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HEALTH

The Pandemic's Most Powerful Writer Is a Surgeon

Dr. Craig Smith started writing a daily update to his colleagues. They're no longer his only readers. His emails have become essential dispatches from the front lines.

By Ben Cohen

April 1, 2020 6:00 am ET

Dr. Craig Smith sits down at his computer each day in a hospital under siege and starts typing.

His note to the Columbia University department of surgery on the evening of March 20 began with the latest, grimmest statistics from the coronavirus pandemic: the positive tests, the disappearing beds, masks and ventilators, the curve too stubborn to bend. It was an email that would've been crushing if he'd stopped there. He didn't.

"So what can we do?" Smith continued. "Load the sled, check the traces, feed Balto, and mush on. Our cargo must reach Nome. Remember that our families, friends, and neighbors are scared, idle, out of work, and feel impotent. Anyone working in health care still enjoys the rapture of action. It's a privilege! We mush on."

That last paragraph about a dog sled racing to beat another epidemic nearly a century ago is the reason his colleagues are no longer his only readers. The daily notes of this 71-year-old surgeon, which are now published on Columbia's website and shared widely on social media, have become essential dispatches for many people in search of leadership, courage and maybe even a pep talk. Dr. Smith's emails are Winston Churchill's radio speeches of this war.

"The truth can be hard to find, and Dr. Smith is able to depict the realism of the situation so that anyone, even non-medical people, can understand," said Isaac George, a cardiothoracic surgeon at Columbia. "His personality, career and intelligence are carefully personified in each message. They are precise, calculated, meaningful, unpretentious and inspiring—all at the same time."



Dr. Craig Smith

PHOTO: COLUMBIA UNIVERSITY MEDICAL CENTER

The notes from New York's most powerful writer in scrubs began on March 15, when the city began to emerge as the epicenter of the American outbreak, and they were meant to give the faculty in his department a clear update on the conditions they should expect as they care for patients. They have continued every day since then as the city's hospitals have turned into battlefields.

Smith is an elegant, almost poetic writer. The chairman of the department balances sobering data with a deft literary touch, quoting sources as disparate as John Wooden and Emily Dickinson. When he delivered the presidential address for the American Association for Thoracic Surgery in 2012, he opened and closed his lecture with meditations on a Yeats poem.

But what makes his staff emails so peculiar is that he's a man of few words who writes and speaks in this sort of language infrequently.

“When he does,” George said, “everyone listens closely.”

Smith now has strangers reading his notes for comfort, literary critics admiring his prose and doctors around the country treating his messages as battle plans.

“I am deeply flattered, and humbled, by the number of people who’ve taken time to tell me they appreciate my ‘Updates,’” he wrote on March 22. “You motivate me to keep groping for the right balance between frightening facts and sunny-day optimism. In that balance lies solace, but also resolve. I should also state something that I assumed was obvious: the target audience for my Updates has always been the Department of Surgery family, and remains so. That people outside the family find value in some parts of the message is a welcome bonus, and perhaps a reminder that even Surgeons are human. We struggle with many of the same issues that perplex the rest of the world.”

In response to an interview request, he replied: “I’d rather let the written messages to my colleagues speak for themselves.”



Dr. Craig Smith uses a model of a human heart to explain to reporters the heart bypass surgery he performed on President Bill Clinton in 2004.

PHOTO: MARY ALTAFFER/ASSOCIATED PRESS

The grandson of two physicians, Smith was a self-described lackluster student, so convinced that he was the “last student to be accepted” in his Williams College class that he didn’t buy a school T-shirt until he survived the first semester, according to a 2015 article in *The Journal of Thoracic and Cardiovascular Surgery*.

His first exposure to people in protective masks and hazmat suits came in a steel mill where he worked during the summers. The heat one day was so exhausting that Smith, a college football and lacrosse player, became delirious, fell down an elevator shaft and broke his pelvis. After so much time on the receiving end of care, he found himself pulled to the other side.

But he took the long road to medical school. First he tried for a Ph.D. in biophysics. Then he dropped out. He spent the next year climbing trees and seeing the world from a very odd place for a future doctor: high in the sky working on phone lines. “His responsibilities included clearing lines, setting poles and felling timber in the Vermont wilderness,” according to *The Journal of Thoracic and Cardiovascular Surgery*, the only AATS president “whose formative years included scaling 100-foot telephone poles.”

He went to Case Western for medical school, picked Columbia for his residency and never left, as he became a highly respected surgeon who was most known outside medicine for his successful quadruple bypass surgery on President Bill Clinton.



Medical personnel leave the emergency room at New York-Presbyterian Lower Manhattan Hospital.

PHOTO: MARY ALTAFFER/ASSOCIATED PRESS

Dr. Tom Nguyen, the chief of cardiac surgery at McGovern Medical School in Houston, said that Columbia’s residents and fellows could set their watches to Smith arriving for 6 a.m. rounds at 5:55 a.m.

“When Dr. Smith walks into a room, his presence is felt,” Nguyen once wrote. “Witty, laconic, and honest, he chooses his words carefully.”

It isn’t just how he works. It’s also how he writes.

March 25:

“The steady drumbeat of new cases continues, and it remains possible that our system will be overwhelmed. Repeating the threats represented by a lack of PPE and testing can feel corrosive. In sum, the accelerating pace of this contagion so easily overwhelms me that I risk becoming the Jaws of doomsurfing. But this is a day I’m mostly astonished by the

explosion of energy and creativity being applied to the battle. 'Not knowing when the dawn will come / I open every door' (Dickinson). Doors are flinging open all over the place."

March 27:

"We find a way to pull out of an anxiety-driven small view and rise up to the big view. For what it's worth, I'll offer a personal example: Picture me in the final stages of drying up the minor bleeding that typically follows straightforward replacement of two heart valves. All is very routine until the back of the heart starts to bleed; it's coming apart. This is a patient I looked in the eye and agreed to care for, to the best of my ability. The preoperative probability of death was ~2%—something like COVID-19—suddenly that has become a very real number, and closer to 50%. I'm not ashamed to confess that my first reaction, 100% of the time, is crippling anxiety and self-doubt. Can I put Humpty together again? But there is no one but me to take care of this. The only response possible is to turn down my thermostat and start trying to do what must be done to save the patient. At least half the time that saves the patient. Back to this reality, we can expect the vast majority of COVID patients to do very well. Even most of those who go on ventilators survive, but not by chance. They survive because we don't give up."

March 28:

"I'll paraphrase myself by reminding you that the ground substance of health care is not ICU beds and ventilators, it's people. People like my NP, who was redeployed to a nearly-overwhelmed ICU in a system hospital two days ago. After his first day he sent me a text: 'Yesterday was a reality check on how serious this is...Can't wait to go back.'"

You don't have to be a literary critic to appreciate his style. But it doesn't hurt if you happen to be one.

Harvard professor Stephen Greenblatt says Smith's notes have a "certain dark fascination" that reminds him of "A Journal of the Plague Year" by Daniel Defoe, and Columbia scholar Andrew Delbanco says his writing is so evocative that he feels as if he knows him through reading him.

"Candid, clear, concrete, his sentences cut straight to the heart of the matter: the staggering scale of the emergency and the equally staggering courage of those who are rising to meet it," Delbanco wrote in an email. "Straight talk has been as scarce as masks and ventilators lately, but Dr. Smith talks straight."

Smith writes like a bartender. For every shot, there's a chaser. He ended his note on Sunday, when hundreds in New York had died of this new disease, by reflecting on the explorers who traversed Africa in the 1800s and lost half of their team over the course of the journey.

“They managed to bring 108 souls home,” Smith wrote. “It would have been 105, except that 3 children were born on the journey and survived to the end.”

Once again he'd found hope in despair.

“Life,” Dr. Smith wrote, “finds a way.”

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