

Friday mornings

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The diagnosis was as I had suspected. I dreaded giving her the bad news. She was a 95-year-old woman living in a nursing home that I attended. She was the healthiest 95-year-old person I had come across in my career. She needed only thyroid replacement medication and help with some personal care. During the 4 years she had been in my care, I had gotten to know her quite well.

I visited her every second Friday morning, pulling up a chair in front of her while she listened to CBC Radio and nibbled on her breakfast. I spent extra time with her because we could actually have a conversation. Our time together was refreshing for me, as most of my nursing home patients had advanced dementia.

She had been having problems with swallowing for 4 weeks, with episodes of choking and sometimes vomiting. She had agreed to have an endoscopy as she became weaker and mildly dehydrated. The results, now in, were not good.

I entered her room on my regular rounds. She was sitting in her usual chair, photos of her family taped to the wall behind her. She even had a few drawings that my kids, Naomi and Max, had made for her. I pulled up a chair and we smiled at each other.

"So, I have the results from the endoscopy; I am sad to tell you that it is not good news."

She looked at me calmly and with trust.

"You have throat cancer. The cancer has completely encircled your esophagus, leaving only a tiny opening for some liquids to go down. I spoke to the gastroenterologist and, given the situation, the only possible way to help you is to insert a stent. This will allow you to continue to drink fluids, but you won't be able to eat solids."

"A stent? Is that not what goes in a heart?" she asked.

"Yes, you are correct," I answered.

I thought the news had not sunk in.

"This cancer is so big that in the next few months you will likely choke, aspirate, and die from complications of pneumonia," I told her sadly.


"Dr Dodek, you are such a worrywart. I am 95 years old and have lived a full life. It's OK." She said this in a confident and serene, matter-of-fact way, and smiled at me.

We talked some more and then I continued on my rounds. Later that day, I was struck again by our conversation of the morning.

There I had been, distressed about having to tell this lovely woman that she was going to die, and preparing to counsel her. Yet, in the end, she had provided the guidance and counseling to me. She was telling me that it was "OK" for her to die.

Physicians are trained to search for a cure. It can be hard even for experienced physicians to accept that there are some conditions for which no cure is possible, even in a 95-year-old woman whose health has been good and who enjoys a good quality of life.

I questioned myself about whether I could have done anything earlier: Had I missed something? Had everything been done properly? These mental and emotional exercises can be exhausting, but they are what make me connect with my patients and care about my work.

I smiled thinking about this patient and what she had taught and shared with me. I looked forward to my next Friday morning visit with her. 

Dr Dodek works at a full-service family practice, at a nursing home, and as active staff providing geriatric care at Mount Saint Joseph Hospital in Vancouver, BC.

Competing interests

None declared

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