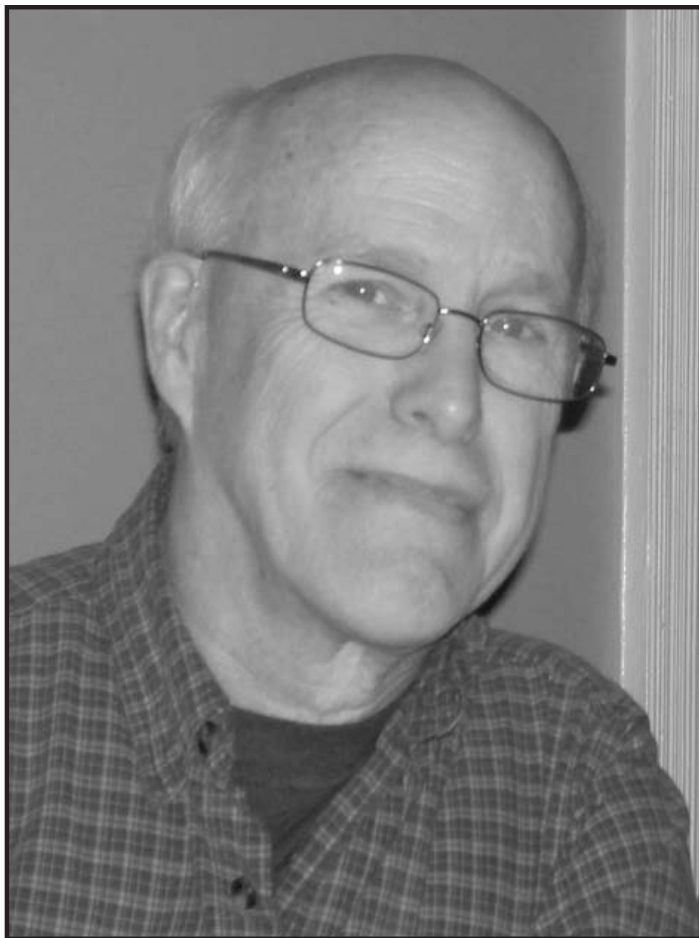


# PHYSICIAN PROFILE:

## Dr. Edward B. Yellig

By Fiona Morgan



What is for many doctors the darkest aspect of their work became for Ned Yellig the most affirming. Many physicians in Wake County know Ned as medical director of Hospice of Wake County from 2001 through 2008. He founded the Horizons Palliative Care, a division of Hospice of Wake, which he ran until he retired in late 2009. For six years, he has written a column for this magazine called “Issues on Care at the End of Life.”

But Ned’s hospice work did not begin until he had traveled a long and winding path. After a two-decade career practicing internal medicine, he found that helping patients manage chronic pain, and helping manage the expectations of family members in their loved one’s final days, was some of the most meaningful and personally fulfilling work of his medical career.

“There are a lot of ways to die, with either suffering or satisfaction,” he said. “I was the facilitator in that process,

and when it went well for everybody, it was a joy.”

He describes the process as “respecting the mystery of life and death without having to control it or own it or manage it. A lot of times, the family tried to manage it right down to the last second.

The more they tried to hang on, the more suffering they created. On the other hand, when people acknowledge that death was coming and they respected it and understood it, and looked forward to it because it meant their lives of suffering and dependency would be coming to an end, they started to rejoice in the lives they had had, in the family and relationships they had, and they looked back on their lives with pride in their accomplishments.”

In the early years of his career, Ned moved back and forth between the East and West coasts. He received his M.D. from the Jefferson Medical College at Thomas Jefferson University, and then completed an internship at Santa Clara Valley Medical Center in San Jose, California and a first-year residency in internal medicine at Montefiore Hospital in Pittsburgh. In the early 1970s, he served as a medical officer at the U.S. Naval Dispensary at Treasure Island in San Francisco and completed a residency in ambulatory and community medicine at UCSF, meanwhile volunteering his time as a physician at the Haight-Asbury Free Clinic. By 1975, he was Chief Medical Resident at Highland Hospital in Rochester, New York.

He has always been attracted to the psychosocial approach, addressing the messy and complex life circumstances that play into the symptoms, causes and cures of illness. While in San Francisco, he trained at the Family Therapy Center, and he later completed a fellowship in the Medical-Psychiatric Liaison Unit at the University of Rochester’s Strong Memorial Hospital.

When he moved to Raleigh in 1977, Ned became medical director of Wake Health Services, a nonprofit primary care community health center. In 1982, he brought the psychosocial approach into private practice, focusing on health promotion, wellness, and preventive medicine.

“Anytime somebody came down with an acute illness, I looked for the psychosocial setting in which the onset of the illness began, and almost all the time, it began in a situation of stress for that person, either family or job stress,” he said. “We had an opportunity to

**Listening  
to the patient,  
listening to  
the practice of  
medicine.**

*[Continued on page 20]*

**BORN:** 1943, Pittsburgh, Pennsylvania

**EDUCATION:** 1961-1965, University of Pennsylvania, B.A. Chemistry  
1965-1969, Jefferson Medical College, Thomas Jefferson University, M.D.

**CAREER HISTORY:**

Rotating internship, Santa Clara Valley Medical Center, San Jose, California, 1969-1970.  
First-year resident in Internal Medicine, Health Center Hospitals of University of Pittsburgh: Montefiore Hospital, Pittsburgh, Pennsylvania, 1970-1971.  
General Medical Officer, United States Naval Dispensary, Treasure Island, San Francisco, California, 1971-1973.  
Second-year resident in Ambulatory and Community Medicine, University of California, San Francisco, California, 1973-1974.  
Trainee, beginning and advanced courses, Family Therapy Center of San Francisco, San Francisco, California, 1973-1974.  
Assistant and Associate Resident in Internal Medicine, University of Rochester Associated Hospitals Program in Internal Medicine, Rochester, New York, 1974-1976.  
Chief Medical Resident, Highland Hospital, Rochester, New York, 1974.  
Fellowship, Medical-Psychiatric Liaison Unit, Strong Memorial Hospital, University of Rochester, Rochester, New York, 1976-1977.  
Medical Director, Wake Health Services, Inc. a federally subsidized nonprofit primary care community health center, 1977-1982.  
Primary care internist in private, single- and multi-specialty internal medicine group groups, 1982-2001.  
Clinical Professor of Medicine, University of North Carolina School of Medicine, for on-site Community Medical Education programs in ambulatory primary care, 1994-2001.  
Fellow, American College of Physicians (FACP), 1996.  
Retired from internal medicine practice, 2001.  
Adjunct Clinical Professor of Medicine, University of North Carolina, 2001-2009.  
Medical Director, Hospice of Wake County, Inc., 2001-2008.  
Founding Medical Director, Horizons Palliative Care, a division of Hospice of

Wake County, Inc., 2005-2009.

**COMMUNITY:**

Volunteer Physician, Haight-Asbury Free Clinic, San Francisco, California. 1971-1974.  
Founding Member, Board of Directors, Hospice of Wake County, 1977-1980.  
Health Promotion Task Force, Wake County Hospital System, Inc. (Developed North Carolina Health Promotion and Wellness Institute). 1981-1983.  
Board of Directors, The Wellness Center, Inc. 1982-1986.  
Volunteer Physician, Open Door Clinic, a free clinic for homeless and indigent patients, Raleigh, North Carolina. 1985-2001.  
Community Services Committee, Holly Hill Hospital. 1988-1989.  
Lifetime Investment – Fitness Education; Founder, Chairman. 1988-1992.  
Youth Fitness Committee, Governor’s Council on Physical Fitness and Health. 1989-1993.  
North Carolina Youth Fitness Task Force. 1991-1993.  
Wake County Council on Physical Fitness and Health. 1991-1999.  
Health Education Advisory Council, Wake County Public School System, North Carolina. 1992-2001.  
Chairman, Health Education Advisory Council, Wake County Public School System, North Carolina. 1995-1999.  
University of North Carolina School of Medicine: Eugene S. Mayer Honor Society for Community Service, 2001.

**PROFESSIONAL SOCIETIES:** Wake County Medical Society, North Carolina Medical Society, American Medical Association, American Academy of Hospice and Palliative Medicine

**FAMILY:** Wife, Sylvia White. Sons, John and Christopher.

**FAVORITE LEISURE ACTIVITY:** Reading, music, gardening, sailing.

**FAVORITE AUTHORS:** Charles Dickens. I read a wonderful biography of him by Peter Ackroyd (*Dickens: Public Life and Private Passion*). It was so won-

derful that I started picking up the book he was writing about and read it, too. It took me two years to read the whole biography and I read six or seven Dickens

## Edward B. Yellig, M.D., F.A.C.P. (Ned)

books in the process.

**LAST BOOK READ:** I read an interesting book recently called *Descent into Chaos: The U.S. and the Disaster in Pakistan, Afghanistan, and Central Asia* by Ahmed Rashid, a prominent Pakistani journalist who is an expert on the region. It’s about Afghanistan, our role in it, and how horrible the whole situation became. The book I’m reading now *The Heart of Christianity: Rediscovering a Life of Faith* by Marcus Borg, a wonderful Christian progressive author.

**LAST FILM SEEN:** *Sherlock Holmes* and *Avatar*.

**LIKES ABOUT THE TRIANGLE:** The diversity and entertainment, all levels of entertainment – restaurants, theaters, live productions, athletics – it’s just wonderful. We’ve got fabulous institutions and fabulous city life in Raleigh now.

**DISLIKES ABOUT THE TRIANGLE:** I would improve alternative means of transportation, including rail and bicycle. I think if we became a bicycle-safe city, a lot of people would ride.

**ADVICE TO YOUNG PHYSICIANS STARTING PRACTICE:** Pay attention to the patient and develop a relationship to the patient. Make their concerns your concerns.

**WHAT HE WISHES THE PUBLIC BETTER UNDERSTOOD ABOUT MEDICINE:** Medicine is a relationship between two people in which one is helping the other become healthier. It’s a collaboration between two humans, one of whom is knowledgeable about the science and the other who is knowledgeable about their personhood. I think there’s as much responsibility on the part of the patient as on the part of the doctor to participate in that collaboration.

help them with the issue of stress and took care of their ailment at the same time, whether it was a back strain, ulcer, headaches, anxiety or depression.”

This “broad-spectrum” approach not only brings about better outcomes, it gets at the heart of Ned’s philosophy as a physician. “You’re taking care of the whole person, not just the blood pressure or the diabetes. If you don’t include the person, then a lot of times the illness won’t be managed as well or as quickly.”

Public service and teaching have also been significant aspects of Ned’s career. He has served on numerous boards and volunteered for the Open Door Clinic in Raleigh for more than 15 years. And beginning in the late 1980s, he undertook projects in physical fitness and wellness education for children. He founded Lifetime Investment-Fitness Education, or LIFE, a group of concerned physicians, parents and educators who lobbied for childhood fitness education. The effort helped secure a seed grant for a pilot project to develop state-recognized physical education and nutrition curriculum at Combs Elementary in Wake County, a state demonstration school for P.E. Ned served on the Governor’s Council on Physical Fitness and Health, the North Carolina Youth Fitness Task Force, and the Wake County Public School System’s Health Advisory Council, which he chaired from 1995-1999.

Education and public speaking have also an ongoing part of his career. He taught medical students from UNC for more than 25 years. He was a reviewer for the North Carolina Medical Journal for eight years. At conferences, debates and organizations across the Triangle, he has spoken about disease prevention, psychosomatic medicine, stress management, childhood fitness and the bioethics of dying.

The year Ned moved to Raleigh, he became a founding member of board of directors of Hospice of Wake County. But hospice did not become central to his work until he went through a profound personal and professional trans-

formation. In fall of 1999, he said, “I realized that my career in internal medicine was over. I was working for a large multi-specialty medical group that was focused more on money and not relationships with partners, patients, or staff.” He set a goal to retire by 2001. When the group dissolved in 2000, he worked for a smaller group and secured his replacement before leaving the practice.

The next year and a half, Ned calls his “period of discernment.” Raised Presbyterian, Ned had not been particularly religious for most of his life. “I wasn’t a big churchgoer,” he said. As many people do, he began to attend more regularly after his children were born. As they grew into adulthood and his professional life began to take detours into new territory, spirituality began to play a larger role in his life. He is an active member of Pullen Memorial Baptist Church, a culturally progressive congregation focused on social justice issues.

He contemplated going to divinity school. A friend, Nancy Osborne, was a fellow Pullenite and also a chaplain at Rex Hospital. She suggested he spend a school year doing clinical pastoral education, a requirement for a Master of Divinity degree. So at the age of 58, he retired from more than two decades of medical practice and began an internship at Rex.

Meanwhile, Bill Dunlap, founder of Hospice of Wake County, tapped Ned to become the organization’s medical director. “He said, ‘This won’t take much time. You work 10 to 15 hours per week.’ It sounded simple.”

But he had also committed to teaching a seminar at UNC School of Medicine. Well into his retirement, he found himself committed to three different “part-time” jobs, each with its own steep learning curve.

“By October, I thought I had committed professional suicide,” Ned recalled. But the experience gave him the opportunity to discover his true passion.

“I found that the hospice medical director job was the perfect blend of what I felt like doing, a combination of clinical medicine—the science of

medicine and new techniques and tools and information that I had to learn—and also intense physician-patient relationships based on life and death issues,” he said. “I had never taken care of people who were so sick, facing death, so it was a physical, psychological, and spiritual crisis for them.”

He believes he could not have been as successful in hospice had it not been for his time off and his spiritual awakening. “When you’re talking to people about the most intimate spiritual process of life, which is uncontrolled illness, uncontrolled pain and suffering leading to death, you’re talking about the very core of a person, their very heart and soul. To relate to someone at that level was so satisfying and so rewarding. I had to let go of my own boundaries so I could talk to them at the very deepest levels of human communication. And it was this integration and conversation at this level that proved to me to be the right thing for me to do.”

While at Hospice of Wake, Ned launched its program in palliative care, an approach to dealing with the needs of patients suffering prolonged pain and/or terminal illness. He earned a certification in hospice and palliative care in 2004.

A few months ago, Ned retired -- for the second time. Yet he’s unlikely to sit still. So far, he’s settled into a routing of riding his bike to Pullen for Bible study and tending to “messes around my life, like files, finances, yard, house and things that have gone undone for 25 years. It’s going to probably take me a year to get that stuff done.”

What Ned will do next is unknown, including to him. “In the past I’ve been guided by listening for spiritual direction from God or a higher being or intuition or however humans get that kind of communication, which is a marvelous mystery. That led me to hospice care. I’m going to trust that the process will take place again over the next year or two, and I’m not going to be impatient.”

“Some sense of direction will unfold. I don’t know what it will be, but I’m open to whatever it will be. It’s very exciting.” §