Through the generosity of Charles R. Millikan, D. Min., vice president for Spiritual Care and Values Integration, an annual award competition was established at Houston Methodist Hospital among the resident staff. To enter the writing competition, residents must submit a poem or essay of 1,000 words or less on the topic, "On Being a Doctor." A committee of seven was selected from Houston Methodist Hospital Education Institute to establish the judging criteria and select the winning entries. The following is the second-place winning entry for 2015; the third-place winning entry will be published in the next issue of this journal.

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FRAGILE

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Every stroke of a paintbrush has its own significance, coalescing to create an ultimate portrait. Each word that is uttered, with the subtleties of tone and direction, can blend into a melodious symphony or a vile cacophony. A single misplaced thread in an elegant tapestry could alter the entire pattern. No different than Monet, Raphael, or Mozart, physicians too are artists; our art being that of *healing*. Each of our patient interactions is an empty canvas: weighty are our words and delicate our intonation. As we encounter any patient, we are given the opportunity to connect with them to create a masterpiece. Even the slightest misappropriation can leave them scarred and irreparably aggrieved.

The conversation I had with her daughter on the phone took longer than expected. The mother, our patient, had not been back to visit us in the hospital's ALS (amyotrophic lateral sclerosis) clinic in almost 2 years, and naturally a lot had changed since then. She was no longer able to swallow and was fed through a PEG tube. There was now no movement left in any of her limbs. Communication was through an ingenious eye-guided device. In spite of all this, she was still very mentally alert and sharp. Her mini-mental state examination (MMSE) score was perfect, definitely better than my own on post-call days. She had not lost her witty sense of humor. Having a love for shopping, there were frequent visits to shopping malls with her daughters. Her husband was often greeted by a hefty bill for all the online shopping she did using her eye-guided device. There were frequent outings to her daughters' basketball, volleyball, and soccer games. The eldest daughter said she would insist on going out on almost a daily basis.

Towards the end of our conversation she mentioned why her mother hadn't come back for so long. At her last visit, she felt her disabilities had been misjudged by one of the physicians. Her physical limitations were apparent, yet it was assumed that she may have a cognitive impairment as well. She felt as if she was being spoken to like a 4-year-old child. She had no difficulty hearing or understanding what was being said, as was demonstrated through her cognitive tests. All she wanted was to be treated like a normal human being. That single encounter had dissuaded her from coming back until now. In the interim, she had gone to another physician who had diagnosed her with Lyme

disease, and she had completed a prolonged course of antibiotics. This was a highly questionable diagnosis, and an even more questionable means of management.

It was made clear that her original physician had otherwise made no mistakes in terms of assessing her illness, yet that one misjudgment had turned off the patient completely. That single mislaid thread had desecrated her entire tapestry of life. Illnesses such as ALS have the ability to make patients much more emotionally labile, as she too had been in the past. This further emphasized how conscious and sensitive a physician must be when approaching every patient—no less delicate and subtle than Monet as he painted his famous water lilies. As diseases strip patients of their physical abilities, we must reinforce to them that it has not changed who they truly are. Aside from her limitations, she was still a loving wife, a caring and supportive mother, a strong-willed woman, and an avid shopaholic. She was as far from being a 4-year-old child as one could be and deserved to be honored for who she was.

When we left her room, Dr. Appel, her physician and director of the MDA/ALS Research and Clinical Center at the Houston Methodist Neurological Institute, posed a profound question: "Would you want to stay alive if you were in her position?" I continued to reflect upon this throughout the day. Broader questions begged to be asked. What is life? What mandates whether or not life is still worth living? Does complete paralysis deprive one of truly experiencing life? I looked back to her example and concluded that she was as alive as anyone else. As Dr. Appel had mentioned, in ALS "the brain is in solo-flight." With her brain function alone, she was able to enjoy the many things that anyone else does: the growth of her children, celebrating a victory or consoling a loss of her daughters' sports games, birthdays, anniversaries, a family trip to Disneyworld, and, most importantly, the love of her family and friends. Was there much more to be taken from life than all this? Once we ultimately lose someone, the emptiness that ensues is far heavier to bear, regardless of how limiting the illness may be. Though it is challenging for patients and their families to witness the physical limitations caused by diseases such as ALS, it should not be forgotten that each of life's moments are precious and are to be celebrated as such.