

The lives my parents live

Nancy Yurkovich

In brief

ON OCT. 15, 1997, JEAN AND ALBERT SMITH celebrate their 65th wedding anniversary. On the same day *CMAJ* joins medical journals around the world in producing a global theme issue on aging. The Smiths' daughter shares their story with this snapshot of how the health care system has served these 2 Canadians over the years.

En bref

LE 15 OCTOBRE 1997, JEAN ET ALBERT SMITH célèbreront leur 65^e anniversaire de mariage. Le même jour, le *JAMC* unira ses efforts à ceux des journaux médicaux du monde entier pour produire un numéro mondial qui aura pour thème le vieillissement. La fille des Smith partage, avec ce cliché, leur histoire de la façon dont le système de soins de santé a servi ces deux Canadiens au fil des ans.

Dad was born in Ontario in 1903 and was named Albert Edward in honour of King Edward VII. He was one of 3 sons whose mother lived to 94 and whose 6 uncles lived past age 90 — good genes here!

He was taken out of school in Winnipeg in Grade 6 to help support the family, but always carried a note in case he was stopped by the truant officer. When his family moved to Windsor, Ont., he studied high school subjects on his own and eventually received a high school diploma from the province. Later he attended McMaster University — it was in Toronto at the time — and graduated in 1929. There he met my mother, Jean McTavish, a member of the first class to graduate from the new campus in Hamilton in 1931.

After graduation, my mother and several of her friends stayed home in preparation for marriage. In those days women were not expected to work and were discouraged from taking a job a man might need. Two weeks before their wedding on Oct. 15, 1932, Dad entered a contest sponsored by Chrysler Corporation and won \$1000, a princely sum in those Depression days. Delighted with the love angle, Chrysler provided chauffeur-driven Chrysler Imperials for the wedding — an uncommon sight during a modest Depression-era wedding. The wedding's colour scheme was brown, to match the only suit my father owned.

While growing up my mother received care from homeopathic doctors, whom she and her family visited exclusively until her brother entered medicine at the University of Toronto. From that time on, they went to conventional doctors.

My parents wished to have a family, but following surgery on my mother to “realign internal organs” and 5 years of childlessness they adopted a baby. At the time the gynecologist told them to relax and not worry because my mother would conceive soon. And sure enough — 20 months after they adopted my sister I was born. Even though we now lived in Hamilton, my mother travelled to Toronto for her prenatal visits. Because of complications involving the labour and delivery, my father and sister were alone at home in Hamilton for nearly a month.

In retrospect this separation was unnecessary, but at the time no one suggested switching to a doctor in Hamilton. My mother gained 70 pounds during the pregnancy, but because there was no concern on the part of the doctor she just kept on eating. Labour was prolonged, with my mother unconscious throughout,



Soul

Reflets de l'âme

Nancy Yurkovich is a writer living in Richmond, BC.

Can Med Assoc J 1997;157:1091-3



and I wasn't handed to her until 3 days later. At the time, there were no clinical nurse specialists to emphasize bonding between mother and child!

And no psychological skills were employed when the physician entered the room accompanied by a group of worried professionals and announced that a pediatrician was being called because I was losing weight. He disappeared just as quickly. Mum had to leave me in the hospital because of my "failure to thrive" — apparently there were problems with nursing but no instructions were provided. When she did bring me home, she engaged a mothercraft nurse, a specially trained woman who taught new mothers parenting skills.

Dad was also familiar with doctors. He had his tonsils removed while lying on the kitchen table, and in 1930 had surgery to repair a torn cartilage. The surgeons removed the cartilage and ordered nearly 3 weeks of bed rest. In recent years, he has "felt it a bit," but he remains grateful to the surgeon for repairing a knee that has functioned well for 67 years.

His life was filled with work at Bell Telephone, navy service in England during the World War II, parenting 2 daughters, looking after aging parents and doing the other things that life required. (He smiles when he thinks about his pension income. Adjusted for cost of living, it is far greater than his highest earned salary.)

In 1955, Dad experienced depression with obsessive compulsive disorder. A change of jobs, medication, treatments and hospitalization followed in Montreal, Toronto and Ottawa, but his depression persisted. In 1959, a pre-frontal lobotomy was recommended as a way of restoring his health. It was a time of concern for all of us, but encouraged by the thorough way in which the team of professionals had considered this option and the way they had included us in the decision-making, we agreed.

And what a remarkable success story he became! We know that this type of surgery is no longer performed and

that the risk to my father was great, but we have been profoundly grateful for the wisdom and expertise of his surgical team. The one curious point is that there was never any follow-up. Since the 2 previous patients had died, we thought that the surgeon would have enjoyed my father's successful outcome. But of course, my parents never questioned this. It's not what patients did in the 1950s.

On Oct. 15, 1982, the family — 2 daughters, 2 sons-in-law and 6 grandchildren — hosted a 50th wedding anniversary celebration for our parents. The granddaughters wore the original wedding dress and bridesmaid's dress, the bridesmaid came from Ottawa to Vancouver for the celebration and the bride's cousin, now 71 and wearing the McTavish tartan kilt, played the same pieces he had played at their wedding. It was a joyous celebration.

On Oct. 15, 1992, friends and family gathered again to honour Mum and Dad for 60 years of marriage. By now, advancing years had begun to cause a few problems. Mum had a hip replaced in 1984 and initially became pain free

"like a miracle," but 7 years later she acquired a "cementless" version that has never been as good. Her hearing was also deteriorating and she added a second hearing aid. Dad has only partial sight in 1 eye but has adapted very well; he still reads and watches television, and didn't lose his first tooth until he was 93! Glaucoma and cataract surgery for Mum and congestive heart failure complete the picture of their aging.

They have adapted well to the hand aging has dealt them. However, within the past 6 months macular degeneration has caused Mum to be declared legally blind. It happened rather suddenly and has been most frustrating. Visits from resource people at the Canadian National Institute for the Blind, housework help, grocery shopping by phone, visits by hairdressers, a podiatrist, a mobile blood laboratory and from 3 generations of family have helped them remain in their own condominium. "Talking



Jean and Albert Smith on their wedding day, Oct. 15, 1932



books” have opened new doors for my mother, and the Seniors’ Centre provides a social retreat for my father.

These services, which I have been diligent in locating, are fundamental factors in keeping seniors in their homes for as long as possible. The loss of sight has been the greatest loss, but then there are so many losses at their ages: the loss of a son-in-law at 50 to multiple myeloma, the loss of all their siblings, the loss of many friends and, of course, the loss of some of their independence. However, as Dad says, “God gave us memories that we might have roses in December.” It is these memories of friends and family, of travel and symphonies and plays, of special people and special places, that bring them joy.

Generally, the medical system has served my parents well. Along the way they have had physicians, many of whom they have outlived, who have been interested in them as people, not just as patients, numbers or cases. Their present family physician is a young man who struggles with the challenges of family practice in the ’90s, but his professional manner makes them feel valued.

However, 2 incidents that occurred “in the system” are examples of how an emphasis on science and technology has the potential to diminish human relationships. A couple of years ago my mother was hospitalized and given a new drug that caused her to become disoriented, and she fell out of bed. The incident was handled poorly, and no one wanted to assume ownership of the problem. The physician was told of the incident by the family and showed concern but did not pursue the matter with hospital staff. Where was the head nurse of yesterday, who took responsibility for day-to-day operations of the ward? As a patient, my mother felt that no one heard her story. Was it because she was elderly? Was it because the new hospital system employs managers, who are too far removed from patients to listen to their stories? Are the lines of communication not clear? Do nurses not feel valued in their role,

and thus find it hard to value their patients? Who was my mother’s advocate in this new system?

Another time a nurse reduced my mother to tears by the lack of respect she showed for her as person. In the world of science and technology, reflected in the hospital culture, have we become so scientific that the patient becomes an object? Health professionals say they want to care, but sometimes they do not. When patients become objects that can be manipulated, controlled and analysed in the quest to obtain results, human relationships are diminished. We no longer recognize the common vulnerability we share as human beings.

The tendency for health professionals to call patients by their first name has not always been welcomed by my parents and their friends, because they are from an era in which doing so showed a lack of respect. Depending on the tone of the caregiver, it can be construed as being spoken to as a child.

As my father says, “life has its assets and liabilities, its debits and credits.” Despite their feelings of dependency on others for day-to-day living, their reluctance in accepting help

and the feeling of being on the sidelines while the rest of the world races by faster and faster, they are grateful for each other and their family, and for a condominium that is spacious and contains years of memories. They are also grateful to live in this country and to be able to enjoy the next generation — their 2 great grandchildren.

When Mum apologizes for her increasing dependence on me, I remind her that she looked after her mother until she was 85 and that I hoped I was storing up Brownie points for my own senior years!

My parents’ lives are an example for young people today. Their love for each other, their commitment to their family and their faith in God have provided a firm foundation. They have adapted to their advancing years — Mum is 88 and Dad is 94 — with grace. I hope I will be as fortunate. ?



Jean and Albert Smith marking their 64th wedding anniversary on Oct. 15, 1996