awarded $700,000. A jury trial has been requested by the Governor to attempt to determine Terri’s end-of-life wishes. Michael Schiavo is arguing that the new law violates his wife’s right to make personal medical decisions in addition to the argument that it violates the state’s constitutional separation of powers.

Stem Cell Research and Cloning Return to Contentious National Debate Status

After the recent death of President Ronald Reagan from Alzheimer’s disease and Nancy Reagan’s vocal support for the research, federal funding restrictions on embryonic stem cell research and cloning returned to center stage in the national political debates. Ron Reagan, Jr., was even given a prime-time spot at the Democratic National Convention to promote both embryonic stem cell research and cloning as the next cure for a myriad of currently untreatable diseases. He went so far in his speech as to assert that “theology of a few” should not “be allowed to forestall the health and well-being of the many.”

Even a routine U.S. Senate hearing in July on the current research on adult stem cell research turned contentious as Senators in favor of full federal funding of destructive human embryo research took the opportunity to promote their views and belittle those who disagreed. At one point, Senator Frank Lautenberg, seeking to find reason to dismiss the scientific testimony of Dr. Jean Peduzzi-Nelson from the University of Alabama at Birmingham, asked, “Are you a member of a pro-life committee?”

To date, there are 45 treatments using adult stem cells and zero treatments using embryonic stem cells. According to current estimates, the federal government is currently spending about $28 million on embryonic stem cell research. Approximately $145 million is going toward adult stem cell research though most of the money is currently for standard clinical trials for bone marrow stem cell use in treating various cancers.

Storytelling is a powerful tool for teaching a lesson and a unique method for remembering a message. Ancient cultures told stories to keep their heritage alive. Stories about an enemy’s prowess have likely changed the course of history. Storytelling works because it encourages a receptive mind to create an image that has meaning. Such images may be recalled at a moment’s notice as a memory trace is activated. Storytelling, it can be said, has a distinct purpose.

Jesus, M.D. is a book of stories that draw parallels between the life-changing teachings of Jesus Christ and the life-touching work of a committed physician. These stories carry meaning, display poignancy, and teach lessons. In addition, these stories offer hope, blessings, and a future. In Jesus, M.D., David Stevens draws on his experiences as medical student, missionary doctor, and director of the Christian Medical & Dental Associations as he relates scriptural teachings of the Great Physician.

Stories are drawn from places such as the bedside of a child needing an antibiotic or the stress of emergency surgery after a machete injury. Other stories, such as that of a missionary plane losing altitude or a car needing to traverse a road where a raging river has washed out the bridge, are from the “bush.” These stories are designed to display the compassion of Dr. Jesus and the providence of God in all situations. Furthermore, they are designed to encourage us to witness the handiwork of God and to celebrate the love of Jesus as we, as physicians, engage the world in which we live. According to the author, “Medicine is not a spectator sport. Neither is the Christian life.”

In Jesus, M.D., we are encouraged to examine not only our ability to touch others as well as our use of time, but our control of temperament. The author recommends that we make a conscious effort to touch our patients as a sign of compassion and care—the desire to cure must not outweigh the need to care. The doctor may not always be able to cure, but the Physician—as seen through Dr. Jesus—always demonstrates care and compassion.

Stevens also suggests that we invest our time in people—patients, of course, but also medical students, in mentoring relationships. Dr. Jesus trained his disciples, and we should do no less. The content of the teaching is to be both medical and spiritual, and it is to be done with care and compassion. Lastly, (the author) asks us to steward our temperament. In our daily professional lives, we are often rushed and/or delayed. We tend to be guardians of time and creatures of punctuality. We must take care, so the author interjects, not to disregard opportunities afforded by “dreaded” interruptions. Such interruptions may be important teaching moments, and may provide brief, unsolicited opportunities. Instead of falling victim to the unplanned moment, let us be conquerors, and take advantage of the potential blessing.

Does God need our help? No, but a gracious God uses our limitations to provide examples and stories that help spread the Good News as portrayed in Jesus, M.D.