

MIND TO MIND

*Creative writing that explores the abstract side
of our profession and our lives*

Stephen T. Harvey, M.D., Editor

Enduring Lessons

Kathryn E. McGoldrick, M.D., F.C.A.I. (Hon)

A few weeks ago, I spied a hand-written envelope in my incoming mail. The return name and address, penned in purple ink, triggered instant recognition—and a wistful smile. Craig B., the author of the letter, graduated from our medical school four years earlier with dual MD and PhD degrees. In addition to being a brilliant student, Craig is an extraordinarily thoughtful, dedicated, and gracious young man who displays beguiling humility. He possesses wisdom and maturity beyond his years and is a joy to know. Perhaps his most endearing quality is his talent for expressing genuine gratitude for even the smallest of gestures.

Serving as a departmental chairman, residency program director, and advisory dean for medical student affairs, I have had ample opportunity to dispense advice, some bits of which no doubt are more perspicacious than others! Nonetheless, I was surprised, but gratified, when Craig came to my office almost five years ago to discuss an issue of great concern to him. For years he had dreamed of becoming a neurosurgeon but recently, and for a variety of worthy reasons, he found himself drawn to anesthesiology. He asked many penetrating questions about the challenges and rewards of life as an anesthesiologist. It is not an exaggeration to say that Craig agonized over whether to abandon his earlier dream. We met on several subsequent occasions as his career decision solidified, and I rejoiced with quiet pride on that chilly March day in 2012 when Craig matched to an excellent anesthesiology program in Manhattan.

Carol Wiley Cassella, M.D., served as Handling Editor for this submission.

From the New York Medical College, Valhalla, New York. Kathryn_McGoldrick@nymc.edu

Accepted for publication August 8, 2016.

Permission to reprint granted to the American Society of Anesthesiologists, Inc., and Wolters Kluwer Health, Inc., by copyright author/owner.
Anesthesiology 2017; 126:566-8

It's now been four years since Craig saw the light at the end of the laryngoscope blade. I have his permission to share some of his current reflections as he is embarking on fellowship training in pediatric anesthesiology.

".....I'm currently packing up our apartment for the move to Houston to start my pediatric anesthesiology fellowship ...It is with bittersweet emotion we leave New York...Even in medical school, I knew I'd end up working with children one way or another. They are wonderful and amazing...I often joke that I just get along better with children, but their honesty and innocence makes my days an overwhelming pleasure. I can't believe I can make a career of doing this. People shouldn't be paid for having this much fun. As a peds person yourself, I bet you understand... In closing I just want to thank you again for your past encouragement and effort setting me on such a fantastic career path as well as the continued friendship and advice during our occasional chance meetings..."

While Craig is basking in the glow of how much "fun" he is having, I need to reinforce to him that he will encounter countless challenges and tragedies during his career, and he will grow from them. He will witness many heartbreaking circumstances and events. He will ache while watching a child suffer and die, and he will struggle with finding the best way to cope with the psychological impact of caring for gravely ill children without surrendering to compassion fatigue.

Although we physicians often delude ourselves by thinking it is we who determine our patients' fates, in reality physicians are shaped and changed by their patients. Countless patients have taught me transformative, multifaceted lessons during my long career. They have taught me about dignity in the face of indignity, about living life while being stalked by death, about fighting battles no one knows how to win. Many of humankind's deepest sorrows are not amenable to surgical extirpation or pharmacological intervention, and it is ennobling when patients confronted with extraordinary difficulties do not succumb to despair or bitterness.

A child I cared for four decades ago when I was a pediatric intern expanded my horizon, deepened my understanding of human possibility, and profoundly touched my heart. Meili (not her real name) was an extremely intelligent 6-year-old afflicted with leukemia at a time (early 1970s) when pediatric survival rates were far below the remarkable successes we see today. The only child of extremely protective Asian parents in their late 40s, Meili was never alone in her hospital room. One parent, typically her mother, was always at her bedside. Meili was not responding well to therapy, and she became increasingly withdrawn and sullen. To complicate matters, her parents adamantly insisted that Meili be told only that she had a "cold." The staff's concerns about the family dynamics grew, and—as low person on the totem pole—I was assigned the unenviable task of persuading Mrs. C to take a weekend away from the hospital. Much to my amazement, Mrs. C agreed to do so, but with strings attached. I was required to promise that I would check on Meili hourly and "tuck her in" every night. I shall never forget that Saturday evening when, during "tuck-in," Meili looked penetratingly into my eyes and said, "Dr. Kathy, I'm going to die, aren't I?" After catching my breath, I managed to blurt out, "Meili, I don't know what to say; we all die someday, sweetheart." Her face broke into an intriguing smile of relief and, I think, trust as she said simply, "We won't tell Mommy." From that moment until her death one month later, Meili became a happier person. She died peacefully, living a fiction in which all parties were complicit.

This encounter taught me many lessons, not the least of which is how much more children truly understand than we acknowledge. I've often speculated what great contributions this fiercely intelligent little girl would have made to society had she the good fortune to be born 20 years later. This experience also taught me not to label parents as "difficult" who understandably cannot bear the thought of losing a beloved child. Most "difficult" patients or parents are not unreasonable, merely incompletely understood. It is important to ask ourselves how we can better understand their perspective, how we can change our behavior or words to effect better communication. Rather than pass judgment on others, we must never lose sight of what it means to be human and to care for someone who is suffering.

The Book of Job poses the famous question, "Where shall wisdom be found?" Human beings are palimpsests of the accumulated experiences life has dealt them. I have come to believe that all people are repositories of knowledge and have much to teach us. An African saying wisely admonishes that the death of an old person is like the burning of a library.

I hope the passage of years will not dim the flames of curiosity, wonder, enthusiasm, and endless possibilities that emanate so brightly from Craig's being. I am reminded that along the mountains of Tibet square flags printed with mantras and prayers are hung by the natives with the expectation that the words will slowly and inexorably fade. The Tibetans, however, believe that the essence of their messages will dissolve into the wind, inspiring and exhilarating all creatures the wind caresses. My wish for Craig is that the precious memories he accumulates during the course of his luminous career will eventually release parts of himself to the wind, uplifting those who will follow in his path.