REFLECTIONS

Sliding Home

A gaggle of neurology residents shuffled into the waiting room and sat at the round table beside me. Outside, large flakes of snow drifted past the seventh-floor window. I lay on the couch, under my parka, and eavesdropped.

"He has the classic symptoms of a left frontal lobe brain tumor. He's gregarious. Energetic. Charming. Watch how he tries to make you laugh. That showmanship behavior corresponds exactly to a tumor in this region, here," said the chief resident, pointing to a diagram before him. "He's 62 years old, a former investment banker, very well educated and able to cover his deficits better than most."

They were talking about my father.

They had no right ascribing his behavior to his tumor. He'd always been charming and gregarious. He'd always made people laugh. He wasn't gregarious because of a tumor—it was who my father *was*. I was furious. How could they reduce my father to a tumor?

I lay there, paralyzed, rendered mute by a bunch of doctors who knew nothing about my father, who hadn't bothered to ask me or my sisters or aunts who he was, who he'd always been. They made assumptions about my father based on their knowledge of neuroanatomy, not on their knowledge of the man.

I felt too overwhelmed to say anything.

And then these doubts overtook me: What if, now, my father was acting as himself not because he was himself, but because of the tumor? How would he be acting if the tumor were elsewhere in his brain? Could the tumor grow so much that he no longer seemed my father? How would this disease take him from us—piecemeal, or all at once?

The next day—the day after Christmas—after 6 hours, many cups of coffee, and a whopping argument about telephone calling cards, our family, wired from waiting, jumped when the loudspeaker blasted, "The family of David Ready to Conference Room C. The family of David Ready to Conference Room C." We trooped into the surgeon's conference room and squeezed together on one couch, facing a blackboard with an empty chair posted in front of it.

There we sat, my two sisters and two aunts and I, edgy and nervous, looking to each other, and then away, each of us sipping air, afraid to breathe.

I'd spent the day imagining the surgery: the sound of the saw as it cut through my father's skull, the peeling back of his dura, the computer-led precision of the laser knife, my father's eyes taped closed beneath the drape. I'd pictured myself looking over the shoulder of the neurosurgeon, peering into the cavity of my father's skull, seeing the snarl of cancer in his brain. I so much wanted to see what we were up against.

Dr. Miller, my father's young neurosurgeon, slipped into the room and took the empty chair. He was still dressed in surgical greens, his mask loose around his neck. He drew in a big breath, let it out slowly as he looked each one of us in the eye, and then relayed the worst of the possible diagnoses: glioblastoma multiforme, stage IV. He estimated he'd removed 90% to 95% of the tumor, but it was very aggressive, already building a capillary system of its own, putting down the equivalent of a foundation, intending to stay. "Very messy margins," Dr. Miller said. He removed all he could—if he'd gone after the tendrils of cancer invading the healthy regions of my father's brain, he may have caused more harm than good.

The tumor, he said, was the size of a large egg.

My father loved to eat pickled eggs.

I wanted to see the tumor. Was it black? Green? Yellow? Soft or hard?

I wanted to ask: How did the rest of my father's brain look? Could you tell it was a good one? Quick and clever, able to remember jokes and birthdays and family stories? Able to let my father cry until his chest heaved and his nose dripped, able to let him laugh with his head thrown back and his chest expanding until everyone in the room turned? Oh, I knew his brain was gray and convoluted and divided like a peach or a bottom, surrounded by dura and, outside, just like everyone else's. How to describe to the world what I knew was in it?

I could tell by the surgeon's face, his body language, that he had hoped to tell us something better. He had hoped that he wouldn't have had to sit with us all in this muted, padded room and tell us near the worst. The worst would have been that he'd died during surgery. He didn't tell us that, I reminded myself.

The news we could take in was so minimal: My father was alive. He had the worst kind of brain cancer. The surgeon had removed all he could.

We thanked Dr. Miller, who assured us we could sit there as long as we needed, before he walked away with heavy limbs.

Dr. Miller had told us my father would recover in the ICU for several days, maybe a week, and then be moved back to the neurology floor. That was the standard length of time following surgery of the extent my father had undergone.

But the next morning, my father was gone.

Back on Neurology. He had spent less than 24 hours in the ICU—a new record, according to Dr. Miller. That morning, he'd decided he was getting out of the ICU. He passed the medical evaluation, and was out. As usual, my father had shown his stuff and flown the coop.

My sisters and I found him back in his preop room, directly across from the nurse's station, his little bedside Christmas tree twinkling. We walked in and he gave us the thumbs up. He had the usual determined look in his eye.

"How you felling?" I asked.

"Great. Can't wait to get the hell out of here."

"You set a record. Dr. Miller said you ought to have been in the ICU for a week," my sister Annie reminded him.

"I didn't want to be in there. All those dying people. I'm outta here!" His face looked flushed beneath the white turban of gauze. He still wore his hospital johnny.

"What do you have to do to get home? Did Dr. Miller give you the drill?" I asked.

"Not yet. He's coming in later. Going to introduce me to some of his colleagues."

He looked good. You could see the wiry energy that ran under his skin, kept him aggressive on the playing field and in business, that electric charm which pulled both men and women to him. But there was an edge to it, a worry that he was in deep this time.

"We'll find out what you need to do from the nurse. Don't be in too much of a rush, Dad. You're already ahead by at least 4–5 days as it is," I cautioned.

"I want to beat it. I want to beat all of this, damn it. Get me my clothes. I want to take off this hospital suit."

"Let's check with the nurses, Dad. Let's not push it too hard."

"We got to push this one hard, girls. We got to."

The nurses said he had to have both a physical and an occupational therapy evaluation before he could leave. He could have them both tomorrow, just 2 days after neurosurgery, if he felt up to it. Maybe he could get out over the weekend. Dr. Miller would have the final word on that decision. Dad could have his bandage removed later that day, and then we could put on his own clothes. Putting clothes over the gauze might prove difficult.

We brought him the news from the nurses. My aunts had arrived and discovered him back on Neuro. Elation filled the room. We radiated hope. Dad was our hometown hero, defeating the odds, our David against the Goliath of cancer. If anyone could do it, he could.

We weren't there when they took off the gauze. They did it at night, after we went home, because when we came in Friday morning, it was off. On the left side of his face, all the way from his ear, up along his hairline, over to the middle of his forehead, he had a scar, held together by big metal staples. My sister Louise, easily queasy, said hello and then left for a "cup of coffee." I sat down beside him and inspected the scar.

"Looks good," I said. "Not at all red. Does it itch?"

"Not much," Dad answered. "Kind of like Frankenstein, huh?"

"It will fade," I said. "What's on today's agenda?"

"Getting out of here."

"What's the hurry? Food's probably better here than you'll get at home with us cooking."

"Christ, you're right. Forgot about that," he said, smiling.

Auntie Kit was worried we were pushing him, that he was trying to be strong and show off for our sake. I could see how it might be true, but I didn't see how it could hurt him. My father always performed better in the presence of spectators.

Later that morning, I took him downstairs for his physical therapy evaluation. He dressed in street clothes, his usual turtle-neck with V-neck sweater, wide-wale corduroy pants, LL Bean loafers—new. He had the same irritated air as I wheeled him in his wheelchair that he had when I drove him through city traffic.

We wheeled into PT, waited, and watched: one man my age lay on a cot, moaning. A frail woman with two IVs curled in a hospital bed. An old man slipped out of a wheelchair. I saw my father take it all in and set himself against it.

When the therapist called his name, he ran through his paces, upstairs and down, touching toes and nose, balancing with his eyes closed, as if the dogs from hell were at his heels. He wanted out of there, away from sickness and death, more than he wanted anything in his life.

He got out. Two and a half days after neurosurgery he was out. He set his record.

Despite his record, 6 weeks of radiation, and two kinds of chemo, the tumor did take huge chunks of him. By July, he'd exhausted his options; he couldn't walk or find the right words, unless he had something really important to say. Like this:

Fourth of July, we all gathered at Dad's. My sister pushed his wheelchair up to the window, so he could see the fireworks. We all oohed and aahed, commenting how beautiful the fireworks were, how brightly they flashed, how quickly they were over. Midway through the display, it was time for his meds, so I wheeled him to his room, away from the others. I started to draw up the syringe when he took my hand. He placed his other hand on my cheek and said the first intelligible sentence he'd uttered in weeks: "Am I dying?" he asked. And I said, "Yes, Daddy, you are." He nodded. He knew. He kissed my forehead.

The next day my father kept saying, "Put me in your back seat," and we thought he was aphasic. Auntie Kit and I were returning to Vermont, where my father grew up and we lived. He watched us pack, urgently repeating "Put me in your back seat," again and again until we'd given him all the Ativan we could and then finally realized he meant it. He wanted to go home.

We drove to Vermont with him in the back of my aunt's station wagon. The closer to home we got, the more relaxed he grew, reassured by geography.

He lived 10 more days in my aunt's living room. He died a beautiful July Sunday, my aunt and I beside him, encouraging him to go for it, round that last base, slide on home.

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FINALIST, 1999 Creative Medical Writing Contest