



Reflections

At his age

Once upon a time ...

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*Crabbed age and youth cannot live together:
Youth is full of pleasance, age is full of care;
Youth like summer morn, age like winter weather;
Youth like summer brave, age like winter bare.
Youth is full of sport, age's breath is short;
Youth is nimble, age is lame;
Youth is hot and bold, age is weak and cold;
Youth is wild, and age is tame.
Age, I do abhor thee; youth, I do adore thee;
O, my love, my love is young!
Age, I do defy thee: O, sweet shepherd, hie thee,
For methinks thou stay'st too long*

—William Shakespeare, *The Passionate Pilgrim*

Five years ago I visited a very gentle, clever, and cultivated 85-year-old man. After we had finished our regular visit, he began to tell his story.

“For 3 months I have had an annoying pain in this shoulder and arm.” He placed his right hand on his left acromioclavicular joint. “I already went to Professor XY, a close friend of mine.” When he mentioned Professor XY, I began to worry about what else I could do to help. Professor XY was a famous neurosurgeon, known worldwide. “Professor XY told me that there is nothing to worry about because *at my age* some increasing pain should be expected.”

I tried to reassure him that it was likely true that at his age he might have to cope with unwanted but normal pains. My patient looked at me sweetly—he could have been my grandfather—and said: “You see, doctor, I know what aging is; but my sore shoulder has features quite different from the other pains I have ever experienced. It is a moderate continuous pain that affects my sleep and limits the movement of my left arm.”

I tried to draw aside any prejudice and clear my mind. I asked myself, “Why *did* this very old man notice an increasing pain at his age?” Perhaps it was not a normal pain at all. I performed a complete physical and ultrasound examination on the gentleman. I found that a solid neoplasm was causing his pain. It spread out from the acromioclavicular joint and exerted a mechanical pressure on the peripheral nerve, thus affecting joint function. After further investigation, it was found to be a bone metastasis from a primary carcinoma of the prostate gland. My patient was submitted to standard drug therapy.

Of course, I was not a better physician than Professor XY. I only looked past my patient's age.

“Dear doctor, my shoulder never bothers me any more,” he said to me a month ago at the theatre. It is truly a pleasure to see him; I enjoy his gentle lookout on life *at his age!* ❁

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