

University of Dayton  
eCommons

---

Health and Sport Science Faculty Publications

Department of Health and Sport Science

---

5-7-2021

## From Professor to Patient X

Anne R. Crecelius  
*University of Dayton*, [acrecelius1@udayton.edu](mailto:acrecelius1@udayton.edu)

Follow this and additional works at: [https://ecommons.udayton.edu/hss\\_fac\\_pub](https://ecommons.udayton.edu/hss_fac_pub)



Part of the [Biomechanics Commons](#), [Exercise Physiology Commons](#), [Exercise Science Commons](#), [Musculoskeletal System Commons](#), [Sports Management Commons](#), [Sports Sciences Commons](#), and the [Sports Studies Commons](#)

---

### eCommons Citation

Crecelius, Anne R., "From Professor to Patient X" (2021). *Health and Sport Science Faculty Publications*. 109.  
[https://ecommons.udayton.edu/hss\\_fac\\_pub/109](https://ecommons.udayton.edu/hss_fac_pub/109)

This Editorial is brought to you for free and open access by the Department of Health and Sport Science at eCommons. It has been accepted for inclusion in Health and Sport Science Faculty Publications by an authorized administrator of eCommons. For more information, please contact [frice1@udayton.edu](mailto:frice1@udayton.edu), [mschlangen1@udayton.edu](mailto:mschlangen1@udayton.edu).

# From Professor to Patient X

## How my cancer diagnosis transformed my approach to teaching

---

This is the manuscript of an essay that appeared in the May 7, 2021, issue of the journal *Science* (Volume 372, Issue 6542, p. 654). DOI: <https://doi.org/10.1126/science.372.6542.654>

---

*By Anne R. Crecelius, University of Dayton*

I walked into the classroom feeling nervous. It wasn't my first time teaching undergraduate students about human endocrine physiology. I knew the material well. But today's lecture was different. I pulled up slides depicting a hypothetical cancer patient and told them, "Patient X had a biopsy that detected invasive carcinoma in her breast." I described the many months of chemotherapy, surgery, and radiation treatments she went through before she went in to remission. Then I taught the students about the hormonal therapy she was prescribed—drugs that, her doctor hoped, would limit the growth of any remaining cancer cells and prevent a recurrence. On the final slide, I showed them a picture of me on my last day of chemotherapy. "I am patient X," I revealed.

When I started my faculty position 2 years earlier, I never would have dreamed of giving a lecture that delved into my personal medical history. I made a point of presenting myself as a consummate professional to my students and colleagues. I was only 28 years old—fresh out of my Ph.D. program—and I wanted to be respected as a professor.

But that all changed when I was diagnosed with an aggressive form of breast cancer. I continued to work while I underwent treatment, which meant that signs of my chemotherapy, such as

hair loss, were clearly visible. I told undergraduate students in my classes about my condition, in part to cut short the curious stares but also because I wanted them to understand if I cancelled class at the last minute or was a little foggy from chemo brain.

I was awed by the compassion and care those students showed me—putting together care packages, leaving cards, praying for my recovery. I was taken aback by their maturity and empathy—and reminded that they are people too. They may have a mother or grandmother who suffered from breast cancer. They may have religious beliefs that call them to pray.

When my hair grew back, I didn't want to go back to being the same professor I was before. I wanted my students to see me as a person first and a professor second, and I hoped my story would show them that the science they were learning had relevance in the real world—and that there's more to studying physiology than just getting a high grade on an exam. So 1 year after my diagnosis I developed my lecture about patient X.

For nearly 5 years, I gave that lecture, with the positive news that I was in remission: "The power of medicine!" I'd tell them. The nerves never went away—I found it emotionally trying to talk about my body and my disease—but I persisted because the lecture was clearly making an impact. Each time, a few students would stay after class or send me an email, making it clear they appreciated my honesty.

Then, in March 2020—just as most people's lives were upended by the COVID-19

pandemic—I got a call from my oncologist. My cancer was back, and it had spread. I was now facing a diagnosis of stage IV metastatic disease. It was hard news to hear, but I decided to continue my teaching, research, and service activities because I felt the same physically as before. I also thought my work would be a welcome distraction from the stress of doctor’s visits, tests, and scans.

It was time to update patient X’s story. At first, I added details about new lines of hormonal treatment and an unfulfilling ending of “time will tell.” More recently, I added somewhat more optimistic news: Patient X’s third-line treatment of infusion chemotherapy seems to be working a bit. The metastatic nodules in her lungs have decreased in size and number, and

she might have access to new treatment options in the future.

My diagnosis has likely shortened the number of years I will have to build and leave a legacy as a scientist, mentor, and teacher. Yet, my diagnosis has also given me a powerful tool. It helps me connect with my students on a personal level, tap into their empathy, and show them why the material they’re learning matters. It isn’t easy to be vulnerable with my students. But I believe my personal story is one of the most important lessons I teach all semester.

—*Anne Crecelius is an associate professor at the University of Dayton.*