
FIELD NOTES | FALL 2019

Willing to Die

By Andrea Eisenberg

At first glance, her appearance startled me. My small frame, loose scrubs and lack of make-up paled in reflection to her dark mascara and eyeliner framing her eyes, tight fitting clothes fleshing out her curvy body, and colorful flowery tattoos wrapping her arms. She shook my hand firmly when I walked into the room and sat forward as she spoke.

“I need my IUD removed. I want a baby.”

“Tell me more about yourself,” I encouraged her.

“I have a teenage son. He was born like two and a half months early. I don’t remember much about his birth and why it happened that way. I was so young then. I mostly take care of him -- he is in a wheelchair and needs help with most things. Sometimes his dad takes him.” She then sat up straight. “But now I want a baby with my boyfriend.”

I imagined the hard life she had endured, and my heart went out to her. I was happy to help her. And how easy for me to just remove her IUD.

But once I examined her, I couldn’t see the IUD string. I brought her into the dark ultrasound room.

“See this darker grey area here,” I pointed to the screen, “that is your uterus and here is your IUD high up in the cavity. The best way to remove it is under anesthesia, so you aren’t uncomfortable.”

“No, I want it out now. I can handle it.”

I looked at her incredulously with a burning in the pit of my stomach. “Okay, but you can stop me any time.” Focused on working as quickly as I could, I managed to dilate the cervix and grasp the IUD while distracting her with questions about her life. *Done!* I thought, *I’ve solved her problem.* But little did I know, it was only the beginning of many challenges ahead.

She returned four months later and announced, “I’m pregnant!” Back in the ultrasound room, I pointed out her 7-week fetus on the screen and watched her face light up.

“We’ll be seeing a lot of each other this pregnancy. I want to keep a close eye on you especially because we don’t know why you delivered early last time,” I explained.

It wasn't until her second trimester that her tight fitting clothes became tighter. At the 20-week anatomy ultrasound appointment, I asked her if she wanted to know what sex baby she was having. "Of course!" she exclaimed. She screamed so loud when hearing the word "girl" I thought she would scare my other patients.

She never came for her next appointment. Instead, my partner informed me she showed up in the emergency room in asystole. When I heard this, my heart stopped for a moment too.

I arrived the next day to find her in the middle of a web of IV lines and monitors in the ICU. Her big red lips and glowing cheeks were gone, now replaced by an almost unrecognizable ghostly shell.

I noticed a tightly wrapped package in sterile blue drapes on the counter -- a post mortem c-section kit used to deliver the baby emergently if she died. "Oh god," I mumbled under my breath, trying not to let it register. I walked to her side and touched her hand to wake her. Her eyes shot open and soon filled with tears. I just stood there speechless, holding her hand.

Each day that I visited, I felt like an imposter. Here I was *her* doctor, yet I didn't know how to help her. I couldn't contribute to her care with her cardiac issues way beyond the scope of my expertise. Yet, each day I visited, she greeted me with a smile and would say, "My baby is another day bigger," patting her small belly. *Still so far to go for this baby to survive*, I thought, wishing I could be more optimistic.

On her fourth night there, her body responded to all the stress by going into labor and delivering an extremely premature baby. The on-call doctor told me the baby died in her arms. I dreaded seeing her, knowing I had nothing to say... knowing I failed to help her have a healthy baby. But as I approached her bed, she grabbed my hand and I reached to hug her.

The cardiologist determined that an irregular heartbeat was the cause of her cardiac arrest and placed a defibrillator in her chest to manage the arrhythmia. He told her she should never get pregnant again as her risk of death was too high. She left the hospital empty handed and defeated, her dream of having a "normal" child dashed.

And then she disappeared.

It was a year before I saw her again. "Where have you been?!" I exclaimed louder than I intended. But her face lit up. Then the words fell out of her mouth in rapid fire, "I had to find answers. I had to find a way to have another baby. Finally, the doctor realized it was my thyroid that was working on overdrive which then affected my heart. Once that was treated, my heart has been normal."

She moved to the edge of her seat, looked straight at me, her eyes bright and clear. "I want to have a baby now. I want you to take care of me."

Suddenly, I'm back in the ICU, standing over her bed, hearing the beeping of monitors, praying she would survive. And now she wanted me to not only support her decision, but also care for her despite the risks.

I saw her desperation, her dream, her recklessness, her hope all clouding the facts of her medical history. But I also saw her determination and optimism. In myself, I saw hesitancy, concern, and biggest of all, fear of her dying. I had once lived through the death of a patient and I didn't know if I could live through it again.

What was my obligation to her? A patient that nearly died in her last pregnancy, a patient who was told to never get pregnant again?

She looked at me unwavering, imploring me to walk her through this journey fraught with danger. "I want to look through your records and understand for myself your health issues," I answered. She deserved a thoughtful response and I needed time.

I spent a couple days reviewing her records, consulting with my partners, and examining my soul. In my heart, I didn't want to leave her, but was I strong enough to care for her? For a moment, I banished the memory of her in the ICU and reflected on our improbable relationship, two women from very different worlds bonding over her near-death experience. She showed me how impactful our relationship was for both of us despite my feelings of inadequacy -- that staying by her side and honoring her was as powerful as diagnosing her heart condition. Ultimately, the only answer was yes.

Another year later, in a room full of joy and love, trust and friendship, I delivered her full term, healthy baby girl with lungs as loud as her mother's.

Andrea Eisenberg is an OB/GYN in the metro Detroit area who has been in practice 26 years. She writes about her experiences in medicine exploring the relationships and bonds that are formed. Her writing can be found on her blog , www.secretlifeofobgyn.com, and in *Intima, The Examined Life and Pulse*, and *the Voice of the Heart of Medicine*.

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