

Bloodletting & Miraculous Cures: Stories

by Vincent Lam



About the Book

Last fall, the literary keystone of Weinstein Books' debut list, **Bloodletting & Miraculous Cures** by Vincent Lam was launched to great critical acclaim and extensive media coverage. Inspired by Lam's own experiences as a practicing emergency physician, **Bloodletting & Miraculous Cures** is "a balancing act [that] never stops," (*Newsweek*) beautifully and skillfully chronicling the lives of four young medical students as they navigate the personal and professional pressures of life as newly minted doctors.

Lam is a #1 Canadian bestseller and the winner of Canada's top honor for fiction --- the 2006 Giller Prize --- selected by a jury that included distinguished author Alice Munro and presented to him by fan and early admirer Margaret Atwood. Thirty-two-year-old Lam is the youngest recipient of the Giller Prize, and **Bloodletting & Miraculous Cures** was the first debut short story collection in the award's history. Additionally, **Bloodletting & Miraculous Cures** was a 2007 Story Prize finalist --- one of just three.

Bloodletting & Miraculous Cures balances elegant prose with dark humor, investigations of both common and extraordinary moral dilemmas, and a sometimes shockingly pragmatic portrait of today's medical profession. The book is an astonishing literary debut: a collection of mature and intricate stories connected through the relationships that develop among a group of young doctors as they move from the challenges of med school to the intense world of emergency rooms, evacuation missions, and terrifying new viruses.

From the very first page, Lam brings to life the disparate but interdependent worlds of school and home, heartbreaking young love and life-altering fear in stories that introduce us to Fitz, Ming, Chen, and Sri --- young medical school students and doctors in Toronto. In "How to Get into Medical School," the impulsive Fitz and the ultra-rational Ming explore the possibilities of a relationship that is tested, first by the vigilance of a disapproving family and then by the extraordinary commitment demanded of medical students. In "Take All of Murphy," three students face the challenge of their first dissection of a corpse --- and the unusual quandary of deciding whether following the anatomy textbook or

keeping a tattoo intact is more important. And in "Contact Tracing," the author draws from his own firsthand experience during the 2003 Toronto SARS crisis, when 375 people were infected with the respiratory virus and 44 died.

Lam has created a paean to the flawed humans behind the surgical masks --- he humanizes the profession while each character becomes a portrait of the personalities and rich internal conflicts prevalent in the field. **BLOODLETTING & MIRACULOUS CURES** exhibits both quiet precision and rich storytelling.

Discussion Guide

1. In this book, it might not seem that medical school is designed to foster individualism. When are there moments in which the doctors, the professionals, reveal their personal self?
2. What events root these stories in a particular time? Do you see references to outside news? What about SARS? Does the intense focus of the stories capture the funneled lives of physicians, especially in the E.R. and obstetrics?
3. What does it mean to be Chinese in **Bloodletting & Miraculous Cures**? Is it even relevant most of the time? The characters are doctors and people with little sense of their immigrant background. However, when are the few times that being Chinese is made explicit?
4. In "Take All of Murphy," the anatomy demonstrator tells the medical students, "This fine cadaver is your first patient. Dignity and decorum are crucial. You must be mindful of this gift you are given, and treat your patient nobly" (p. 34). These bodies are volunteers, not body-snatched or "people from the jails or found dead in fights or ditches" (p. 36) as for earlier generations of anatomy students. How do Ming's and Sri's attitudes in this class differ? Why does Sri say, "You should respect a man's symbols" (p. 43)?
5. Why do you think the Mark 16 segment is part of the "Murphy" story? What other links between religion and medicine do you see in the book? The author, Vincent Lam, has said that "medicine and narrative and spirituality intersect"; presumably, he means in his writing as well as in his life. The proposed baptism of Yeh Yeh in "A Long Migration" is one explicit infusion of religion. See pages 109 and 116 for marvelous passages about this old reprobate weighing the odds of a deathbed conversion. Otherwise do you find it a secular society the doctors inhabit?
6. Much of the book is about initiation. Is it the reader's initiation as well as the doctors' in this no-holds-barred odyssey into the world of medicine?
7. Lam is a highly skilled storyteller. How would you describe his writing style? What are the methods he uses to interweave horrific events with small human moments, balancing despair and love, grimness and humor? In "Eli" there is a surreal duet of doctor and patient, both shouting at once, neither, of course, listening (see p. 171). How is that passage a microcosm of the story as a whole? Another effective device Lam uses is the silent response, revealing the thoughts of doctors as they deal with patients. Look at "Afterwards" for Sri's internal dialogue. In another story, "An Insistent Tide," why is Janice vacillating between the beach and her baby's delivery? Dreams, laughing gas, extraordinary pain --- how are these ideas connected in Lam's experimental prose?
8. Several of Lam's stories are so rich that they could be novels in themselves. Which ones would you put in this

category? Perhaps "Night Flight"? "Winston"? "How to Get into Medical School, Part II"? Does Fitzgerald's obsession with Ming take on a clinical life of its own? "For months now, Fitzgerald's mind had alternated between studying and allowing his speculations to spin like wheels stuck in a rutted path of Ming and medicine, digging the tracks deeper and deeper" (p. 67). This story includes the apocalyptic bike accident when Fitzgerald is sure he is about to die. Does the reader feel Fitz is spared for something else?

9. Further in the same story, in his med school interview, ". . . McCarthy asked him what quality he felt was most important in a physician. Trust is most crucial, said Fitzgerald" (p. 73). How is this statement ironic, juxtaposed with the Karl-Fitz event that follows? What is the poetic justice in Fitz's elevator confrontation with Karl? Is this the end of their story? What is the flick of the serpent's tail in Karl's last warning (p. 75)?

10. How does the absolute end of the Ming-Fitzgerald drama provide one of the moments of grace in the book? "He closed his eyes, and the sun was still bright through his eyelids. . . . His eyes were still closed and Fitzgerald could hear the sprinklers come to life closer and closer to him. He lay on his back and waited for them to swing around and spatter him with cool water" (p. 88). Are there other clear, cleansing moments later for Fitzgerald that are not fueled by alcohol?

11. Writer Joyce Carol Oates says, "Tragedy always upholds the human spirit because it is an exploration of human nature in terms of its strengths. One simply cannot know strengths unless suffering, misfortune, and violence are explored quite frankly by the writer." Does this concept help us understand the characters and events in **Bloodletting & Miraculous Cures**? Discuss how some of the patients, doctors, and survivors emerge from suffering and violence.

12. One of the most provocative stories is "Winston." Is this psychomystery resolved at the end? Or does it metamorphose into a new level? Sri says, about Winston, "His thought process is at times tangential" (p. 124). Is the whole story tangential? A kind of circular nonreasoning? Dr. Miniadis is a tour de force, a loony-perverse representative of the "sane." Are you reminded of the 1966 French film "King of Hearts" or "One Flew over the Cuckoo's Nest"? Dr. Miniadis says to Sri, "This is the dilemma, to build a rapport, to allow the legitimacy of experience, but never to speak of what is NOT real as if it were" (p. 126). Is the Halloween party a real Saturnalian blowout? Or does Winston imagine it all? Why is Winston listening in on his upstairs neighbors through a grate on his own floor?

13. Lam's glossary at the end defines psychosis as a mental disturbance in which the patient loses contact with reality. Starting with Dr. Miniadis, wearing her earphones, listening to Smetana, and beaming manically at her student-doctor, we wonder at her exhortation, "Drink it in! Take full advantage of this educational opportunity" (p. 125). What does Sri make of her term of art, "counter-transference"? Earlier, Sri has said, "Some think of illness as a kind of poison" (p. 121). How does this image pervade his visit to Adrienne? Does it suggest Ionesco and Beckett and the Comedy of the Absurd?

14. How is "Eli" a terrifying story on many levels? The emergency room has never been more vivid: "The crying of the child, the belligerence of drunkenness, the thin whine of a failed suicide. The noise and presence fills the waiting room, a condensation of the city's private screaming made public" (p. 165). How do we feel about Fitzgerald's complicity with the police? ("... the game: You do your thing and we'll do ours" cops and robbers and doctors" p. 167). What about his acts of revenge against both patient and officers? Is there enough moral reprehensibility to go around? "Benevolence and cruelty are separated only by a veneer of whim which, in medicine, we understand" (p. 168). Do we see all three sides --- patient, police, doctor --- reaching a lowest common denominator?

15. "The evil of blood is like a malevolent thought. Once it touches, the very suspicion of its presence causes it to grow, to distort motive and action, and to propagate its own dark, spreading reach" (p. 181). How do these words invoke the menace of the story "Eli"? What shocking actions succeed this quotation? Are we at all sympathetic? How do you react to the last line, "I didn't look to see the faces of the officers in that car" (p. 186)?

16. "Afterwards" is a Rashomon story, told from multiple points of view. The vee-fib victim, Mr. Wilhelm, was a sedentary, smoking diabetic. "Sri always felt relief to learn that a deceased person's end was predicted by his life. It made it a happens-to-someone-else event, a bound-to-happen circumstance. There was less to explain, or understand" (p. 192). Does this attitude correlate with what else you know about Sri? Whose are the other points of view in the story?

17. In "Afterwards," as in some of the other stories, the line is thin between farce and tragedy. Is this the nature of the human condition? What are some of these moments? The prostitute too otherwise engaged to hear the inspectors enter? Mrs. Wilhelm clutching the old fedora? The debate about the nature of "the parlor"? "There is a back room. For ten years your father hasn't touched me. Said it was his diabetes, that he couldn't do it" (p. 197). Where else has Lam widened his scope, giving us the story behind the story?

Author Bio

Dr. Vincent Lam was born in London, Ontario, and studied medicine in Toronto where he is an emergency physician. A #1 bestseller in Canada, **Bloodletting & Miraculous Cures** was awarded the 2006 Giller Prize for fiction, making him the youngest writer ever to have won the prize. It was also a 2007 finalist for The Story Prize. Lam's work has appeared in *The Globe and Mail*, the *National Post*, and *Carve*. His family is from the expatriate Chinese community of Vietnam, and his first novel, a multigenerational family saga set in Saigon during the Vietnam War, is forthcoming from Weinstein Books. Lam lives with his family in Toronto.

Critical Praise

"Direct in style, unsparing though compassionate in observation, subtle in emotion, and occasionally gruesome in humor, **Bloodletting & Miraculous Cures** follows four medical students from widely different backgrounds as their stories intertwine, as their illusions shatter, and as the meanings of many lives expand around them. The good news is that doctors are human beings. The bad news is that doctors are human beings. The other good news is that this book

marks a stunning debut."

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