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Wound Healer Finds His True Calling

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Stephen Harlin, fresh from his residency in plastic surgery, was all set to rake in the big bucks helping the vain and insecure achieve cosmetic perfection.

So he opened an office on Rittenhouse Square, and soon folks began pouring in for consults. They wanted nose jobs, tummy tucks, bigger breasts, smaller waists. Harlin examined them, listened to their complaints.

"Gee, I think you look just fine," he'd say.

"Why subject yourself to the risks of surgery?" His patients were bewildered. A plastic surgeon who was reluctant to operate?

In fact, Harlin was operating. He was getting frequent calls from hospital emergency rooms to patch people with holes in their faces and bodies from gunshots, car accidents, explosions, burns, cancer surgery.

"I loved it," he says of the challenge of treating difficult wounds. "I was using all my skills and making a real difference in people's lives."

After four months, Harlin closed his Rittenhouse Square office. During that time, he performed exactly one tummy tuck and one liposuction. So much for becoming rich by trying to help people become more beautiful.

Today, Harlin, 54, operates the Wound Clinic in Broomall and practices reconstructive



plastic surgery at Delaware County Memorial Hospital. With his long curly hair, parted in the middle, he looks like a freeze-dried hippie, the sort of merry dude you might encounter at a Grateful Dead concert. But what's most striking about him is his demeanor.

He's as bright as a newly minted penny, as sunny as a day in May, as cheerful as a pallbearer at an Irish wake. He is that rarest contemporary phenomenon – a happy doctor.

That's because he enjoys what he does – healing wounds. He sees about 1,200 patients a year, all referred to him by other doctors. He specializes in the tough cases – wounds so huge there's seemingly no way to heal them, wounds that no amount of medicinal and surgical coaxing can repair.

"The biology of wound healing is a marvelous, complex process that we still don't fully understand," Harlin says. "It's orchestrated by many cells and chemical mediators, and the body does it beautifully."

Many of his patients are diabetics with non-healing wounds of the feet and lower legs. Some have open sores and dying skin

because of poor circulation and ulcerated veins. Some suffer from "pressure ulcers," more commonly known as bedsores. And some may be missing a nose or breast because of surgery to remove cancer.

In wound healing, the medical dictum *primum non nocere* ("first, do no harm") is even more important. "I'm here to support the body, which knows so much more about healing than I do," Harlin says. "I try not to interfere with Nature."

Not interfering is not the same as not intervening; Harlin spends his days trying to speed the process, often in the operating room. But his respect for the body's ability to heal itself bespeaks humility, a product of wisdom.

In his early days, he viewed himself as "the omnipotent healer." He is no longer so cocksure. "I can't cure every wound," he says. "Not all wounds heal in time."

That realization has required a shift in thinking. In that one case in 10 when healing doesn't happen despite his best efforts, he has had to "detach himself from outcomes," to substitute caring for curing.

Harlin is a fascinating paradox. On the one hand, he is fiercely fast forward when it comes to technology. A self-taught computer programmer, he runs a preternaturally orderly and immaculate office that is entirely paperless. All communication and record-keeping is electronic.

On the other, he knows and honors the ancient roots of the healing arts. He marvels at the Egyptian mode of wound care, as recorded on a papyrus scroll circa 1600 B.C.: "Calm if irritated, soften when rm, cool when hot, de ate when swollen, relieve when painful." "The same principles apply today," Harlin says.

To the conventional armamentarium of Western medicine, he has grafted the best of alternative medicine, with its emphasis on attention and compassion, hope and faith ("integrative medicine," he calls it). He believes in "gentle tissue handling," the power of placebos, and "the meaning response" (patients heal better when they understand and believe in their potential for healing).

Essential to healing is oxygen. Anything that diminishes oxygen delivery (smoking, heart and vascular disease, in ammation) retards healing, Harlin says. Anything that enhances oxygen delivery (motion, exercise, relaxation, sleep) promotes healing.

Especially destructive to healing is stress. It tightens blood vessels, spurs blood clots, suppresses the immune system.

Convinced of the major role the mind plays in healing, Harlin spent a week learning how to meditate and breathe mindfully, a practice he encourages in his patients. To control stress in his own life, he exercises six days a week, lifting weights and swimming.

Healing and health share the same root, which derives from an Old English word for whole. A wound, Harlin says, is "a breach in the body's integrity."

"I don't just resurface potholes," Harlin says.

"Healing is about a quest for wholeness.

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