HUMANITIES

CREATIVE WORKS

Light on the wards

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his palliative care physician with her gentle ways and wisdom, she sees beyond the body into the heart of her patients. She is the reason I went into medicine — so I could be her. Or at least the compassionate, humble side of her that I met in the Montreal General Hospital Palliative Care Unit.

This was probably my best clinical encounter. It was calm and peaceful — it

felt as though we had infinite time for the patients, for the doctors to be with their patients, for us to share in a common human experience, to grieve and be existentially reborn, to walk together into very dark places and, if we're lucky, to enjoy just a moment of blinding clarity. But only a moment. She said it well, that doctor: "Because how long can you stare at the sun."

And the patient. What a special woman. She had that light in her eyes — the light of someone who has suffered, who is still struggling, someone with an abundance of joy and fear and love and frustration and hope and despair, all at once. Someone who is profoundly alive. She described the cancer as a beast lurking inside that she hoped would stay sleeping, so that she could live just a bit longer, so that she could be there for her teenage daughter, who is everything to her and the only thing to her, even among supportive friends. She had been afraid to enter palliative care, but when she did go, she found she was looked after "like a princess," rather than abandoned to die - as she had feared. This physician was the best she had ever had — a doctor whom she felt she could trust, who understood her, who had time for her. "What would I have done without her!" she mused. They had a bond, this doctor and this patient — a real deep connection that I have never seen before.

The doctor told us that there is a surprising and striking similarity in experiencing the world of obstetrics and gynecology and that of palliative care: These were the only times that physicians were granted the privilege of being a part of the very personal, intimate human moments that were birth and death, for the sake of birth and death. I get that. I don't know it at all of course — I'm a first-year medical student — but there's a lovely synchrony there that I can understand, esoterically, anyway.



And it is beautiful indeed. Not easy though. Not at all. I didn't cry there. I went with the patient on a terrifying ride of emotional recollection as she told the story from her diagnosis, to her prognosis, to her multiple events of suffering, surgery, pain and infection, all of which had been debilitating in some way, whether physically, emotionally, psychologically or spiritually. I heard her talk about how she turned to God to get through those times in her life. One moment I heard her comment hopefully about getting on with life and going home soon, and the next, I felt the lump in my throat and forced back the wet, quivering scene in front of me, as tears flowed from her light grey-green eyes, down her cheeks and neck. No, it does not look at all easy. And yet ...

It seems that amidst the big hospital frenzy of waits and lines, the chaotic madness that seems to possess all those who succumb to the overwhelming sense of scarcity, the impatience, the egos, the rushing, rushing, rushing, amidst all this there is this small world of sanity. This place that patients fearfully anticipate as death row, is actually where there is calm, there is time and there is cooperation between professionals that is inter- and intra-disciplinary. This is where the well-being of both patients and medical staff are taken into consideration (which means better doctoring). And there is space, at last, to embark on your spiritual,

existential journey — where you can, if you choose to, "conference with the birds" through valleys and mountains, hells and heavens until you transcend yourself and return home (as in your *physical* home, to be with your family and friends in your last days) or return directly to your spiritual home.

It doesn't happen that way for everyone, all the time, this is clear. What is also clear though is that people are not

just going to palliative care to die. The doctors and patients in palliative care, to me, really seem to be *living* in the truest sense of being alive — intensely with heart, mind and body. The end-of-life world seems to be a microcosm of life itself: It roughs you up pretty badly and you only get the spiritual reward of healing some of the time. But what an honour for the physician to accompany their patient into that sacred place.

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REFERENCE

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