

Experience

Expérience

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A gift from a friend

Alan Vukusic

uring a long academic year in which attention had been so forcibly focused on facts and principles, the few hours I spent witnessing inner-city health care provided a healthy reminder about why I am in medical school. I did the work during an ambulatory project in pediatrics because of a challenge that had been cast our way. "For those of you interested in Third World medicine," we were told, "why go overseas? Come and have a look in your own backyard."

On my way to the doctor's office, I halted for a traffic light at Capers on 4th, just long enough to notice the Pathfinder parked outside with 2 tykes belted safely into their CSA-approved car seats, out of harm's way from the dual air bags. I wondered what their parents would be buying, probably some organic yams, spinach and tofu to try a new kid-friendly stir-fry recipe they'd just read about in *Canadian Living*.

Another 5 minutes of driving and I was in another world. I was meeting a young couple concerned about their unborn child and how their heroin addiction was going to affect the baby. They wanted to protect this child, they said. They wanted to become good parents.

The irony of it all swam around in my head. Stop, I told myself. Listen to what they are saying. Don't judge — you will lose them.

Tired of being straight-armed, judged, degraded and advised to abort by other health care professionals, they had come from out of town to visit this doctor. He beat around no bushes. Is she working the streets? Is he into crime? What are their goals? Why do they want to stop using? Do they have a home and the resources to support a child? Is psychosocial support available during and after treatment? How is their past and present health?

They're scared, they say. Scared of losing it all, of dying, of harming the baby, of withdrawal from this hell-drug called heroin, of relapse. They're hopeful, for freedom from heroin, for a healthy baby, that they will be good parents, that they will be able to live without the needle.

I believe them. I want to help them. They can do this.

The plan is set: get them off heroin and onto methadone ASAP, with a weekly reduction in the dosage, perhaps a faster reduction for the mom, hospitalization to get the fetus off the stuff quickly and safely before birth, the go-ahead from the ministry, daily methadone pickup from their nearest pharmacy, obstetric and psychologic support. There were stern warnings: "use" during the program and you lose this chance.

When she went outside for a smoke before the doctor collected urine to provide the ministry with proof of drug use — quitting smoking was another condition spelled out in the agreement — I sensed that shocking a naïve medical student must have been entertaining for this couple.

Never mind. I am honoured that they trusted me enough to talk. Five smokes and 90 minutes later, I have even more hope for them. They were caring, loving, honest people who wanted the same things as that family in the Pathfinder: a family, a home, food, love, romance, a job, to have healthy babies and be good parents.

Problem is, they are ill, sailing on winds they cannot control. Their stories pour out: how it began with a gift from a friend, the search for veins, the highs, the money, the desperate living situations, dependence and codependence, the desperation to keep away from withdrawal, the fear of losing it all.

I was parked only a block away from his office, but the doctor insisted on driving me to my car. As we drove past a nearby park, compassion and understanding fenced with my fear and ignorance of this place.

Families need our support, I decided, not our judgement. 3