

MEDICAL MUSE

*An occasional journal devoted to the inquiries, experiences, and meditations of the
University of New Mexico Health Sciences Center community*



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Welcomes submissions (literary or visual), letters, and participation from all members of the UNM Health Sciences Center community.

Electronic submissions may be sent via e-mail attachment to:
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Hard copy submissions may be dropped off at Dr. David Bennahum's office, c/o Sandra Naranjo, Dept. of Internal Medicine, ACC-5.

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We are pleased to bring you this edition of the *Medical Muse*. This semiannual arts journal is meant to provide a creative outlet for members of the greater Health Sciences Center community: patients, practitioners, students, residents, faculty, staff, and families. In this business of the scrutiny of bodies and minds, it can be all too easy to neglect an examination of our own lives. This journal is a forum for the expression of meditation, narrative, hurting and celebration—all the ways in which we make sense of what we see and do.

It is our hope that in these pages you will encounter a range of experience from the outrageous to the sublime. What we have in common binds and steadies us, yet there is much to be learned from the unfamiliar.

We see the purpose of the Muse as a way of encouraging members of the Health Sciences community to express their creativity, and we encourage all to submit. Unfortunately, due to space constraints we cannot publish every work that is submitted in the print copy. We wish it to be known that our worst fear is that in selecting submissions we are discouraging the same creativity we wish to foster. We therefore sincerely thank all those who have submitted in the past and ask that you continue submitting. Without your creativity and courage to share the Muse would not exist.

– The Editorial Board

Borderfoods: Juarez/El Paso 2003

I proudly wear a chip,
And chips and salsa
On my Taco Bell stained
Guacamole shoulder.

I toss Fritos and Fritos Khalo
To the palomas.
These are the birds
That shit white on buildings.

Tecate! Corona! Cabrona! Bohemia,
I bathe my brain at another beer holiday,
Just D.W. and I.
The suds fill my belly like a pregnancy.



Photo: Paul Akmajian

A greasy El Paso Big Mac leaves a
Virgin Mary silhouette on my camiza,
But I use good ol' Mexican de-greaser
To eradicate any traces of her lipid laden divinity.

I buy a cruda cure from a Coca-Cola cowboy who is also the
Marlboro Man at midnight.
He limps like Juan Wayne but moves faster.
His boots are Chihuahua cut.

I suckle sweet chocolate from Malinche's breasts.
Sweet, brown betrayal fills my boca.
I eat the chinga once again.
I drink the chinga once again.

– Marcus Fidel, Medical Student IV
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Dancing With the 7 Sisters

by Bert Umland, M.D.

Department of Family and Community Medicine

Princess Luwana called to see if the doctor could come see her mom on a home visit. She said that Bessie had been ailing for several days and was sick in bed. The drive down the hill to the coast would have taken more than an hour in a truck with very poor suspension and the road is unpaved and very bumpy. Princess (this was her name—not her title) had heard that the doctor was making home visits up the river that day and perhaps he could just stop by.

“Tell him to drive three and a quarter miles form the store and when he sees the five mailboxes all painted red, he should park. Then if he walks down to the river, Milo will come across the river with the row boat and bring him to our side.” That message was relayed to me on the 2-way radio in my truck as I was coming down the river. I’d not noted my mileage at the store at Weitchpec so I hoped I would see the mailboxes and know where to stop.

Pretty soon, five very faded, once red mailboxes appeared in the weeds at the side of the road and I pulled off to park. It was fairly steep from the road to the riverbank but there was a path of sorts. Apparently this was not an unusual way to get people to their home across the river. As far as I knew, theirs was the only home on that side of the river this far down, so there was no bridge.

As I stood in the shade on the bank, I saw someone come down the hill on the other side, climb into a faded and dented, gray metal rowboat and row across the Klamath. At this point, 20 miles from the coast, the river is pretty wide—perhaps 1/4 mile so I just waited. Milo had done this trip often by the looks of it and he smoothly buried the prow of the boat in the mud near my feet. “Get in Doc,” he said.

I was carrying my little black bag of doctor stuff and

a small orange colored box stuffed with small numbers of various medications, a few syringes, gauze pads, and a few sterile instruments, as I was never sure what I would run into and might need to do on these home visits. Since the people I was visiting were often home-bound, simply writing a prescription did not make a lot of sense. If they could get to the pharmacy, they could get to the doctor’s office.

It was hot in the boat. There was no breeze and it was July in northern California. The north coast is foggy and cool in the summer but inland, the temperature can reach 120 degrees on the worst days. This was hot, but not quite that bad yet. Our landing on the far shore was uneventful and the previously silent Milo said “Hop out Doc. Just follow the path up the hill to the house. They’re waiting for ya.”

As I struggled up the steep hill, I stopped to catch my breath and looked out over their view of the river. I suddenly understood why they wanted to live in such an isolated place on the “wrong” side of the river. It was spectacular. I could see several miles down the river and the golden hills across the river to the north were beautiful. At one time those hills had been covered with redwood forest but the loggers had clear cut the whole area long before, while the treaties that ceded all this land to the Indians were “lost “ in the Interior Department in Washington DC. Oh well, that was old news and these Yurok Indians had leaned to live with the current reality of their lives.

The house was small and a bit rundown. As it was built on a slope, there were several steps up to the front door. I knocked and Princess came to the door, obviously glad to see me. “Look mother, the doctor is here. Please come in, Doctor.”

The front room of the house was fairly stark with a small sofa, a couple over-stuffed chairs and an old fashioned mechanical hospital bed which was sitting next to



the large window overlooking the river and the view I had been admiring. It was cranked up fully and there was a fragile elderly woman, skin and eyes bright yellow-orange and with a sparkle in her eyes.

"Welcome to my home, Doctor" she said. "Princess, bring the doctor a chair."

Imperious old lady. But she had a sweet smile, which she shined on me. The chair was brought and I sat at her side. The smile coming out of the golden face was a little disconcerting but she seemed oblivious about her appearance.

"I'm 99 years old. The oldest Indian on the river." A pause while she watched for my reaction. I tried to look amazed but at that moment she looked that old. A very old pumpkin but not plump and round, rather thin and fragile.

"How long has your skin been so yellow?" I asked.

"This time for a couple weeks" she replied "but it happens every once and a while." She went on to say, "When I was 79, they told me my gall bladder stones were making me turn yellow but that I was too old to live through the surgery. They thought I would die soon but I fooled them."

I asked, "What have they done for you when you turn yellow?"

"Nothing" she replied firmly "and I feel terrible. I itch all over. Do you have anything for the itch?"

Well, it just happened that I did have some medication for itching in my little orange box so I extracted a little bottle of pills and filled out the directions on the label. She was delighted and called Princess to get her some water to take one of the pills right then.

She turned to me and said, "I spent the night dancing," and waved her arm vaguely towards the window. She looked mischievous as she said this and then laughed.

I responded, "Oh really. Tell me about that."

"Many, many years ago there was an important Yurok chief who had 7 daughters. They lived up the river from here. The girls were very happy and loved to sing and dance. They made their father angry because when they should be doing their work, they sang and danced around their village." She added, "I was like that when I was a girl."

She laughed and went on with the story. "One day their father came home sooner than they expected and they had not done any of their chores. Instead they were singing and dancing around the village. They were very good natured and called out joyfully to their father: 'hello, father. Welcome home.' And they danced around

him, smiling and singing."

"Their father was so angry that he picked them up and threw them all into the sky, calling out, 'If you want to sing and dance all the time, you can do it from the sky.' And ever since the constellation you call the Pleiades and we call the Seven Sister has been dancing in the sky every night. So last night I couldn't sleep and spent the night dancing with them, just like when I was a girl." She laughed with pleasure.

I didn't have occasion to see Bessie for many months but one evening I was called from the emergency room that she had been brought in by her daughter. When I arrived Princess Luwana looked upset and the silent Milo stood by looking sad.

"Bessie turned yellow again a few days ago and then she started throwing up. Now she can't keep anything down and I am really worried about her." Indeed, the old lady did look quite ill. She was deeply jaundiced, her skin was dry as were her mucous membranes and the customary twinkle was gone from her eye. She roused up to greet me however and was trying to be cheerful. "Here I am Doctor. Bright yellow again."

I admitted her and started an IV to re-hydrate her. The next morning she refused her liquid diet and did so again at lunch and dinner. When I made evening rounds she looked a lot better than she had in the morning and had some of her customary sparkle back.

I sat by her bed and held her frail little hand. "Well Bessie. The nurses tell me that you won't drink any fluids and have refused everything they have offered you to eat. You can't go home with an IV so you are going to have to eat or else I am going to have to put a tube through your nose to your stomach for fluids."

She looked deeply into my eyes and with a serious demeanor to match mine, she said, "No you're not."

I responded with "You're right" and sat and held her hand for a while. She dozed off with a little triumphant smile on her lips. Shortly thereafter Princess Luwana told me that she wanted me to write in the chart that there was not to be an autopsy. Bessie and she were adamantly opposed to that. She was not even dead yet but we were talking about her death and its aftermath. I agreed, knowing that these folks did not approve of post-mortem examinations and wrote the order in the chart. She died quietly in the wee hours that night and the family took her body back up the river for her burial. Princess did tell me later that when they found her box of important papers hidden away, it turned out her mom had only been 92—she had just wanted to be the oldest Indian on the river. □

A Cherished Flower

When is a flower a flower?

Do you call it a flower when you see its full bloom?

Or maybe when you see its first bud.

When the sun brightens its day with love and nourishment, do you see it smile?

Is a flower a flower when its petals wilt away from deprivation?

Or when father time challenges each day.

In turbulent weather do you think the flower is less strong to hold its bloom?

Do you tend to the flower in bloom, or bud, or wilting away?

A flower is a flower when its life has hope.

A flower is a flower when a mother holds her warrior in her arms.

That flower is truly cherished.

– Ann Marie Stein



John Brandt

Truth

As I sit and attempt to
Sculpt my thoughts
The statue of verbs
And phrases eludes my grasp.

It is better not to
Write of silly notions
But to meditate as
The Buddhists.

For the path of knowledge
Is built on the
Earthen fortitudes of
Nothing, rather than the
structure of logic.

The less I know the
More I understand.

24Mar03

– John Brandt
Informations Systems Planner, CRTC



Three Haikus

Quiet twilight showers
Black on white still pools of light
Circles in puddles.

Damp, cold, brown leaves fall.
Lifeless promises that cling,
Wrap around worn shoes.

Dawn's rays pierce the clouds.
Arms opened wide embracing
Spring's warm, sweet promise.

– Patricia Sikes
Office of Clinical Affairs, UNM SOM



Water's Edge, Margaret Ménache

Touch

As I turn to see you
In the morning sunlight
Your eyes flutter
Like a tulip petal in
The afternoon desert rain.

In your lips I see
The soul of all
Women, Pure, unsullied
The unspoiled landscape
Of a distant memory.

Your smooth hands and
The touch that they bring
remind me that I am worthy
Of no greater gift than
Every moment that I spend
Waking in your arms.

I loved you before I met you
I will love you until
The Love on this earth runs dry.

24Mar03

– John Brandt

Just Before Midnight

by Sandra McCollum

“No. No more. Not one more day.” I was absolutely clear with the intensive care unit ward team. I had decided I would never again allow myself to be maintained on life support. Life as I defined it was slipping away. There had been six hospitalizations in eight months, six episodes in ICU on a ventilator. The progressively worsening lung disease ravaged my body, and the machine that breathed for me was sucking my soul dry.

I had always embraced life, even as a child with a life-threatening lung disease. “Everybody dies, but I plan to do some living first!” That simple statement was my mantra and my response to physicians and well-meaning friends who tried to protect me from failure and disappointments. I wasn’t afraid to die, but I was terrified of having my life reduced to existence. Everything I valued—family and social activities, work, independence, fun—all were being stripped from me. I had only one choice left: to say no and end my life before I became completely useless.

It was nearly 9:00, a time when the evening shift begins to wind down. Most visitors are gone, and most of the team would be preparing medications and charting. I wanted to slip away before suffering through another endless night. Right after the 11:00 shift would be ideal. I would die before midnight.

But the doctors and nurses were ready for action. The arguments began. They were eager to stop the talking and get to work. A nurse wheeled the ventilator into my room. I knew they genuinely cared about me. “But you’re so young, we can save you.” It was a familiar plea. Save me for what? Yes, I was young. In two weeks I would be 30 years old, but I could only anticipate another decade of physical and spiritual erosion. I had written my advance directives weeks earlier, knowing that if I waited until this moment, I would be declared decisionally incompetent. I simply intended to refuse all treatment. Even though this was my legal right, medical logic presumed that if I wanted to die, I must be delirious or crazy and not able to make a rational choice.

I anticipated everything, everything except the remarkable man who was about to enter my life. My regular physician was out of town, and a pulmonologist had been called in to consult. I knew exactly what was going on. The team didn’t want me to die on their shift, so a high-powered specialist had been summoned to deal with me, the ultimate difficult patient. I was ready. I knew my

rights and had rehearsed my speech about my legal and ethical right to refuse treatment.

He walked in the room, my chart under his arm. Instead of ticking off all my labs and burying his face in the reports, he set the chart aside and sat down by the side of the bed. I was surprised but still determined. I didn’t wait for him to speak first. I blurted out, “I can’t face it again.” Then he threw me a curve. Instead of telling me all the reasons why I should consent to treatment, he quietly asked me, “What is it you can’t face? Tell me what we could do differently.” In that moment I had to decide whether or not I would trust this man, this stranger who had been sent to convince me to endure the mechanized torture chamber to salvage my physical existence. “What can’t you face?” he repeated. “Is it the pain?”

“That’s only part of it,” I responded guardedly. I had lived with this disease all my life and had overcome or endured the physical limitations—I had gone to school, worked, married a wonderful man. Yes, it was more than the pain.

“The restraints—I feel like an animal. They tell me my hands have to be tied because I’m ‘agitated’, but I’m trying to get free.” He nodded in understanding and assured me he would not permit me to be restrained. He told me he would stay with me until I was stable and calm. If he had to leave the ICU, he would leave explicit orders to be called immediately if I became restless. No one would have permission to tie my wrists to the bed rails again.

“And the morphine—I don’t want to be doped up all the time. I need to be able to ask for it when I’m ready. Sometimes it’s important for me to be alert, so I don’t slip away into the rhythmic sounds of that machine—swish-pop, swish-pop—breathing in and out, in and out.” I looked away. He got up and moved to the other side of the bed to face me. He showed me the order sheet as he wrote an order for morphine as needed.

Our conversation couldn’t have taken more than 5 or 6 minutes, but it was a powerful force. I could feel myself slipping into the dreaminess that would end my life if I refused the ventilator. This man literally stood between me and death. He took my hands, looked at me and said, “I don’t want you to die. In a few minutes you’ll be unconscious, but I won’t do this if you say no. I won’t violate your wishes. I know we can work together on this.” Those words conquered my fear—the fear of having no control in

my life. He was willing to make my wishes primary; in that moment he returned my humanity to me. He was standing directly under the large clock on the wall. It was just before midnight. The next minute would bring only the conclusion of this day, not the end of my life. I nodded agreement, and, and he quickly went to work. He kept his part of the bargain to honor my requests and made the next few days easier to endure.

This time the ventilator didn't possess me. It was different because I had choices and was able to make decisions about important aspects of my care. My hands were free to use the call button. I grasped a pencil to write my thoughts and questions on a blank progress note. I decided how much morphine I needed.

This brief dialogue pulled me back from the only decision I thought I had left. One human soul reaching out to another made space between two extreme options: either yes, agreeing to everything the doctor ordered, or the final no. I discovered I wanted to live when my values were honored. A brief conversation in the waning moments of a single day shattered my despair and gave me back my faith and will to live. Having the power to say no allowed me to say the ultimate yes—yes to life. □

Sharing Information

Right afetr I told you

My car was booted

And that I had

A lump in my breast

I watched your interested eyes

As you watched

Every step the young red-head took

As she crossed the wide intersection

– Becky Mayo, College of Nursing



Robert Katz, MD



Grove Grove



Land's End

Margaret Ménache