

## Seize the day

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**A**uburn hair curls over his forehead; freckles scatter across his cheeks beneath denim-blue eyes. His work boots have left clumps of mud on the floor. As he perches on the stool, his left arm rests over the exam table. He's already peeled off the bandage, revealing a healing laceration across his forearm — clean and pink, a line of bright blue sutures tied in tiny knots.

"How'd it happen?"

"Chainsaw." He shrugs. "Just grazed it. Lost my grip when it hit a branch."

I examine it closely. "Looks like it's healing well."

After assembling the equipment, I begin to remove the sutures, lifting each knot with forceps, sliding the tiny, hooked end of the clippers under the suture to clip it, then pulling it up through the skin. Suddenly the last 3 sutures shift in and out of focus as I remove them; the line of his incision doubles, then blurs. I drop a suture on the floor, then squint to remove the last one. I cleanse the incision with saline, pat it dry with gauze, while the room tips and sways around me and then rights itself. I feel dizzy, then apprehensive as I tape a clean bandage over his forearm. I throw the garbage in the bin and leave the room without a word.

Feeling lightheaded, I place his chart on my desk. *Shouldn't have skipped lunch.*

My next patient is a man who works at the small rural hospital linked to our office building. The overhead lights seem to flicker and get brighter as I sit down. I place the chart, my pen and the prescription pad in front of me at the end of the exam table. I pick them up a few times, rearranging them repetitively, then just sit there, feeling bewildered.

He waits for a moment, then asks, "Are you okay?"

I stare at him, wondering why he's sitting there. Beads of sweat appear on his forehead. "Just give me a minute," I say vaguely, turning my face to the wall.

"Do you think maybe you should go to the emergency room?" he asks. When I don't answer, he repeats, "Do you need to go to the hospital?"

I will not remember rising from my chair, leaving the room, or wandering aimlessly around my office while he watches, alarmed, from the exam room across the hall.

He approaches, takes me gently by the arm and leads me past the receptionist and my waiting room, down the hall, where he uses his swipe card at the emergency department door. I don't remember any of this later when he tells me about it. I have a fragment of memory in the ED, when he whispers to a nurse for a moment and she turns toward me.

"Can you tell me what's wrong?"

I shrug, confused and silent because I don't know why I'm standing in the middle of the ED hallway, as if I've shown up to work in the wrong place on the wrong day.

I try to speak, but only gibberish comes out of my mouth. As I lie down on the stretcher in the exam room, a flashing white strobe light appears at my lower right visual field. I try to tell her with hand gestures, clenching and unclenching my right hand to mimic the flashing light, but I can't find the words. She checks my pulse and blood pressure.

The ED doctor appears, shines a bright light in my eyes and asks me questions. I attempt to answer with garbled speech. He gently takes away my stethoscope, still casually draped around my neck, and hands it to the nurse. As she places it on the counter, the fear of losing it — not being able to get it back — overwhelms me.

Time, dream-like and chaotic, passes in a blur with a jumble of faces and voices, a flurry of activity that I don't understand. A belt clicks shut. White tiles on the ceiling move above me as I'm wheeled through doors and lifted into an ambulance to go to the regional hospital. One clear memory: we're driving, going around a turn in the road, when I reach out my hand as if to brace myself. A voice says, "Don't worry, you won't fall. You're strapped in." A white light flashes for a few seconds and then blackness surrounds me.

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A siren wails. A flannel blanket covers me, tucked near the edges of shiny side rails. The man's pant leg has a reflective strip. He writes on a clipboard. I huddle, searching his face for reassurance. My back hurts. We are moving, turning, stopping. The back door opens by my feet. A sensation of falling, something clicking into place. Bumped down into a cold, dark space, pushed through doors. Voices. Faces ask me questions that I'm unable to answer.

A couple of hours later, the neurologist appears at the end of my bed. "Nothing worrisome on the CT," he says.

"When she first arrived, she didn't know me," my husband tells him. "She was agitated and restless, trying to climb off the stretcher, and then staring at the ceiling. First, she was unable to speak at all and then she repeated herself over and over, muttering mostly gibberish and weird phrases. She's speaking coherently now."

"A seizure," the neurologist says. "Focal onset seizure with impaired awareness — generalizing to tonic-clonic in the ambulance."

I grimace as I try to move into a more comfortable position. "Terrible pain in my back."

“You had a seizure while you were strapped to a stretcher in a moving ambulance,” he says, as if that explains everything.

My mind is swirling and I keep forgetting what he’s saying, not remembering why I’m here in the first place. “My back hurts,” I repeat.

After the neurologist leaves, I touch the cardiac leads on my chest; I glance at the IV in my arm. *How could all of this have happened to me without me remembering it?* I try to make sense of it all, but I’ve already forgotten what he told me.

Back home, I sleep for hours. The following day, my driver’s licence is revoked because of the seizure; I won’t be able to drive myself to work or to the hospital when I’m on call. I fret about patient appointments cancelled on short notice.

My thoughts are slow, mixed up, and foggy.

“You need to take some time off,” my husband says. “You’re not thinking clearly. You’re repeating yourself.”

“You don’t understand, it will only make it harder for me — patients who are cancelled will want to be squeezed in next week. I need to go back to work. I can’t just decide not to look after my patients.”

I return to work a few days later, to find my stethoscope hanging from a hook on the ED office wall when I pass through on the way to my hospital rounds. An ED nurse smiles and says, “Welcome back.”

But the seizures continue, sometimes after weeks or months, each time I’ve become hopeful they’ve been erased by new medications. I have a disturbing sense of being on guard, waiting for a

seizure that lurks there in the background, ready to act out in public like a small child, in full view of my colleagues and patients, exposing my vulnerabilities, my anxiety, and the erosion of my self-confidence.

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This article has been peer reviewed.

This is a true story.

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