

## Learning to touch

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“**T**hank you, doctor. I haven’t been touched in years.”

I glance up from the computer, already reviewing Emily’s blood results, physical examination complete. I smile. Despite Emily’s list of illnesses, physical evidence of disease is minimal — an irregular heartbeat in keeping with her atrial fibrillation, and some bony wear and tear of her knee and ankle joints, as expected for someone in her eighties. We move on to discuss lifestyle changes and medication. Emily leaves and I continue my day. Just another routine checkup.

But Emily’s words niggle. That night, they reverberate in my head. What did she mean? The word “touch” feels inappropriately intimate. Physical examination is part of my day. I automatically listen to hearts and lungs, palpate abdomens, feel for pedal pulses and examine babies, pregnant women, old men. Each time I examine a patient, I touch them, don’t I? Yet I rarely think about the experience of touch, for myself or for my patient. “Examination,” as a word, feels so much safer; organized, objective, official.

I think back to my first experience touching a “real” patient — not the formaldehyde-preserved, leather-stiff body I dissected in the anatomy laboratory, but a live one, in hospital. After 2 years of practising manoeuvres, cramming anatomy and physiology, I was thrilled to make it to the wards, at last. Nurses bustled, pagers beeped, leftover food staled on patient bed tables. My white coat felt stiff and heavy, stuffed with

textbook, stethoscope, patellar hammer, pen torch, notebook: everything I thought I needed to do a good job. Working in pairs, we were instructed to examine a patient and locate the apex beat. With shiny faces and a sense of trepidation, we approached an older woman, sitting up in her bed. She agreed to be examined. We drew the curtains around the bed. Now what? Gulp. I

crawled under to find that magic beat. I discovered it! Thrusting against my fingertips, boom-boom. I felt my own heart pounding. My first lesson on touch in medicine. Or maybe not. Perhaps my first lesson came well before I ever entered the door of medical school.

Natalie’s place was just inside the door of the long ward. Every week, I climbed the



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asked her to remove her top. Her skin was so white, so thin, I could see the veins on her chest tracing through her breasts. Gently I touched her sternum, surprisingly warm. My fingers spanned her ribs. I’d no idea how to touch her breast, let alone move it. “I’ve got to do this.” Awkwardly, my right hand reached out and lifted her breast away. Soft, slack skin. My fingers

steps to the first floor of her nursing home where I volunteered, my 9-year-old hand trailing on the smooth wood of the banister, pictures of the Virgin Mary and the Sacred Heart staring back at me, watching my every move. When I reached her bedside, Natalie always smiled brightly and beckoned me to join her. First, I’d plump up her pillows, then brush her hair, so soft and

fine. Her hairbrush had delicate embroidery on the back; I'd never seen anything so pretty. I helped rearrange her nightie and smooth the bedclothes. Then I sat and she held my hand. Quietly, Natalie recounted stories of her life, of growing up in post-World War II Europe, of travelling through different countries, of learning new languages and of falling in love. As a small girl, I longed to be like her, to explore the world and be a real-life heroine. I did not think of all she had lost, nor of how I had come to be the one who held her hand at the end. She was the first person I saw die. After she passed, I remember how the

appearance of her hand changed, from that soft, caring place where Natalie and I connected, to something I didn't recognize: its paper-thin skin, its swollen and slightly deformed joints. Maybe I learned that touch is not something we do only to patients, but is done also to us.

Emily returns for her monthly prescription. She looks the same. She sounds the same. But there is something different. Her words have changed me. "What did you mean, the last time you were here, when you said you hadn't been touched in a long time?" She doesn't answer. Her brown eyes hold mine and I feel a huge weight on

my chest, a tight pain. As I stare back into her eyes, I sense loneliness and suffering. I hug her, and the musty smell of old clothes brings me back to myself. We are both touched.

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