what Jones was saying: Teaching caregivers to better express themselves and listen would be good for them and for patients. The idea aligned with Pryor’s thinking that providing health care was about more than science and technology. “We forget the art part of it,” he says.

Pryor also was concerned about the high rate of burnout among physicians. And he knew the staff at HCMC faced daily stressors. He wondered if the techniques Jones was describing might help them. “As I listened,” he says, “I came to see there was utility to narrative medicine.” He started talking with Jones and last June offered him a new position as a “narrative fellow.”

Just what that would entail wasn’t well-defined, but Jones set about finding ways to fit in. The challenge, he says, has been convincing those on the front line of health care that taking time to reflect and write is not only interesting, it matters. “They understand that stories are nice. But they may not understand that stories contain the seeds of healing,” he says. Over the last 18 months, Jones has worked with more than 400 interns and residents, staff and faculty members at HCMC.

In his application to the Bush Foundation, Jones articulated a very lofty goal: “I told them I was going to put narrative medicine on the map locally and even nationally.” Whether he achieves that remains to be seen. But Jones is certainly putting it on the map at HCMC, and Pryor says he’s received nothing but positive feedback about Jones’s efforts.

“To our knowledge, there’s nobody doing what we’re doing in the Twin Cities,” Jones says. “Health is about the whole person, and taking a narrative approach to medicine is a fresh and revitalizing idea whose time has finally come.” – CARMEN PEOTA

THE pursuit of happiness

Every time he encounters someone, be it a patient, a nurse or the person behind the counter at the coffee shop, Amit Sood, MD, tries to see an individual who is special to someone and who has struggles in life. “There’s no judgement, no negative emotions,” he explains.

Sood, viewing people through this lens is an antidote to burnout. “The more people you see, the more uplifted you get. It’s the opposite of how we usually work: the more people we see, the more depleted we get,” he explains.

That’s one of the lessons the Mayo Clinic professor of medicine shares in his workshops on resiliency. Sood imparts his approach, which can be learned in as little as an hour, to more than 50,000 patients, physicians, medical students and other health care professionals each year. The success of his workshops and his two books, The Mayo Clinic Guide to Stress-Free Living and The Mayo Clinic Handbook for Happiness, both of which have landed on Amazon Top 100 lists, have made him a sought-after speaker at medical conferences, at medical schools and on the TEDx circuit.

Understanding the brain

Perhaps what sets Sood’s work apart from much of what can be found in other self-help books and stress-reduction workshops is the fact that his program is grounded in the science of how our brain works.

Along with colleagues at Mayo, he studied MRI scans of the brain, which he describes as a busy place with giant networks of neurons firing, even at rest. Between what he saw and what he learned from existing research, Sood posited that these networks collaborate to produce two modes—focused and default.

It’s in the default mode that the mind starts to wander. And when the mind wanders, we start focusing on our fears, our shortcomings, our need for short-term gratification. “We get stuck there because as we use a certain network, it gets stronger,” he says. “And the research shows the more stressed we are, the more time we spend in this mode, and the more we are at risk for depression, anxiety, attention deficit, perhaps even dementia.”

Sood says we spend between 50 and 80 percent of our time in default mode. The reason: Our brains evolved for safety and survival, not peace and happiness. “We’re playing a rigged game,” he says. “Our brains are not designed for our fast-paced world. Our hardware and software are not able to handle the load. And with the workload, lack of control and lack of meaning physicians face, you start to see burnout, you start to see addiction, you start to see violence.”

Changing the workplace is one way to prevent those consequences. Another: “to learn to take control of our brain and what we’re thinking.”

Thinking about thinking

In many ways, Sood epitomizes his philosophy. He projects calm in a clinic infected with busyness. Soft-spoken and unassuming, he listens intently. And he isn’t afraid to laugh at himself and the fact that despite years of practice, he is as vulnerable to the dangers of letting his mind wander as any-
Amit Sood’s

Five practices for cultivating happiness

1. When you wake up each morning, think of five people for whom you are grateful and send them silent gratitude. It helps you focus on what’s important in life.

2. When you get home at the end of the day, greet your family as if you haven’t seen them in a month. Find novelty where there is love.

3. Every day, notice one new thing around you or find a new detail in a familiar object.

4. Try not to judge others. Align your heart and eyes and silently wish them well.

5. Reframe life’s challenges by focusing on gratitude, compassion, acceptance, meaning and forgiveness.

Mayo Clinic’s Amit Sood, MD

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one else. “Since I was 14 or 15, I’ve had multiple heart attacks, strokes, melanoma, lung cancer—all in my head,” he says. “I’ve spent a lot of time dealing with imaginary fears.”

As he tells the story of how his career path took him from wanting to be a cancer specialist to wanting to understand the role the brain plays in resiliency, Sood goes back to 1984 when he was 17 years old. He had just started medical school in Bhopal, India, his family’s home. On December 3, a gas leak at the Union Carbide pesticide plant in the city led to what would become the worst industrial accident in history, exposing more than 600,000 people to a deadly cloud of gas and resulting in at least 3,800 deaths. “We were woken up at 2 a.m. with banging on the door. It was me, my mom and my dad. We had no idea what was happening. We ran for our lives,” he recalls.

The disaster occurred in a very poor, densely populated area. “I saw a lot of stuff that 17 year olds should not be seeing,” he says.

When he came to the United States in 1995 to do a residency at Albert Einstein College of Medicine in New York, Sood was surprised to find nearly as much suffering as he left behind in India. “When I came to the United States, I thought everyone was happy. But I didn’t find that.” He noticed that much of the suffering he saw here was related to people’s inability to make good choices—they lost limbs from peripheral vascular disease, yet continued to smoke; they were obese and unable to control what they ate.

He also began noticing the power of the mind: Why was one patient who had minor physical ailments and an otherwise good life an emotional wreck? Why did another who was expected to live only two months survive two years?

Sood’s curiosity led him to take a six-month “thinking break” from his internal medicine practice in Washington state. During that time, he traveled to India among other places, visiting Gandhi’s ashram, and taking courses in integrative medicine. He also immersed himself in research about the brain and stress that was coming out of Harvard, Emory, the University of California, San Francisco, University of California, San Diego, and several other centers.

But as he read the studies, he noticed a disconnect between the researchers’ findings and daily life. What was being learned wasn’t being applied. “When it comes to helping people, we’re not incorporating any of it. We’re just picking clichés—telling people to close their eyes, settle in to your breath, be present. That doesn’t help most people.”

When he came to Mayo in 2003 to earn a master’s degree in clinical research along with an integrative medicine fellowship from the University of Arizona, Sood continued to “read and read and read” and spend time with scientists and contemplatives (he even met the Dalai Lama), furthering his awareness of the connection between neuroscience, psychology and spirituality. He decided his challenge would be to find a way to educate people about the brain and reframe their thinking using research-validated principles. And he wanted to make doing so “easier than drinking a glass of water, very appealing and very high-potency.”

Convincing the medical community

Convincing the medical community to accept his ideas about how to make the brain more resilient wasn’t easy. “I remember someone telling me I was wasting my time and I should leave this and do something else,” he recalls. “This was all still very peripheral, bordering on new age.”

But Sood persisted with the idea that if people were more “intentional,” delayed judgement, paid attention to novelty, didn’t focus on threats and imperfections, and cultivated deeper, more productive thinking, they would be happier and less stressed.

He developed the program that is now called “Resilience by Mayo Clinic.” In 2008, he tested it in an eight-week study involving 40 Mayo physicians. “I thought it was very risky to test it on our physicians,” he says, admitting that over the last seven years, he has received his share of negative feedback, which he has used to improve the program. But the results of the physician study showed a statistically significant improvement in measures of resiliency, stress, anxiety and overall quality of life.

Sood, who chairs the Mayo Mind Body Initiative, has since tested his approach among radiology faculty, breast cancer survivors, newly hired nurses and others. He’s seen improvements in the same measures he used with physicians. “We’re now 20 clinical trials into this, and about half a million people have participated in our training,” he says.

Sood’s resiliency program is now mandatory for all Mayo Clinic physicians, incoming nurses and new medical students. His work has also led to further exploration of the effect of happiness on health. He notes that happiness is associated with better cellular health, lower blood pressure, a lower risk of heart attack, longevity and better relationships.

Sood plans to continue to test and refine his program and share what he’s learned with patients and health professionals through books, talks and workshops. He also wants to encourage workplace changes that increase the brain’s ability to lift the load. “There’s insatiable hunger for this,” he says of information about resiliency. “This is not one of those things like Pokémon Go that eventually will fall off the app store.” — KIM KISER