

Numb

By Nikhil Barot

The femur is blighted with bad cells. The adrenal is occupied with obstinacy. The kidney, the liver, the lung, her skull, all recipients of that nefarious guest – cancer. It’s as if it walked from toe to head, its feet pounding out a trail of impressions wherever it tread, organ upon organ, like a mythic giant from a faraway fiction that couldn’t possibly be real, whose trespass seemed wholly unimaginable to her. Mercifully, it left her mind intact to testify to this intrusion, to consider its meaning, to feel or not feel its wounds.

I meet her as she lies recumbent in her hospital bed and ask her how she feels.
“I feel numb,” she says.

I pause. Neither she nor I know the diagnosis. The biopsy sits in the pathology lab waiting to be interrogated. I know she must have pain; I’ve seen the films. Her femur is so riddled with tumor that should she stand, as I do now, she would collapse.

What is numbness? Is it an inability to feel, or is it just another word for fear, of not knowing what comes next? Perhaps it’s a fear of speaking about pain, of telling a stranger or loved one “I suffer in ways you’ve never known.”

My first instinct was to push her out of her numbness, to make her feel again. I could normalize her pain, speak of other patients I’ve met, white knucklers in a sense, that brave through the stabbing at periosteum, the irritation upon nerves. They are the ones that need to be taught the pain scale, guided towards the recognition that what to them is a 4 out of 10 is really a 7. I could teach her to be more expressive, to use words never invited into her lexicon, but I know that would require a psychological inventory beyond my expertise. So instead, we talk about fear.

“What scares you?” I ask. She brushes her hair back and winces.

“I don’t know what’s going on,” she responds.

“What do you mean by that?”

“The cancer. I don’t know what type it is and I don’t know what they’re going to do once they find out. The other doctors say they can’t tell me about treatments until they have more information.”

“I can see how not knowing can be frustrating. What else worries you?”

She pauses. She takes in a deep breath, as deep as she can muster, and begins to tell me about her children. They are young adults, the older one in her first job, the younger one in college, but both living hundreds of miles away, now en route to join her bedside.

“You don’t know what to tell them,” I say. She nods in agreement. “I could help with that.”

She tells me about her job, how it requires her to both stand for long periods and move about. She enjoys her work. It gives her satisfaction.

“You’re not certain you will work again,” I say. Again, she nods. Now it is I who am taking in a deep breath, letting out a sigh. “I’m not so sure you will, either.”

She shifts about in her bed and her face contorts. Even this simple movement causes her pain. I see your pain, I say to myself.

“I noticed that you haven’t been asking for your Norco. Why not?”

“I don’t think I need it.”

“Why not?”

“I don’t want to need it.”

The room is silent. A nursing attendant enters and places a blood pressure cuff on her arm. He slips the thermometer under her tongue and checks her oxygen saturation. The numbers are perfect.

I talk to her about how pain should be controlled with medication in order to free her languid body to move through the world again, to free her mind to consider thoughts beyond the assault on the physical. I know that on this first day I meet her, the least I can do is lift some of the physical burden of her disease as long as she trusts that I can. She is skeptical, but is willing to give the PCA a shot.

The next day, her children adorn her like baubles she had longed to wear. She is sitting upright, a pose I couldn’t have imagined her in just yesterday. The bag of morphine that drips into her vein is emptier than I would have guessed it would be. I note that she is less visibly in pain as the first hints of comfort begin to bubble to the surface. She reaches for her water with ease and takes a sip.

“Are these your children?” I ask.

“Yes,” says her daughter, who answers for her then begins to ask a million questions. I answer them, one by one, as best I know.

The giant hasn’t left the room. Her worry is still present, her decisions lay bare, but her fear is taking less precedence. I cannot cure her fear just as I cannot cure her cancer, but I can tend to it, understand it, and hope that it lessens, for as it attenuates, it makes room for a life of reflection and emotion, of perspective and clarity, and if she is so fortunate, perhaps a small taste of serenity before she takes leave of this earth.

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