



The Kumquat and Other Words for Brain Tumor

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We called it a plum. That was the size of it, perched atop her sella. It was a grape, a kumquat. It was a pea pod whose tendrils curled out of the sella and spread into the adjacent cavernous sinus. It twisted and twirled, sprouting buds and invading gingerly, DNA helices unwinding and reforming. We didn't know how long it had been growing. I imagine it was fed by her endless hours of study—metabolic pathways, research questions, Italian lessons.

I wonder if it was there the day she graduated medical school, a mushroom spore ready to burrow into the ground. Perhaps it was a pomegranate seed the day I was born, red and lush, plumped full with the intensity of labor and the love that followed.

We did not call it what it was.

It announced itself at the hairdresser on a Sunday morning. Warm hands and smooth nails washed her hair and rubbed her scalp, coaxing the flower to turn its face toward the sun. There was a thunderclap, and the tomato split along its pink flesh, no longer supported on its fine stalk. "The worst headache of my life," she told me later. I know what she was afraid of, but there was no bleed. They sent her home from the Emergency Department with news that there was "something" in her pituitary. I breathed a little easier, but that something was gnawing in my stomach.

I arrived at work early Monday morning and hung up my scarf—a sweet reminder of a vacation with her last spring. As I slipped into my white coat I was struck by how comfortable it felt that morning, yellowed at the wrists and blackened in the breast pocket from uncapped pens. My white coat used to feel like armor, stiff and fortifying, but as a second-year resident it felt more like an extension of the doctor I am growing into.

I had a new patient in the ICU that morning. He was transferred from the regular floor with intermittent hypotension and new abdominal pain. When I started my intern year, our program director told us that our first job was to recognize "sick" and stand alert like a pointer dog. I used to remind myself of this when we waded through the minutia of electrolyte imbalances and antibiotic sensitivities. This patient was sick. His intestines were leaking lactic acid, infarcting as the norepinephrine was being titrated. There was free air on his abdominal film.

That was the morning they told her the differential: metastasis, sarcoma, glioblastoma, pituitary adenoma. My dad called me during rounds to tell me they were back in the hospital. My mom was getting an MRI. She needed surgery. They needed me.

I wanted to sit still, paralyzed, but I finished rounding. I broke each patient into pertinent systems and

addressed the relevant problems. I willed myself to feel numb, that familiar protective instinct that I swore I would never learn. The surgeon took my patient to the OR. I answered questions about sedation, antibiotic stewardship, and mechanical ventilator settings. I wrote potassium sliding scale orders. I wanted to talk with the families, but I didn't have the energy to build the problem lists back into the people lying in front of me. I worried that if I let myself see their suffering, mine would become too unbearable.

Some days are like that as a doctor, but I wish they weren't. Sometimes I wonder what I was like, before my training taught me to see people in parts, before I learned to compartmentalize myself. There is no textbook on putting those pieces back together. I suppose we need to start with ourselves; I couldn't focus on rebuilding him when my mom was broken.

In the call room, I took off my white coat and rewrapped the scarf around my neck. I bought it with my mom in Rome where she had practiced her Italian. The shopkeeper smiled when she realized we were traveling, just the two of us. I burst into tears remembering that bright spring afternoon, willing myself back

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to the moment when we stopped to listen to an accordion player serenading the winding alleys outside the shop.

My patient's family was sitting across from the elevator when I pressed the button. They were curled together on stiff benches, arms on shoulders and hands on knees. Their expressions masked faces of exhaustion from fear and longing to have unanswerable questions brought to light. I recognized that vulnerable expression of suffering that so often brings me back to center during my most sleep-deprived moments. Most days it compels me to sit down and explain as much as I can, even as my pager scolds me for daring to claim the moment for them, for me. But today my face mirrored theirs. I looked at them and wished I could have stayed the doctor that day, but my own growing dread compelled me into the elevator as I tried to suppress the questions that were bursting out of me as tears.

My dad was alone in the room when I arrived. He looked small in his green winter coat sitting in the corner, waiting. He hugged me so tight. They rolled my mom in on one of those hospital beds. She was wearing a hospital gown, but her hair was perfectly styled. We talked about the plum. They told me the surgery would be in a couple of days. They would go in through her nose.

The surgeon told us the tumor was "giant," but they still hoped it was an adenoma; I wished it was just a watermelon seed that had sprouted. She would need to stay in the ICU. I imagined my mom with a central line and a breathing tube like my patients that morning, doctors breaking her into fixable parts, but to me she was my mom.

I stayed with her that first night before the surgery. Her headache was debilitating as the peapod tendrils twisted. I lay stiffly on a reclined cardiac chair curled up with a scratchy hospital blanket. I listened

to her breathing and sang a lullaby into the darkness. We cried together into the open space and smiled at the connection it created between us.

The morning of the surgery we told stories as I quietly willed the knot in my stomach to uncoil. In the surgical waiting area we were given a pager like the ones at restaurant chains. We set it in front of us reverently, glancing at it every few moments and willing it into action. It took 5 hours to carve out the plum and its sprouts, the tumor. When the surgeon came out, triumphant in his paper cap, he glanced down at the pink Pepto Bismol bottle perched in front of us and smiled.

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