REFLECTIONS

Young & Old

For the most part, the cadavers we dissected were old. I don't mean that as an insult, just as a way to explain that they had lived a lot of years. Next to our dissection table, on the left, was a 96-year-old female who had died of a heart attack. Behind us, an 85-year-old victim of lung cancer. Near them were the bodies of people who had lived to 80, 95, 81, 83, 79, and 92. The room was awash in age. If you added up the lives that were lived, you'd have a count of hundreds of years.

Each cadaver had some hallmark, a particular uniqueness—maybe some unusual anatomy, a wire stent that helped open a vessel, or a disease that left a blackened mass in its wake. When my classmates would come to look at our cadaver, they might comment about how lucky we were—the body was in great shape. No evidence of a long, drawn out battle with illness. No muscle atrophy. Sometimes they said something like that.

But without fail, the one recurring comment from both students and faculty was about his age. "He looks so young," they'd say. "How old was he?" And then, shaking their heads, they would sigh, "Ooh, that's so sad." And everyone would name someone—a parent, a child, a friend—who was about that age.

He *was* young when he died. According to the sheet taped to the wall, he was 52. There was a very terse description of him there: Table 20, ID# 457, Male, 52, glioblastoma/partial complex seizures. He died of a brain tumor and some complications from that.

But youth and age are based on comparisons. In our room, he was relatively young. Still, I thought about it differently. He was 52—and 52 is nine years more than 43.

I had what I can only call a surreal moment on the first day of dissection. An irony with a mean suckerpunch that left me dizzy and sobbing on the shoulder of a friend I pulled outside. Enthusiastically, one of my lab partners said that we had a male and that he was the youngest of the group. And then he told me what killed him.

About 10 years ago, at the age of 43, my father died. And of all things, he died from a glioblastoma. It was a ruthless, slash-and-burn type of tumor that lurked deep within his brain. It killed him shortly after the diagnosis. Really, he never knew what hit him. Which, in a way, was comforting. Perhaps the most acute kind of suffering is the awareness of your own impending death. When it's just weeks or days or even hours away.

So for me, the cadaver experience was a strange and powerful one. I mean, of all the cadavers I could have gotten. ... I didn't think about it all the time, but when I did, I thought about his family. Did he have young children? A wife? Did his departure leave a gaping wound that never quite heals? Do they think of him every day? Do they wonder what their lives would have been like...if?

I told my family and a few friends about this chance meeting, and their reactions ranged from the startled, "how weird," to some kind words about omens. I don't really think of it in a profound way, as anything more than a strange coincidence. Surely we will all have patients who remind us of someone close to us, even someone who may be gone. But it was a reminder. A reminder that we move on, that our time here is short, and that 52 seems like a great, great blessing to a 43-year-old about to die and to the family he left behind.

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