just annoyed by it¹⁸ (the reader will quickly get used to this dynamic pace of the book as it continually shifts between the perspectives of the doctor and the patient). This anxiety implies that our understanding of the embodied experience isn't merely mechanical, but rather relates to the realization of life as limited, as opposed to limitless (in Time). The illusion, if not deception, of modern medicine, is that it attempts to artificially dissolve this limitation of life by promising an escape from death and disease.¹⁹ Consequently, this also removes the element of anxiety which, according to Heidegger, is crucial to philosophical growth. Barfield makes the following analogy: as cartoons are to real life, modern medicine is to the reality of our limited life.²⁰

As an evaluation of the institution of medicine, the book's critical thesis is founded on a set of values: equity, honesty, racial justice.²¹ Although it is only explicitly mentioned once or twice, there is a strong undertone throughout the book which hints at a form of normative universality. Even though it is expected as an *a priori* starting position, perhaps an elaboration of this universalist approach would not have been redundant. It raises questions regarding the compatibility of the text with Heideggerian thought for,

¹⁶ Ibid, 11.

¹⁷ Ibid, 24.

¹⁸ Ibid.

¹⁹ Ibid, 28.

²⁰ Ibid, 30.

²¹ Ibid, 95-100

although not classified as a relativist, Heidegger does question the possibility of universal knowledge. In this well-written book, this is the sole point that leaves the reader with a thirst for more.

The Practice of Medicine as Being in Time is a refreshing look into the uber-rational world of medicine. It is addressed not only to doctors and healthcare professionals, although Barfield encourages them to undertake a thorough analysis of the philosophical understanding of their field of practice, but also to philosophers who, although not specifically involved in the medical field, may find interest in Barfield's application of philosophical ideas to new areas.