

from Mexico to North Carolina eight years ago would be forever changed. As Mr. Gonzalez began to place his hand around the nape of Luis' neck, Luis began to cry. I shuddered as I watched this tacit exchange between father and son,

As we all stood in silence, observing the remarkable strength and composure that Mr. Gonzalez modelled for his son, I was genuinely amazed at the love we saw before us. In our efforts to offer the family time to process the news, we quietly exited the room. I attempted to walk, struck with sadness and disappointment not only for the burden this family would soon have to bear, but also for how emotionally compromised I had become after delivering the diagnosis. As I struggled down the hallway behind Dr. Weech, I heard the door open behind us and a voice tinged with despair utter, "Permiso, un momentico señor?" It was Mr. Gonzalez. In the

moment I took to breathe in, he was already in tears ... weeping, shedding the tears he had not wanted his son to see, the tears that poured out over his ability to secure funding to cover Luis' health care costs, his concern for his wife's state of mind and his fear of losing his first-born to cancer.

In that moment, feeling the raw emotion and despair that was asphyxiating this strong father, I did what I thought was best: I held Mr. Gonzalez and offered him exhortation, which was the best way that I knew to help him as a medical student. And so I sat alongside Dr. Weech, who in his own fatherly and optimistic demeanor took his time to embrace Luis' parents' concerns about their son. In those three hours that I spent with this family I had come to love, I was no longer thinking about the clerkship exam that I had to study for or the patients that I had to track or even the patients' histories that

I was a day late in writing. The only thing present in my mind was the calm of my own humble reflection. It was then that I realized the true niche of the medical student. It was not in the laborious errands performed on the wards or rushing to write progress notes in the early mornings. Quite simply, it was doing my part to help preserve humanism and compassion in hospitals that are often overcrowded with dying patients, overworked interns and tearful families. I suppose it was in that moment that my calling truly made sense.

Mikhail C.S.S. Higgins MD MPH

Radiology resident
Hospital of the University of Pennsylvania
Philadelphia, Pa.

Consent was given for this true story to be told, although the participants names have been changed at their request.

CMAJ 2013. DOI:10.1503/cmaj.091384

POETRY

dying of the light

White curtains split the light into a spray of
Formless foam that, with the tide and ebb of air
From the vents, paints a lazy rhythm
Upon the dimly lit walls, and if you were not careful
You would think you were drowning in its silence

The quiet whirr and click of the machines do not allow
Such dreams to breathe however, so inside that space there is only
A strange sort of activity: there is never anyone
Doing anything there (they always forget), and so perhaps
It is an illusion created by his stillness

No one remembers the last time he moved or spoke or
Saw or any of those other things that would remind you that he once was
Someone who laughed and cried and hurt like us; like him
That memory has sunk into the depths where light has no meaning
And even sound is but a fantasy waiting to fade
But what I do remember is the last time he opened his eyes and how
I looked into them but could not tell if the man inside was
Broken and hanged and stretched upon the rack of his disease
Pining for the mercy of the end, or if instead there was a flying banner and
Beneath it a crusader who raged against the dying of the light

William Fung

Second-year medical student,
McMaster University, Hamilton, Ont.

CMAJ 2013. DOI:10.1503/cmaj.130823



© 2013 Thinkstock