Hugh Silk 00:21
Welcome back to the podcast Murmurs: Stories from Our Journey in Medicine. This podcast series is meant to act as reflective experience for the way health providers and those in training think about their patients in medicine. Not so much about how they make diagnoses, but about how they relate to their patients, continue to think about them long after a visit, and what makes doctors and nurses tick. Each episode, we will interview someone from UMass Medical School who has written a creative piece and listen to the story behind it. The hope is that this podcast will inspire others to be more reflective practitioners as well. Hi, I'm Hugh Silk.

Jesse Sardell 00:56
And I'm Jesse Sardell.

Hugh Silk 00:58
We're hosting another episode of Murmurs: Stories from Our Journey in Medicine. Our guest today on Murmurs is Mina Botros, who just completed his second year of medical school at UMass Medical School. I heard Mina read the reflection he is going to share with us today this spring at our school's Med Moth, an event that is held two to three times a year and modeled after The Moth storytelling series that many may have heard on NPR. I was struck by his experiences during the pandemic as a student and asked him to join us on Murmurs for a reading and an interview. Thanks for coming today, Mina.

Mina Botros 01:31
Thanks for having me.

Hugh Silk 01:33
So before we get to your reading, can you tell us a little bit about yourself, like where you grew up? And how did you come to be in medical school?

Mina Botros 01:41
Absolutely. So I was originally born in Egypt, and I ended up emigrating from Egypt to the US with my family when I was about six years old. And to be honest, we had basically nothing when we first moved here to Massachusetts. In fact, we effectively were couchsurfing for the first year with various relatives as my parents started to build a more stable life for me and my siblings. And back home, my dad was an engineer, my mom was an accountant. And when we moved over here, they basically had to scrap
that and start from scratch. They were working long hours at a pizza shop, until eventually they saved and learned enough to run one for themselves. But where my parents might have lacked in some of those like startup costs and stuff like that, they really made up for it in a love for imagination and building. So whether it was Legos or couch cushion forts, there was always some sort of activity to be had. And so growing up watching my dad work on electronics, which he brought, again, just as a hobby from when we lived in Egypt, I thought I wanted to be an engineer for the longest time. But something struck me when I was in high school, that to this day, I can't entirely explain, but I knew I wanted to do something more directly involved with people. So I took the middle route where I studied biomedical engineering at BU. And while I was there, a series of life events and lessons learned solidified my desire to care for others as a physician specifically, and soon after, I found myself exactly where I wanted to be, here at UMass Medical School with a remarkable community and focus on people.

Hugh Silk 03:19
Oh, yeah, that sounds like, like, you've had a lot of, you know, sort of life experiences and your family and personally, I sort of had a feeling, you know, people will understand that in a minute. When you read that, you sort of, you know, think about relating to people and what have you. Let me ask you a slightly different question. Are you like, naturally a writer meaning do you do you write regularly? Or did the pandemic just inspire you to reflect on what was happening around you and to you?

Mina Botros 03:49
So that's actually a really interesting question. In particular, because you said, naturally a write. I wouldn't say I was ever naturally a writer. I do enjoy reading, and I love talking to people and hearing people out. But oddly enough, one of the things that drew me to studying engineering in the first place was that I could avoid entirely some of the otherwise required writing and English courses while I was in college. And so I remember putting off my freshman writing seminar until my senior year actually, and it ended up being a great decision because in that final seminar, right before I graduated, I met Dr. Emily Allen, who completely empathized with my position. She wasn't a writer herself. She was in the sciences, but then found a space to express herself and showed me how I can express myself freely without the same kinds of restrictions that I grew up thinking had to be associated with writing, all the rules, all the regulations, dot these I's, cross these T's. She basically said, express yourself how you see fit, and we'll make it work. And I loved it for that, it really started to grow upon me. And so when I got to med school here at UMass, I came upon the writing elective taught by Dave Hatem, whose Murmurs episode I actually recently listened to. And it was in his class where I realized just how vital it is for us to relate our experiences, both in life and in medicine through our words. And so I don't often write pieces that I expect to share, it's actually very seldom that you'll come across something that I intend to put out there. But I do journal in long form as regularly as I possibly can. And over the years, that's become my favorite way to both express and understand myself. And through it, occasionally, something comes out that I want to share with others.

Hugh Silk 05:37
I love that you that you do that, I, you know, I do a lot of writing. But if you looked at my resume in terms of how much has been published, it's very small. And I think sometimes we do we just write for ourselves, and it helps us to reflect on it. So, you know, I think that's great that you're doing this already early in your career. So, so that people can get a sense of what you wrote, why don't we have you read
the first part of your essay, we're gonna do something unique here. We're gonna stop you like about a third into it. But why don't why don't you start to read your piece?

Mina Botros 06:11
Sure. So my piece was called People and Places. It started off small as things often do. It was March 2020. I was on a spring break mission trip in the Dominican Republic when the notices started to trickle in. Classes may no longer be in person upon our return. We might have to wear masks on campus, in stores, maybe even outdoors. But for how long? No one knew with any real clarity. There was an air of uncertainty. The summer came and went. The lockdown was real, far more real and far longer than I had anticipated. What is a "quarantine," I asked. I'm not sick, it must not be for me. But it was for all of us, millions of Americans, not to mention the billions of world citizens were asked to stay home and stay safe. As it turns out, this little blip that came to be known as the pandemic was very real and very dangerous. Not everyone thought so however. Though some of us in the medical field were unfortunately privy to the devastating state of the hospital ICUs, the mere existence of the COVID-19 virus was a polarizing topic. It's hard to imagine that something we cannot see can be causing so much harm. For some, it was too hard to imagine. Against the backdrop of social unrest and political mistrust that this past year had in store for us, this was too much for far too many of us. In such a short span of time, the pandemic grew to be one of the biggest parts of our lives. It's tough to say that we ever really got used to it. "The new normal" was a phrase that sent chills down my back. When I first heard it, it had been months since I had shaken someone's hand. Instead, I did the awkward dance around what is and is not acceptable, like so many others. The social encounters, when we were privileged to have them in person, were the toughest parts. It can quietly eat away at you when you realize that you hadn't seen someone smile in so long, that you're scared to see your friends and loved ones, that a hug may mean endangering someone. This can't possibly be normal. Fortunately, it didn't have to be. After months of dedicated efforts, the scientific community came through with a potential light, the development of vaccines. For many of us, the first word of this was a breath of fresh air. We just need to get a shot or two, then we'll be home safe. It's almost over, I thought. Well, as it turns out, there's still much to be done. We needed to get those shots and get them to others. And I was fortunate enough to be part of those efforts.

Hugh Silk 08:38
Thanks Mina. So before you go on, I just want to say your thoughts are so raw and those early paragraphs, I feel like I'm transported back to those early days of the pandemic, this sort of the disorientation, the questions of like, what's going to come next. So you describe well, like what's happening around you, but I'm curious, like, what were you feeling? What was going on emotionally for you in those early days?

Mina Botros 09:03
Yeah, so I think we're all gonna remember the beginning of this pandemic, in particular, just all the confusion, all the things that we did and did not know moving forward. And I know for me, particularly, I happen to be away for a medical mission trip in the Dominican Republic. So news was coming at a particularly slow pace, we could only check our phones and our emails maybe once a day, just before we went to bed. And as a result, we're kind of hearing of things from a distance. So I knew I was going to be away, I knew I was going to be coming back to a totally different sphere. But what I didn't realize
was just how different things were going to be. When everything was moved back, when the stay at home orders were put in and classes were moved online. And I remember thinking, Okay, this can't possibly last that long. It'll be over before the end of the semester. Everything's gonna be back to normal come summer 2020 and everything's gonna be okay. But eventually it became apparent that I was incredibly wrong. And I found that after that realization came across, my mind would go in one of two directions. The first is, I was thinking about spending time with friends and family. And anyone who's going through the medical school process knows, the summer after your first year is the one that's most open. It's the one where you're going to get to go out, explore, travel, see the family, see old friends. And anyone who knows me in particular knows that I love a good hug. And it made it all the more difficult to acknowledge that we'd have to hold back on all of those long awaited summer get togethers for the health and well being of our loved ones. And so my grandma was visiting us at the time. And I knew that as much as I wanted to go home, and, you know, just spend a few weeks with my parents knowing that I was in and out of the clinics and coming back, I didn't want to put her in danger, I don't want to put my parents in danger. And that dichotomy where there's the half of you that wants to spend as much time because we're living in the middle of this historical experience, with your family with your loved ones. As it's juxtaposed by the other side of all of that, where you don't want to do that, because it could potentially mean endangering their lives, was one of the hardest things for me to come back to, especially after having been away for as long as I was prior to that. But instead, what we ended up doing was opting for hours and hours of FaceTime, zoom and video games. I can't tell you how many hours I logged, particularly with some of my best friends back home, on FaceTime. We still got a lot closer, we were able to make the most of that time. But for someone who loves being with people as much as I do, it was definitely particularly difficult. And I often felt for those who struggle with mental health and who had to tackle, on top of everything else on their plates, isolation. And it's actually really fascinating now that I think back is just how much we take for granted, even those quick interactions where somebody smiles at you or says hello, as they're passing by in the hallways. And so with all of that, more or less missing, as we're going through our day to day is one of the other things I kept thinking was, well, what happens next? What are we supposed to do. And I've had the privilege over the past, coming on two years now actually, to be the co-president of the Worcester Free Care Collaborative that oversees the free clinics in Worcester. And I remember it being a particularly difficult decision to say, it looks like we're gonna have to close our doors at the end of the day, for the best interest of everyone, we really should practice social distancing, we really should practice other ways of caring for people that don't necessarily mean that they can come in. But that doesn't mean that we couldn't keep providing care. And so thinking about next steps, as we often do, we started doing outreach calls, we were able to set up telehealth clinics, and really made it a point to say, even though all of this is going on, nobody is going to be left behind. And so it was really those two thoughts that tied in my desire to take an untraditional route with this past year and do something as meaningful, as meaningful as possible with what was otherwise relatively unstructured time.

Jesse Sardell  13:24
Yeah, I think you hit on a lot of really good points. And I think especially people, anyone in health care can really relate to that feeling of going from, you know, working in the hospitals and the clinics and wondering, okay, how do I go and interact with, with friends with family, when there's so many unknowns? I can imagine that a lot of those people may have seen you also, as an extension of that scientific community that you talk about, someone who has a little bit more experience and knowledge
about kind of what’s going on in the pandemic compared to the rest of the general population. So I’m curious if people interacted with you in a different way, if that was something you experienced, for how people treated you, given that maybe you had a little bit more insight than they did?

Mina Botros 14:13
Yeah, absolutely. And Jesse, I know, we actually talked about this in our doctoring and clinical skills class. But even as early med students, our neighbors, our family, and everybody around us tend to come to us for advice and direction when it comes to these things, even though we’re still so green, and we’re so early on in the process. And so it’s interesting that it was incredibly humbling, especially in the early days to say, You know what, I’m not sure either, but I’m going to do the best that I can to learn a little bit more about it. And what I really appreciated particularly about being at UMass was when I came back from the DR, from that trip, the first class I had was actually infections, and so they did a wonderful job of highlighting the key points surrounding COVID and other SARS viruses. And mind you it was an incredibly timely course of all the things that we could have been learning about. But even after that was over, I felt that there was a particular obligation to keep up with these case numbers, to keep up with hospital capacities, in the emergency emergency guidelines, as well as everything that the CDC was producing. And as time went on, I realized that the most important thing that I can do, at least now, was learn how to communicate the core of those long and complicated and otherwise technical articles in a way that makes sense to patients as well as my own family that were realistically the most likely to come and ask me for questions.

Hugh Silk 15:45
Hey, thanks. Thanks so much for those thoughtful answers. Why don’t we have you continue with your reading. I think you’re right up to the point where you’re about to tell us about your own efforts during the pandemic.

Mina Botros 15:58
So it started off small as things often do. At first, there was only enough vaccine for the care workers. Small groups of my classmates and I went out to public hospitals to ensure that they had ready access. It was the first time some of us had seen each other since we were first asked to quarantine. It was nice to see familiar faces again. As time went on, our efforts grew and grew. As supply increased, we were asked to expand our volunteer efforts. Our next stop: the public shelters. Now, before I go any further, I want you to know that I used to think I cared about our community. I used to think that I knew how the most underprivileged of our neighbors lived and experienced life. I used to think that I had a passion for public health. And I was wrong. I’d never really been to downtown Worcester. I’d never really been to the heart of our city where community lives and breathes. On the first day it hit me like a ton of bricks. The people we’re working with here may not have homes, they may not have food to eat, they may not have all the things I took for granted. I saw places that I didn’t know existed despite calling Worcester home. I didn’t know it until I was there. And until I met some remarkably good people. Some of these people were my colleagues. Though we attended the same schools and meetings, we really met in the community in our service. I watched as these people I came to call my friends sat with eager ears as elderly patients voiced their concerns. I walked alongside them as they marched down the streets offering their services to all who sought them. I worked with them as we did everything in our power to connect with our community. Some of these people were my patients. Just as we met for the first time
at these clinics, so did they. At the YMCA, I watched as neighbors hugged after receiving their vaccines. In small local markets, people encouraged one another to come together to protect their community through herd immunity. "We're the herd," they shared, "we're protecting each other." And it's true. As we were volunteering in the supermarket, I thought of how important it was that everyone be vaccinated so that we can get groceries without fearing that they'd bring something home. On occasion, I made house visits, one will forever sit in my memory. I arrived at a doorstep in Worcester one evening after clinic with a cooler full of additional vaccines. The smile greeted us at the door. As we stepped inside that smile was paired with tears streaming down this mother's face as we explained where we came from: we had additional vaccines available at the end of clinic and heard that they had been having trouble getting appointments using the signup sites. She beckoned to her husband to come downstairs and to her daughter to join us. During the observation period, waiting for the unlikely event that one of them had a reaction, we sat in their living room and got to know one another. Their family played tennis at the same courts I did. We went to the same schools. We knew many of the same people in the community. We found unexpectedly that despite having never met, we showed several connections. That night there was excitement in the air. As we learned that it's not always the case.

When the JMJ vaccine was withdrawn, many of our community members grew increasingly afraid to receive the same vaccines that had previously given so many of us hope. The trust that we had developed with them was now dissolving. All the while that political unrest that lingered at the start of this all hadn't disappeared. During a public clinic held on the corner of Pleasant Street, a patient walked up for his vaccine. One of my colleagues pointed out his shirt: Trump 2024, it read. Our political opinions aside, he came to us for care. When we offered him the J&J vaccine, he expressed his concerns and I talked to him as though we were my father, my uncle, my neighbor, as if we share the same beliefs. The kindness didn't go unnoticed. He thanked us profusely. He was so appreciative of our work, of our willingness to come to him and his community to provide for them. Then another man came over, a black man. He shared many have the same concerns, but wasn't quite as convinced when we shared our good intentions and trust in the science. Suffice it to say, I was surprised when the first patient came over. "I was scared too," he said, "but I trust them." The two men talked and talked. Several minutes passed, several laughs shared, and a comforting hand was extended from one to the other before we were able to care for the second man. There were few interactions I can honestly say have touched me in the same way. Despite all the fears and unrest in our world, both of these men were human. Both want what's best for us all. Both, like each of us, care about people. Though there were difficult times and more melee ahead, living through this pandemic has been an eye opening and heartwarming experience. The small changes that tumbled into what led way to opportunities for us to make changes and learn with our neighbors. This has been a beautiful reminder of the whole human beings behind the medical care we provide. It started off small, but then it grew and grew. And we did too.

Hugh Silk  21:09
Thank you so much for reading that and for writing it. You seem to have learned a lot about the people of Worcester through the vaccine initiative. And so I think my obvious question is, do you think you would have missed out on something in your learning and your sort of enlightenment at UMass Medical School if the pandemic had not occurred?

Mina Botros  21:30
Absolutely. So one of the biggest things that I learned was, if you see something that needs to be done, take the initiative, do it wholeheartedly. And if it's right, people will be there to support you. And that's something I'll carry with me for the rest of my medical career. And something that I don't think I would have learned without this past year, without all of these vaccine efforts, without all the pandemic relief efforts that UMass was a part of. Because you don't really get that kind of opportunity in a classroom, it genuinely has to be lived through. And I'm so glad that I did. Beyond that, Worcester is such a good city and one that I genuinely underestimated when I first moved here. It's something that I can't really put towards, but having come from Boston, where I learned and lived for 16 years, I moved here to Worcester and thought, Okay, it's a pretty big town. And I can make do with that. But then slowly, as I branched out and went downtown, and met these different people and saw these places that I didn't know, while I was spending most of my first year in the UMass library, there's so much more to the people and places here than meets the eye. And that's what initially inspired this piece, actually. I think I realized just how valuable it is to connect with the people you work with and lean into one another's strengths, which is another huge lesson, because I definitely could not have done all of this on my own. There were so many wonderful people that I worked with, so many wonderful people that we met along the way, who ended up joining us in our efforts, whether it was from the community or other schools or our school. And that I think more than anything else, is the reason that we're here, hopefully close to the other side of this pandemic. On top of that, I definitely gained a lot more direct patient experience with people from all walks of life than I probably could have imagined as a second year student.

Jesse Sardell 23:32
Yeah, that's such a good point about how doing this work, getting out into the community, it really helps us to get to know our classmates and colleagues in a way that we wouldn't otherwise if we were still in the classroom. And as you said, you know, as we hopefully approach the end of this pandemic, you know, how would you suggest that we continue to build those relationships and get to know our colleagues? What opportunities can be taken advantage of, or what can we do to keep getting to know each other as colleagues to better support each other.

Mina Botros 24:05
So another great lesson that came out of this was that working towards the same goal is such a natural way to build bonds with the people around you. So if we are to continue finding the things that we're impassioned by, the things that we really care about, and welcome other people to take part in those efforts. And if we're able to see each other as colleagues and caretakers giving back to our community, rather than simply just as students who wake up, show up to the library, read out of their books, go through lectures, and then go home at the end of the day. I think that dynamic is going to change entirely. And then even more pointedly, I feel like many of us hadn't met or seen one another nearly as frequently prior to some of these clinics and these opportunities, when we were just there for online school, virtual classes and whatnot. And if we're to take some of that back, and take advantage of what will hopefully be far more lively and social opportunities in the future, I think we'll be in good shape. On top of that, realizing just how important people are in our lives was something that I think this pandemic did for just about everyone that I've talked to. Because it wasn't until some of that was taken away, that we placed nearly as much value on it. And so as long as we carry that understanding, and that lesson with us, and capitalize on these opportunities, as I mentioned, I think now that we're nearing the end of
the pandemic, we'll be a lot more open to cultivating those relationships, and engaging with our classmates and colleagues.

Hugh Silk 25:52
You know, when you read this story on Med Moth, there was a moment when I think you started to tear up a little bit when you got to the point about the man with the Trump shirt and connecting with the African American man. And I found myself tearing up when you read that, as well, and my wife always says to me, you know, no one is all good or all bad. And I just have to imagine that moment, during all your vaccine core work, and all that must have made it worth it. And I wonder if you could just speak a little bit more to that moment.

Mina Botros 26:32
Yeah, it absolutely did. And I could not agree more with your wife, there's so much more to everyone. And if you just give them the opportunity, they will show you that. And despite the fact that there were ups and downs, I would say on a monthly, weekly basis throughout the last year, that memory is definitely going to be one that stays with me for the rest of my life, and one that I still think back on from time to time. Because it reminds me of the kindness and humanity in people, in everyone really, at the end of the day. And even though this year was so anxiety inducing for so many of us, it's remarkable how just a little bit of empathy and understanding and really just giving someone space to feel vulnerable, can build the trust necessary to start the domino effect that we need to move things forward. And even though we have to admit that not everyone is going to agree on every single aspect of life, not everyone is going to share all the ideologies. Despite the fact that we may have our differences. This experience goes to show that there's an intrinsic love and caring at the core of everyone.

Jesse Sardell 27:49
Well, Mina, thank you so much for sharing your story with us. It really highlighted you know, not just the challenges of the pandemic, but also all the highs and lows of the recovery process and, and the way that it all intertwines with everything that's happened over the past year. So we're lucky to have you here and thanks for being here.

Mina Botros 28:07
Yeah, thanks for having me.

Hugh Silk 28:09
Thanks so much.

Qiuwei Yang 28:10
Thanks for tuning in to this episode of Murmurs: Stories from Our Journey in Medicine. If you have any questions, comments or suggestions, reach out to us via email at murmursumassmed@gmail.com. This season was produced and edited by Divya Bhatia, Qiuwei Yang, Jesse Sardell and Lael Ngangmeni with advice from Hugh Silk. Special thanks to Jake Paulson for our original theme music and Hilary Mullan for our logo art. To learn more about medical humanities at UMass Chan, visit the Humanities Lab page on the UMass Chan medical library website at
https://libraryguides.umassmed.edu/Humanities_Lab. We'll see you soon in the next episode. Until then, keep reflecting and storytelling.

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