

## Facing grief

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**T**welve years ago, I completed my residency training as an emergency medicine doctor. Earlier that same year, my son died of cancer. When that happened, my world changed forever — I was broken, full of grief and barely able to hang on. As an emergency doctor preparing for independent practice, I honestly didn't know if I would ever be able to return to such a challenging health care environment.

In the days immediately before my three-year-old son, Callum, died, he had become unrecognizable: connected to numerous machines, sedated and paralyzed into unconsciousness 24 hours a day. His body was suffering from chemotherapy-induced multiorgan failure. He had endured six months of intensive treatment, including neurosurgery, multiple crippling chemotherapy cycles and three stem cell transplant rescue procedures. My wife and I lived in the hospital with him for nearly six months, and we watched him amaze us every day, despite his intense suffering.

On the day Callum died, my wife, Trisha, phoned from his bedside in the SickKids intensive care unit saying to come urgently. When I got there, she was standing at the end of the bed silent, with tears running down her face. She was not frantic but calm, as we'd known for many days this moment was inevitable. She reached out for my hand and I grabbed it. I could see she was relieved I'd made it in time. We shared a brief moment, maybe a few seconds, and then focused on Callum and the team. The monitors that had showed no heart rhythm or pulse were now showing that both had returned. The team had stopped doing cardiopulmonary resuscitation. Callum was still alive. As tears poured out, I said to Callum quietly, "Thank you, honey. Thank you for letting Daddy make it here in time. I'm



here. Mommy's here. We're ready, honey. We know it's time."

A few minutes later, Callum's heart stopped again, and we asked the code blue team not to restart their efforts. We had lost. No amount of medical effort could change our circumstance.

In the moments that followed, I felt like the world had come to a complete standstill. Trisha and I sat down with Callum in our arms and we wept. We did not move. We did not ask for anything. We sat there, weeping and holding our baby, not knowing how life could possibly go on without him.

The years that followed have been a long journey and a challenging struggle.

This journey has deeply affected my practice as an emergency doctor and, more specifically, my interactions with my patients and their families. For me, facing Callum's death honestly has been intimately tied to having courage. Along with my wife, I had to be courageous enough to not be completely put together. I had to be vulnerable, and I had to try as hard as I could to move forward again. This meant letting others see me suffer and see me struggle. It took courage to be honest about my emotions and fears.

I can honestly admit that my suffering has had a dramatic effect on how I face grief with patients and families in the emergency department. These

challenging discussions most often involve death, devastating new diagnoses, end-of-life care, conflict and tough decision-making when only bad choices remain. I often think that if I can bear the nightmare of losing my son, then I can face anything else in this world honestly with patients and their families — no matter how hard it may be. I've also realized that families need me to have the courage to help guide them through these difficult times.

Recently, I sat with a family at the bedside and helped them confront the reality that one of their family members was likely going to die following complications of a massive heart attack. They had been thrust into a devastating situation and were completely overwhelmed, struggling with what to do next. As we began coordi-

nating multiple complex resuscitative interventions, including sedation and intubation, I told the family that now was the time to leave nothing unsaid. While the team made preparations, I took them to the bedside to share what could possibly be the final words of love together as a family. I stood close by and listened to the beautiful words spoken as a tear ran down my face. A few moments later, we proceeded with our resuscitation with the family remaining close by.

Reflecting on this experience, I realize moments like this force me to access courage. Acknowledging the grief of others and trying to face it with them during difficult circumstances such as an active resuscitation, even in just those very brief moments, is not easy but is critically important. I've also realized that helping

others during these times helps me move forward too.

Looking back at the last 12 years, it is hard to summarize how far I've come. It has been a complex process of healing that is ongoing. My own grieving continues in various forms, and I am still trying to fully accept having to move forward in life without one of my children. When I think of the doctor I am now, I know that my own life has deepened my ability to support my patients and their families when they begin a similar journey facing grief.

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This article has been peer reviewed.

This is a true story.