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**Author:** Thirugnanasundralingam Vaisnavi BMed

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Aberdeen Dreams Commentary on “Aberdeen Dreams”

Vaisnavi Thirugnanasundralingam, BMed

V. Thirugnanasundralingam is a surgical resident, Royal Melbourne Hospital, Parkville, Victoria, Australia; email: vaisnaviuthiru@gmail.com; Twitter: @vaish_thiru.

Editor’s Note: Names and identifying information in this commentary have been changed to protect the identity of the individuals described.
Aberdeen Dreams
Vaisnavi Thirugnanasundralingam, BMed

Oh, but I dream of Aberdeens
Of clever knots that heal unseen

Your pain; my purpose
To try once more,
To forget to notice
That my arms are sore

Let no blood of yours
Go to waste
May my hands work with precision
And never in haste

May the knots sit tight
Never to betray or fight
Your delicate skin
Or the organs within

May the instruments find
A home in my hold
And when my hands fail
May my spirit stay bold

May I have the sense to keep my knife far
From those whose ailments need warrant no scar
May I take the time to sit and explain
To answer questions, in language plain

May my skill and agility
Never corrupt my humility
May my touch bring tranquility
In times of vulnerability

May I take some time to teach
To help others see beyond their reach
May my rooms host many-a-guest
As a place to vent and a space to rest

In all this chaos, let me remember to savor
All of life, the love, the joy, and the flavor
Because after my work is truly done
I hope to rest with family, and a setting sun

Commentary on “Aberdeen Dreams”

“Do you know how to tie an Aberdeen knot? You’re going to finish off the other side,” said Dr. Tale, my ever-enthusiastic surgical registrar. It was a sunny spring afternoon in September, and I had escaped into the operating theatre, where the surgical team was closing the incisions after a radical cystectomy (an operation where the bladder is removed due to bladder cancer invading surrounding muscle).

Eager and excited, I clumsily jammed my hands into a pair of sterile gloves and stood next to Dr. Tale, who passed me the needle holder and forceps. As I pulled the last suture through, he stopped me. “Before you pull the thread flat, make a loop, pass the needle through the loop, and pull it with your ring finger to lay the second loop flat.” I flustered and fumbled for several minutes, but with gentle prompting from Dr. Tale, the magic of the Aberdeen knot revealed itself.

As I pulled, the loop glided with ease through the tissue, and I watched with delight as the slick absorbable monofilament swam through my skeptical fingers to sit flat against the skin—in ideal tension, neither slack nor too tight, with perfect opposition of tissue. Two more throws and the suture was locked by passing the needle holder through the loop. As I locked the stitch, the knot I had created buried itself in the tissue, never to be undone and never to be seen again. Therein began my obsession and love affair with the simple and beautiful Aberdeen knot—the inspiration for this poem.

Surgical trainees are subjected to years of hard work, wearying nights of research and study, whilst shouldering the responsibilities of their consultant surgeons—all to gain a position on a surgical training program. Few trainees make it through without a dent in their personal lives, and those who ultimately succeed walk into a lifestyle that demands sacrifice, incessant learning, and perfection in all endeavors—with the knowledge that small human errors, in the field of surgery, can have devastating consequences.
From my starry-eyed, unguarded perspective, surgery is a harmonious marriage of art and science. The knots are clever, the anatomy intricate and ingenious, if at times physiologically maladaptive. The operations themselves demand skill, patience, and lateral thinking, but are deeply satisfying. The adrenaline rush of mobilizing the colon after hours of painstaking adhesiolysis is unlike any other biochemical high the brain could ever concoct. Having one human being trust another to take a knife to their body as they lie on the table asleep and paralyzed, hoping that their pain will be put to ease, is a sacred privilege found in no other profession—one that should not be taken for granted.

The same spring, in a different operating theatre: Midway through a low anterior resection (removing a portion of diseased large bowel), the sump sucker I was holding went from audibly slurping small amounts of blood to silence as the tubing flooded red. “Oh bloody hell!” exclaimed Dr. Tolstoy, as a gush of dark blood quickly filled the body cavity. An experienced surgeon with a passion for teaching, Dr. Tolstoy was a composed man who seamlessly balanced positions in research, academia, and mentorship. Outside the operating theatre, his office door was always open to anyone who needed another set of eyes to review a research proposal, who wanted to debrief after a particularly difficult week, or who required some shoulders to stand on, to “see beyond their reach.”

Hearing him blurt out a swathe of profanity when he inadvertently nicked the presacral venous plexus shook me. His face contorted with pain, Dr. Tolstoy paced around the room in anguish, tension brewing in the theatre. Within minutes, he returned to the patient and calmly addressed the team: “Here is what happened, and here is what we need to do. . . .” Ultimately, despite the additional blood loss, Mrs. J recovered well from the procedure, but that did not stop Dr. Tolstoy from taking time to explain with honesty and humility everything that had happened.
Many things impressed me that afternoon. The degree to which his error upset Dr. Tolstoy, even after decades of operating, showed me that he genuinely cared. His frustrations never escaped as anger towards members of the team. He stepped away, composed himself, and returned with a plan to remedy the issue. He commanded the room powerfully, using language that promoted comradery. He took the time to debrief Mrs. J afterwards, and he did not spend the rest of the afternoon miserable and angry. Dr. Tolstoy displayed excellent leadership and balance—both essential qualities for the surgeon, who, ultimately, is merely human: “And when my hands fail / May my spirit stay bold.”

Balance is important for surgeons. We are required to be composed, prepared, and present at all times. Knowing when we should step away from the table, knowing when we are heading towards burnout, knowing to prioritize our mental health and well-being, knowing when it is time to pack up and go home, and knowing when to rest the instruments permanently—all are important considerations in order to maintain patient safety but also to ensure we “remember to savor / All of life, the love, the joy, and the flavor.”

Good surgeons are as much surgeons as they are anything else a human can be: parents, partners, teachers, painters, poets. Good surgeons are good surgeons because they take time to have a good life.

**Vaisnavi Thirugnanasundralingam, BMed**

See facing page for the poem “Aberdeen Dreams” © 2019 by Vaisnavi Thirugnanasundralingam. Commentary first published online.