Art of Family Medicine



Expiration inspiration

Katie Crosby MD CCFP

er breathing is laboured. She's not responding. She wasn't like this earlier."

I bury my nose deeper into my child's silken curls to flood my senses. I wonder if the gate control theory of pain will apply here, as I beg the smell and feel of her hair—still wet from an evening bath—to fend off any intrusive images from earlier today.

Inertia mocks my capacity to be home. Though my body has commuted here, my attention remains tethered to the hospital wards.

There are moments when time and space collapse, and my thoughts snap back to the present. But I do not land on solid footing. My mind seems easily lured from any number of inane starting points to somewhere disturbing.

Slicing an apple for my daughter reminds me of the thickened apple juice that had piled up on my patient's tray—a harbinger of her sickness as she struggled to swallow and lost the urge to hydrate.

I cycle through my bedside assessment, the investigations I ordered, how I interpreted them. Did I cast my net wide enough? Did I try hard enough? Did I try too many interventions? What did I miss? What am I *missing*?

Were it not for the stack of discarded storybooks that have amassed on the floor, I would have no measure of how long I have been reading aloud. How did I manage to play peekaboo, animate the sounds of everything from an elephant to an owl, and sing lullabies without time registering?

Part of me feels reassured of my humanity because I still feel so strongly and struggle like this. Part of me wishes I could just block it out.

My child's body has grown heavy and limp. She is crossing that threshold from wakefulness to sleep. As I lay her in the crib, I am reminded of the other heavy, limp body that seemed to be sleeping.

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