
NON-FICTION | FALL 2021

The Fragile Line

By Jennifer Lycette

I'm lying on my back in labor and delivery, although I shouldn't be here yet—it's too early. The fetal heart rate monitor is strapped around my pregnant abdomen, and I keep my head turned to the side. My eyes trace the rapid path of the baby's heartbeat on the monitor, the fragile line that proves life still remains inside of me. One-hundred-thirty beats per minute. Exactly right. Not too fast, nor too slow—not like before.

The evening nurse comes in at shift change. She takes one look at the angle of my head, glances at the monitor, and rolls her eyes. "Oh, you're one of *those*."

I don't reply aloud, afraid it will come out as a scream if I open my mouth. Yes, I'm one of those. *One of those, one of those, one of those.* Three times, for the three babies that never saw life.

At the same time, I'm desperate for her to know I'm one of *them*. But at this moment, I'm not a physician. I'm only a patient.

I could tell her my story, I suppose, and she might be more sympathetic. But she is too busy. I know this from her brisk movements, her annoyed tone, and the fact she said such a thing to me in the first place. I forgive her for it. I know she has many other patients than me, and she's working in an environment asking too much of her. Maybe they're short-staffed tonight, and she was asked to pick up an extra shift. Perhaps her supervisor—or worse, a physician—took their frustration out on her. Maybe another patient had a bad outcome. I know too much about the devastating things that happen on the other side of closed doors. I've been one of *those*.

But I say nothing because I'm eager to prove myself a good, compliant patient. I cooperate as she takes my vital signs, standing between the monitor and me. Once she leaves, I return my eyes to the thin line. Up and down, up and down, up and down.

Despite my vigilance, I drift off to sleep. As soon as I do, the familiar dream comes.

The three girls appear, as they have every night of my pregnancy when I can remember what I dream. They stand in the shadows so I can never quite see their faces. By their heights, the oldest is around six years old, the next about three, and the third only a toddler. They never move or speak and only stand by my bedside in an unnatural silence, yet I feel strangely comforted. I somehow know the oldest to be my three-year-old daughter as she will be a few years in the future—the way in a dream, a thing can seem normal even when it doesn't make logical sense. I'm convinced the two smaller girls must then be my future daughters-to-be. I can't explain the reassurance it brings—a nightly missive not to give up, that a hopeful future awaits, even after loss after loss after loss.

I awake back in the hospital room and think of the last miscarriage even though I try not to. I travel back to that day in my mind.

In the bathroom. Distracted and in a hurry to get to work. My brain almost doesn't register the blood, the deep red clots swirling in the white bowl. I can't bring myself to move. I don't want to tell my husband—because once I do, it will be real. A third miscarriage. This time, at four months of pregnancy. Past the point when it's supposed to be safe.

The voices of my husband and our daughter carry to me from down the hall. He says something silly, and her delighted laugh pierces my heart.

But eventually, I find myself in front of them, my feet having somehow carried me out of the bathroom. He knows from my face but asks anyway.

I call my new obstetrician, Dr. B., and reach the answering service—too early for the clinic to be open. Someone will call me back. I've met Dr. B. only one time, about three weeks prior. I sought her out after the previous doctor had given me news I didn't like.

Because of the two previous miscarriages, they had done serial blood tests to check my hormone levels. And the levels hadn't risen as they should have—as would have indicated a healthy pregnancy. I can still remember the doctor's words on the phone as I huddled in my car, the only place I could steal a moment of privacy in the hospital. "I'm not saying another miscarriage is going to happen, no one can say that. But what we do know is for most women with this kind of pattern, the pregnancy isn't healthy."

That's my line, I had thought, in swift and sudden fury. That's how *I* explain bad news on test results to *my* patients. How *dare* he use that same line on me?

My husband and I existed for the weeks that followed but didn't really live, awaiting the inevitable.

But then, something unexpected happened. We made it past the first trimester. At thirteen weeks, we concluded the first doctor must have been wrong, and we announced the pregnancy to friends and family. And in a classic patient response, I'd decided to find a new doctor.

At my visit with Dr. B, she had upheld my optimism. We got to hear the heartbeat, and she indicated all signs pointed to this pregnancy progressing normally. Elated, we decided to put the prior two miscarriages behind us. After all, they had both been early—one at nine weeks, the second at five weeks (so early, did that one even count?) I'd told myself that early miscarriages were common and not a sign of anything more. Certainly, they didn't have any relevance to *this* pregnancy, which was progressing normally. No matter what that prior doctor had said or what my hormone levels had shown.

But here I was, bleeding again. In the second trimester.

Dr. B.'s voice when she calls back is kind but laced with fatigue. It's 7:00 AM, and she's likely been up all night, with one hour to go until she can hand off call responsibility to her partner coming on. I don't hold it against her when she doesn't recognize my name. But when she asks me which doctor in the group is my primary obstetrician, I hesitate—not for myself, but for her. Even in the midst of my trauma, the doctor side of me is all too aware of how I'm about to ruin her post-call day. My voice comes out a whisper. "You are."

A short time later, I lay on my back on the exam table, pants pulled down low on my hips and shirt yanked up. A glob of cold gel quivers on top of my exposed belly, awaiting the ultrasound probe. I can't look at my husband. I already know what the ultrasound is going to show.

Dr. B. spots the tears silently spilling out of my eyes.

"Hey now, hey now," she says in her gentle voice. "Let's just see here."

And despite myself, I hold my breath as the image comes into view. My first thought is everything will be okay. I dare to hope as Dr. B. takes measurements on the screen. Because she wouldn't take measurements if the baby's dead, would she? And somehow, I don't let myself notice that the baby is still.

And then Dr. B., with her back to me, says, "I'm sorry."

Some weeks later, my husband and I are giving our daughter a bath, crouched side by side over the tub. How have I not appreciated more the miracle of her? Of my first pregnancy? How had my body been able to give us this child but prove unable to do it again? And how can I be so *selfish*? To desire another child when so many aren't given what we already have?

Our daughter splashes and plays, unaware of the new tension between us. Perhaps we use her as an excuse to not talk to each other about the loss. Until, in a moment that freezes the world around us, she abruptly stops her water play and cocks her head as if listening to something far away. She turns her innocent face up to us, a puzzled look in her wide eyes. "Where is my sister?"

Chills pass over me, and my husband and I exchange astonished glances. From the genetic tests, we know we'd lost a girl. I blink the tears away, picking up the washcloth and scooping water onto her back.

"Silly, you don't have a sister." I wash her warm, pink skin, not meeting my husband's eyes. "It's just us. Me, you, and Daddy."

Later, after she's asleep, we say things to each other like, "It was just a strange coincidence." And, "She was only pretending—it was her imagination."

And I don't think of it again until the dreams.

The first time, I awake with a name in my mind as clear as if a voice had spoken it aloud. The

name of the daughter we'd lost—a name I've never heard before. I know this in a way I can't explain.

I arise and find my “baby names” book. The words on the page tell me the name's meaning—*optimistic, hopeful*. Words that at first seem cruel in the face of the loss. But maybe instead, they're words meant to give the strength to try again.

Months later, when I do become pregnant again, the recurring dream starts. The one with the three little girls standing guard at my bedside, night after night. A dream carrying with it an inexplicable feeling of comfort—and a belief that one day, I'll have three little girls. Even if my rational mind scoffs and tells me it's only a dream.

Until I go into preterm labor and find myself in Labor & Delivery in the middle of the night, holding my vigil over the pattern of the baby's heartbeat. Until I deliver not another girl but a healthy baby boy.

My belief in the dream feels childish. Of course, the dream has no deeper meaning—it had only been a manifestation of my subconscious.

But with the next pregnancy—the one that will give us our third living child—the dream comes back. It seems strange my subconscious would bring back the dream-girls since I'd already given birth to a boy. Yet night after night, the dream recurs. The three girls standing vigil by my bedside.

And when our third child is born—another boy—the dream recedes from my conscious memory. Until the three girls visit one last time.

In the last night I will ever dream of them, the three girls tell me—without speaking—their identities. They were never my children of the future. They were the children of my past. The ones I'd lost. Three little girls who never came to be.

They've watched over my subsequent pregnancies—the births of their brothers—and now it's time for them to go. Until one day, I will see them again.

My rational mind tells me this was only a dream. The physician side of me never shares this story.

But the longer I serve as a cancer physician, the more I am open to the existence of events that defy explanation.

I listen differently now when my patients speak of their stories such as these. Because my own experiences—both losses and miracles—changed me. I have been across the fragile line.

Jennifer L. Lycette, MD, is a rural community hematologist-oncologist, mom of three and recovering perfectionist who is writing her way back from physician burnout, one word at a time. She is a regular contributor to Medscape's blog, and her essays have been published in The New England Journal of Medicine, JAMA, JAMA Oncology, Journal of Clinical Oncology, The ASCO Post, Doximity, and more. In fiction writing, she was a 2019 Pitch Wars mentee, and she has a flash fiction piece in an upcoming anthology with Alternating Current Press. jenniferlycette.com

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