Cancer narratives: words beyond disease—a call for submissions

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The practice of medicine and the experience of being a patient or a caregiver both provide rich thematic material for the creation of narratives—or, to put it more plainly, story-telling. Increasingly, the art of the medical narrative is finding a home within medical school curricula, university course offerings, PubMed searches, and top-ten bestseller lists.

The strength of the medical story often lies in multiple domains. In some instances, it is the unique perspective of the narrator; in others, the viewpoint of a patient or a loved one dominates. Some stories focus on conflict, others on resolution, and still others on unanswered or unanswerable questions. Some narratives are created to illustrate novel or unique viewpoints; others are drafted as a coping mechanism to externalize thoughts, emotions, or uncertainties that can be universally shared. Some stories can be carefully planned to illustrate a teaching point or a communication strategy; others can flow as a stream of consciousness or an emotional unburdening, capturing images, interactions, or atmospheres, and hoping to inspire or provoke.

The experience of cancer, shared by so many, provides a particularly distinctive storytelling canvas, regardless of viewpoint. The lens through which cancer caregivers, survivors, and loved ones see the world is often focused on universal themes such as fear, hope, loss, love, uncertainty, threat, and legacy. Cancer narratives can do what hours of medical lectures or Internet browsing cannot, framing daily dilemmas and emotions within a shared experience of involvement with people suffering from, surviving despite, or coping with cancer.

It can be intimidating to consider sharing emotions or conflicts with an audience outside one’s own head or immediate surroundings. It can be difficult to predict how others will react to thoughts or questions set forth on the printed page. It can be unsettling to think of colleagues and patients reading about previously private experiences in the absence of any opportunity to clarify or modify. Narratives can engender all those concerns, and yet the ones that give wider meaning to daily experiences and tap into a shared clinical and emotional framework elicit far more support than criticism or rebuttal.

So, what is this section expected to convey? Ideally, it will provide a venue for inspired cancer-related writings from a variety of perspectives. Submissions from all members of the cancer care community are encouraged. Learners at all levels; anyone involved with cancer care, including nurses, supportive care providers, and pharmacists; and patients and their loved ones are all welcome to contribute. The focus should be on issues or themes of general relevance considered from a personal or unique perspective. Clear, creative writing describing the struggles, conflicts, joys, and other emotions encountered in clinical practice and having the potential for resonance within the broader cancer community are strongly encouraged. Write to educate, advise, inspire, move, or challenge us. For full details on the submission process, please visit the Information for Authors page at Current Oncology on the Web: http://www.current-oncology.com/index.php/oncology/about/submissions.

As the era of evidence-based medicine matures and that of personalized medicine unfolds, there is no higher level evidence for the existence of a cancer care community—or anything more personalized—than a unique narrative shared with readers who might identify with where the writer is coming from, or who can at least understand or learn from the experience revealed.

We look forward to your submissions and hope that this section becomes a welcome addition to our collective educational and professional development.

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