

# Residents' page

## Relishing the moment

### *Having a baby in residency*

K. Yvonne MacDonald, MD

Tucked away in our subconscious is an idyllic vision. We see ourselves on a long train journey; ... uppermost in our minds is our destination. On a certain day at a certain hour, we will pull into the station. Then wonderful dreams will come true, and the pieces of our lives will fit together like pieces of a jigsaw puzzle.

—R. Hastings,  
*Where Joy Abounds*<sup>1</sup>

When I decided to have my first child during residency, most people tried to convince me that it would be too difficult and that I should wait. I was given all kinds of advice about “the right time to have a baby” and how much easier it would be if I waited until I finished residency and started working. But I knew I was ready. Looking back, and as ready as I was, I really had no idea of what I was getting myself into. But the challenges were not necessarily because of my timing. I would have faced many of the same ordeals no matter how long I waited.

I thought I would share my story for those of you who have had, are having, or are planning



**“So far we are doing just fine and are already planning our second child”: Dr Yvonne MacDonald with her husband, Dr Robert Carter, and their son, Elliot Carter (8 months old).**

to have children during your residency. I wanted to describe what a typical day is for me and to share some of the joy (and tears) I have found in motherhood at this already busy time in my life. I am sure those of you who have already gone down this road can relate and get a laugh or two.

The first weeks after I had the baby were like a blur. Some days it felt like all I did was breast-feed (every 2 hours for a while!), and I was too tired to remember the other days. I had a cesarean section, but 3 days later I was home trying to catch up. No extended family members were available to help out, and my husband had to go back to work (he is a family physician), so I was

on my own. At one point I was breastfeeding every 1.5 hours and didn't think I would be able to continue. After doing my internal medicine rotation, I thought I knew what it meant to be tired, but that was paradise compared to this!

I now have new respect for parents—and especially single parents who are doing it all on their own—it isn't easy. I have learned more

*Residents are encouraged to e-mail questions, comments, personal articles, and helpful information to [residentpage@cfpc.ca](mailto:residentpage@cfpc.ca).*

about motherhood and breastfeeding than I ever could have learned in medical school (everything from the best diaper rash cream to how it feels to have engorged breasts), and my patients have benefited from my experiences.

In those first few months, reality hit me full force. Gone were the days of sleeping in, going to the gym when I wanted, long baths, romantic vacations for two, spontaneous sex, and overall personal space (at least for a while). I cannot read or study when I want to or as much as I want to, and that can be stressful because I still haven't written my LMCC II or my CCFP examinations. With our hectic schedules, there would be no more romantic dinners out, movies on Sunday afternoons, or otherwise alone time with my spouse. It was a bit of a shock; to be honest, I am still adjusting 7 months later.

After a little over 3 months of maternity leave, I had to go back to residency. I was still breastfeeding every 3 hours, and breast pumping was not going well—not to mention that I was still getting up two or three times a night to feed the baby. It was extremely difficult at first because when I wasn't with my son, I couldn't stop thinking about him, what he was doing, did he miss me, and would he slowly forget who I was until I became a stranger exploding through the door (as I usually do, not wanting to miss a single second)?

Luckily, my rotation was flexible and I was able to spend some time with my son during the week. When I worked, my husband (who works the occasional emergency shift when I am off and otherwise stays home with the baby) would bring the baby to me so I could feed him between patients. So far, my son seems to remember me every time (or at least he remembers

my breasts!), so I am starting to relax a little about his forgetting who I am!

These days, I get by on about 6 hours of usually interrupted sleep (on a good night). My baby is still breastfeeding (a little less frequently), and I manage to get an hour or so of studying in each night after my son goes to bed (unless I have to get groceries, pay bills, do housework, or decide to spend some time with my attention-starved husband). On a typical day, I get up at 6 AM and crash into bed at 11 PM or so, after a very full day.

Overall, having a baby has completely changed my life and definitely for the better. The change was sudden and made residency 100 times more challenging, but having a baby made me a much more efficient and stronger person. Now I don't waste a single second of my day, and I am loving it. If you are ready for children and happen to be a resident, remember that someone else cannot decide on the perfect time for you; it does not exist. So far, we are doing just fine and are already planning our second child.

Sooner or later we realize that there is no station, no place to arrive at once and for all. The true joy of life is the trip. The station is only a dream that constantly outdistances us. ... LIVE life as you go along.<sup>1</sup> ♦

**Dr MacDonald** is a second-year resident in the Family Medicine Department at Memorial University of Newfoundland in St John's.

#### Reference

1. Hastings R. *Where joy abounds*. Survive; 1999. Available at: <http://www.survive.org.uk/inspire6.html>. Accessed 2003 August 7.