

Healing for TWO

Kate Harrison, Class of 2019

"Tenth floor," declared the familiar robotic female voice. The elevator doors opened and I hurriedly followed my attending surgeon as he strode out to meet our next consult. I looked down the hallway of the stunningly beautiful building, the newest part of the hospital. I had spent most of my third year of medical school in this same building, one floor above. When we entered the room to meet the patient, I noticed she wasn't alone; several family members were present in the room. The stress of the illness and the treatment had taken an obvious toll on her

body, and I could see the pain and fatigue on her face. Next to her in the hospital bed was her husband, sitting with his arm around her. He spoke to my attending, as his wife was nearly too weak to speak. His eyes met mine, and as I looked at him, I saw myself.

This patient was only in her 40s. Cancer wasn't supposed to happen to her. It wasn't supposed to happen to my boyfriend at the age of 25, either. The husband's weak smile poorly concealed the pain on his face, the same fragile smile I had worn for months. To watch your partner suffer as you sit helplessly on the sidelines is a cruel form of torture. I remembered all the days I had spent in a room identical to this one, all the study time I put off, all the hours of sleep I missed. Like this patient's husband, I made the choice to be present every day during my partner's prolonged hospitalizations. Although it was hard to stay voluntarily in that room day after day, I understood that it was much harder to leave.

While the patient's husband informed my attending about his wife's current condition, I found myself wondering if their



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experiences were similar to my own with my partner. Supporting your loved one in a hospital setting feels like having your relationship under a microscope, and everyone is looking. How many serious conversations were left hanging when a nurse came in to take vitals again? How many times had they tried to spend a rare quiet moment, just the two of them, when the phone rang again with someone who wanted an update on treatment? How many times had they both put on a brave face for family and friends, when underneath it all, they really just needed to cry together? Unlike some of the pop culture portrayals in movies that romanticize cancer and relationships, the reality is that illness can place significant barriers between you and your loved one. The real growth comes from the faith that you still have in your partner, even when it feels like the relationship is on hold.

As medical students and eventually practicing physicians, we are expected to maintain a professional barrier between ourselves and the patients. While they may open up to us about all aspects of their life—physically, emotionally, spiritually—we must be careful not to reveal too much about our own personal lives, no matter how much we can relate. Watching this man speak so lovingly about his wife, I longed to say to him, “I understand what this is like.” I had woken up every morning to realize the nightmare was still real. I had fought the tears behind the shaking voice that said, “Yeah, we’re doing fine.” I had felt the weight of a fractured heart that kept beating, because obligations and responsibilities in life don’t wait for you to feel better. Despite all

the thoughts rapidly coursing through my mind, my professional standards wouldn’t allow me to cross that line.

Although healthcare professionals may not be able to connect on such a deeply personal level, we can offer comfort to our patients and their loved ones simply by saying, “Let’s try something, and maybe this will help you.” My attending surgeon knew there was nothing in his scope of practice he could do for this particular case, but he still took the time to have a discussion with the patient and her husband about options to advance her diet and improve nutritional status. The husband agreed with this decision, and I saw a flicker of optimism across his face.

Anything to make her feel better and more like herself, because “she’s a badass. She runs marathons.” I remembered those exact words coming out of my mouth just a few short months ago, when my boyfriend and I traded our long training runs for monotonous laps wheeling an IV pole around the eleventh floor together. When you watch your partner’s health status suddenly decline, any glimpse of his or her old self is a blessing. This patient’s strength and energy levels had been completely depleted, and I could see how much her husband wanted her to find some form of relief. I hoped our consultation with them gave them a sense of comfort, knowing that we were willing to offer an option to help ease the effects of her treatment that had robbed her of her vitality.

As we prepared to leave the room to move on to the next patient, the husband expressed his appreciation to my attending for seeing his wife, despite the fact that she was not a candidate for surgery. With a more hopeful smile, he looked me straight in the eye, and said, “Thank you so much.” Suddenly I realized I had hardly said a word during the encounter. I’m not sure what he read on my face underneath my bouffant cap, but somehow I think he knew we understood each other. Although we didn’t walk through the door promising a cure or a new treatment option, I still felt that the visit had made a difference. Despite the painful memories that flooded my mind, my experience gave me the opportunity to look beyond the patient’s diagnosis and instead see two people whose love gave them a glimpse of hope. ■