First, let me congratulate all of the students on your graduation and your awards here today. These are great achievements and I am honored to be part of your celebration and thank you for asking me.

I am, of course, most familiar with the College of Medicine graduates many of whom have been in my courses for a couple of years and I want to apologize in advance for directing many of my remarks specifically at them.

This is a very special class for me. You are the class that made me finally start to believe that the Medical Literature Curriculum (MLC) might work. With your class it actually started becoming fun and ultimately, you were the class whose support turned the expanded three-year version of the program into a political reality. Up until your year, it was not at all clear that we were going to ever overcome the resistance to the idea of independently reading the primary medical literature to become engaged in the authentic discussion of medicine.

And honestly, it was not a sure thing even with your class.

I am happy that Ross Sullivan, your class president, is here today because I want to thank him in particular for sustaining a positive atmosphere, taking charge at crucial times and for leading the class in support of Karen Kelly, the Assistant Director of the courses of the MLC.

It is a tough job to be class president balancing the views of the class and the faculty while at the same time getting through the courses and rotations. In my 15 years here, I have never seen anyone do it more effectively
than Ross. He is a born leader; I suspect he will be my boss someday if I can hang around long enough. I’d like to take a moment to recognize Ross’ leadership with a round of applause.

This year, Ross nominated Karen on behalf of your class for the President’s Award for Excellence in Professional Service. We learned last week that she will in fact be receiving that award in September. Everyone knows that Karen is the heart and soul of the MLC. Could we please give Karen a round of applause for all she does to keep this curriculum afloat?

I know that she was the one you really wanted here today but that you felt that you had to invite me for the sake of decorum. So now you are stuck with me. What should we talk about in the 2 hours you have allotted me? There are only two things I can speak of with any authority; one is kidney disease and the other is education. I decided that you probably do not want to hear any more about kidney disease.

So, education then.

It won’t come as a surprise to you that I believe fairly passionately in education. It represents what is uniquely human in the human experience and may well be the only enduring solution to most of the problems that we have to face. It is telling that every tyranny takes pains to suppress education and replace it with propaganda.

A good education is a complex thing. It is so often reduced in common discourse and especially political discourse to some accumulation of information or training in specific skills. But a much richer concept of education is that it has to do with initiation into the culture that you inherit. We engage with the best that has been thought or said by those who came before us. The story of how our ideas developed gives us a perspective that is crucial for flexibility in our thinking and for developing judgment in the face of ambiguity. And I am sorry to tell you but ambiguity is going to be your life from here on if it isn’t already.

But a good education should also lead to unrest and dissatisfaction. As we pass the heritage on, my generation leaves to you the momentum and promise of informatics and genomics but certainly not a perfect world. There
are too many diseases that are not understood well enough for us to be all that helpful. We have not solved fundamental problems of access to care. And to a very disturbing extent, we have commercialized medicine and scientific research to the point of threatening fundamental trust in these institutions, let alone undermining any semblance of traditional ideals.

It would be natural for an ordinary person to think that this is just the way the world is and maybe ask: ‘What am I supposed to do about it? It’s all I can do to just figure out how to adapt.’ But the point is that nothing is a given. As Leonard Cohen sings in his “Anthem” (Leonard Cohen, way before your time but maybe some of the parents remember): ‘forget the perfect offering, there is a crack in everything. That’s how the light gets in.”

Education shows how things came to be the way they are. It prods you to ask the good questions that shake up the foundations and point to new possibilities. A good education is what lets you find the crack that lets the light in.

In this sense, a good education is inherently subversive.

Maybe you are thinking that I am preaching to the choir, all these platitudes about education, the typical graduation pablum. Of course we believe in education. Isn’t that what this celebration today is all about?

But the education that I speak of is not what you have simply because you have survived our courses. The education I want to endorse is a way of life. It is a commitment to the harder path, the examined life, the critical and questioning attitude.

I might as well warn you now that you are going to find that it is hard to sustain your education; there are forces that conspire to resist it despite all your best intentions. In your personal life, everything else will seem to take priority; the last thing you will want to do at the end of a day is grapple with something new to learn, especially if it involves a reality check on your own cherished ideas.
In the larger sphere, let’s face it, few really welcome a questioning, critical attitude. Everyone would be happier if you could just conform to regulations or the “best practices” and fall in line and be quiet like everyone else.

But what if we were to learn that the “best practices” are sometimes determined by say, the interests of drug companies? Another dramatic example of this recently surfaced and it is relevant to papers that we read together in your second-year course. It is now clear that Eli Lilly essentially dictated the so called “expert practice guidelines” regarding sepsis therapy through a massive infusion of grants and sponsorships combined with a clever marketing strategy. The recommendations that emerged did not incorporate all of the best available evidence and despite serious questions about the Eli Lilly’s drug, only one of twelve relevant professional organizations stood up and refused to endorse the guidelines and objected to the process.

In the end, you see, vigilance and a subversive critical attitude become essential components, one might even say moral imperatives in what truly constitutes “best practice.”

You are the award winners, distinguished among an already select group admitted to these professions. I am not saying that you have to save the world. But all of you in this room will find yourself in positions of some influence sooner or later. There will be plenty that needs attention in the immediate situations right in front of you. Will you have the courage to use your talent and energy to leave things in better shape than you found them?

Some of you probably feel unsure of where you are heading in all this, maybe even in your choices about next year let alone leadership and all that. I will share my experience as one who has not always fit in easily. I know that the biology of disease is not the most important thing in the world. Some even question whether you need to know any of it to practice medicine. But it is the thing that found me and has served as my inner compass through what is now at least my third fairly distinct career in medicine: first kidney pathology, then for a long stretch basic research and now almost full time keeping track of the Medical Literature Curriculum. Not exactly the academic ideal of the “triple threat,” however, since I could only manage one “threat” each decade.
I’m sure that it will shock you to hear that I did not suddenly wake up one morning as a teenager and think: “I want to study the role of the sodium pump in the thick ascending limb of Henle during ischemia” or “I want to build the medical literature curriculum.” These are doors that open in the concrete reality and resonate with the inner call. Hopefully, if you are listening correctly, each turns out to be rewarding in it’s own way and opens more doors.

Kafka’s misguided anti-hero, stands before the open passage his whole life waiting for word that it is safe and permissible to enter. Finally, he asks the gatekeeper near the end of his life: “how does it happen that for all these many years no one but myself has ever begged for admittance?” And the guard answers: “no one else could ever be admitted here, since this gate was made only for you. I am now going to shut it.”

Pay attention to your inner compass, Do what you do out of love for it rather than ambition or fear and you will find your way. You may have to invent it but you will find medicine and science very wide with opportunity.

Some of you may try the academic route. I think Dean Scheinman here presenting your awards today hopes you will all get NIH grants and bring them back to Upstate. I hope that one or two of you will try education. It is not the glamorous path and I can assure you that it is not a fast track to anywhere. But I do believe that changing minds changes reality. And without wanting to be overly dramatic or unrealistic about the impact you might have, I will leave it by saying that thinking about things with students, having them challenge you constantly for your reasons and watching them grow in sophistication can be very rewarding. You might even find yourself in it, as I have found myself in watching your passage through to this day.

Thank you, and again congratulations and good luck.