

Gastroenterology, hepatology and movies: A holistic insight

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Key words: Cinema; Liver; Gastroenterology; Movies; Public

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Core tip: The Project "Movies and Health in Night talks", conceived and produced through the chisel of a Gastroenterologist, clearly demonstrated how medical knowledge may surround and integrate a cosmopolitan and holistic approach, so that we as doctors and the general public, are able to become much closer and much more prone to understand the vital cycles of our society. Throughout those lively nights, many brilliant remarks were brought up, unexpected comments, unengaged points of view largely discussed, almost in a libertarian atmosphere, addressing the main topics that different experts and public figures were invited to dissect, about some of the most emblematic movies from the last decades. It is our firm believe that one of Hepatologists still unexplored noble tasks is to promote an anthropologic way of addressing and solving gastrointestinal and liver diseases burden.

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Abstract

The Project "Movies and Health in Night talks" took place in Braga and Porto, northern Portugal, in the last 3 years. This Project demonstrated how medical knowledge

TO THE EDITOR

A Cinema is many times defined as the art of synthesis and the art of dialectic composition of several other artistic expressions like literature, painting or music. It is

in fact the creative spring for dreams and fascination, an instrument of emotional and sometimes terror catharsis, and undoubtedly the source of social allegories. It mirrors the most extraordinary biographies, individual and collective paths, in a multitude of visions casted by the most intensive joys and sorrows. In its essence, it is capable of generating or amplify new myths and new tales, many of our civilization's poetic fancies. Essentially, it is able to enlighten new symbols, and elect new icons as models of behaviours, even promoting ritual gestures and worships; in this way, movies performers transfigure themselves into vectors of freedom or oppression, if they help to release our minds or if they condition our trails: In other words, they bear the responsibility of shaping Health and Disease in our civilization^[1-3].

In fact, these are the characters that Movie Industry thrusts into our own behavioural genoma, imprinting new coordinates for individual and social references, interfering and moulding up our own values and projects.

In Politics, in Sports, in Music and Arts, among the Media, how much science and art closely live together, so that we are able to recreate our own idols, myths and symbols? What life examples do we intimately favour and how does it effect in our expectations of individual and collective Health^[1,4]?

These were the inferred questions and the explicit philosophy underlying the Project "Movies and Health in Night talks" which took place in several weeks cycles, in the last 3 years in Braga and Porto, northern Portugal. This Project, conceived and produced through the chisel of a Gastroenterologist, clearly demonstrated how medical knowledge may surround and integrate a cosmopolitan and holistic approach, so that we as doctors and the general public, are able to become much closer and much more prone to understand the vital cycles of our society. Throughout those lively nights, many brilliant remarks were brought up, unexpected comments, unengaged points of view largely discussed, almost in a libertarian atmosphere, addressing the main topics that different experts and public figures were invited to dissect, about some of the most emblematic movies from the last decades.

Imagine the thrills: Before a live audience of around 100 people, in an auditorium prepared as if a movie was to be projected, but in a stage specifically arranged as if a cosy literary assembly would happen, a 2 h interview was anchored and lead by a Gastroenterologist, trying to set the pace of a most dynamic and at times provocative talk with well-known guests. Not in a medical meeting, or in a big specialty convention, but facing the lay public and even some media gurus! This was really a hard task and a brave new world to the Gastroenterologist, having to play a true pivotal task (away from his technological comfort zone...), in orienting and exploring the visions and perceptions of his 2 special guest stars. These guest stars changed every week, depending on the movie to be dissected, and consisted of widely known Portuguese artists, tv and radio public figures, sports people, and newsmen. On stage, in a TV like interview format, they

expanded over the selected movie for that night. After presenting and viewing the initial trailer, the discussion was based on 4 takes of 6-8 min each; those takes were previously selected and edited by the anchor and really set the stage for a highly informal and free vivid discussion, changing points of view, also allowing handfuls of wise and bright references, sprinkled with personal experiences, funny, intimate, carefully and attentively followed by the audience. How did it work? The first part of the crosstalk, immediately after the trailer presentation, was very useful to place the topic, to put into context the subject to be addressed, focusing on the movie maker, actor's performance, interesting backgrounds and so on. Then, in a 15 min discussion after viewing the selected take, our guest stars were challenged to elaborate on their own thoughts and perspectives, and here again, the role of moderation was crucial, so that the scope has to be kept away from the initiatic and almost inexpugnable medical jargon, but at the same time health concerns should be brought under the spotlight, allowing everyone to understand and realize how extraordinarily common gastrointestinal and liver problems come along with personal decisions and behaviours or social changes.

Under the title "Cults, Vices and Fashions", which accomplished the first year's project, the selected movies were: *Pollock* (Ed Harris 2000), *The People vs Harry Flynt* (Milos Forman 1996), *Pulp Fiction* (Quentin Tarantino 1994) and *24 Hour Party People* (Michael Winterbottom 2002). Those master pieces really showed how social behaviours and trends can truly influence health individually.

The second and third years projects addressed "Myths, Symbols and Idols", picking up *Frida* (Julie Taynor 2002), *The Aviator* (Martin Scorsese 2004), *The Doors* (Oliver Stone 2001), *Ali* (Michael Mann 2001), *Eyes Wide Shut* (Stanley Kubrick 1999), *Easy Rider* (Dennis Hopper 1969) and *Maradona* (Emir Kusturica 2008). This time the focus was on how individuals give their testimony and examples to become driving forces of our culture, again with health and disease being influenced by their own experience, in an environment loaded with alcohol, or sex, or drugs or even...sports.

Facts are that this cultural model made quite an impact in local social tissue. The auditorium was freely open to public, but a predominant fringe of university students and teachers was seen along with lay people and movie lovers (even some doubtful doctors from our Hospital and Medical School!). Many national newspapers and some radios gave echos about this Project. Again, this proved to be a new way of discovering new worlds in settled worlds, and a contribution to broaden the horizons where the skilled Gastroenterologist is generally moving, so many times being unaware of that. Just an irreverent attempts to stir up food for thought, awakening consciences and trying to shake the conventional borders of knowledge.

The truth is that, at the end of the day, we all won: Enlightened people now unexpectedly aware of how many trivial happenings might have influenced or still

may influence their own health history; media people that came to realize that doctors have much more to share than the traditional hermetic medical knowledge, and that it is written in their nature the drive for moving forward in cognitive skills about the surrounding world; and we doctors, specially we Gastroenterologists, much more conscious on that we should keep constantly in mind that diseases have larger boundaries than those anticipated in our challenging patient, and that those apparently clear cut patients have much larger landscapes than a given disease constraint. It is our firm believe that one of our still unexplored noble tasks is to promote an anthropologic way of addressing and solving gastrointestinal and liver diseases burden.

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