When Heaven Weeps – by Warren Ferguson

With this long summer drought, I’ve loved every day that it rains. Recently, I was driving to the Family Health Center of Worcester on a rainy Tuesday morning with the pitter-patter of rain on my windshield along with the rhythmic beat of the wiper blades. But, I could not feel happy about the rain that morning. I was feeling so sad after attending my colleague Valentina’s wake after her untimely death from an illness at the age of 62. I can share this of course because this information is public. Unfortunately, she had a terrible illness and hopes raised with initial treatment were followed by disappointment for her and her beloved family.

While many of my colleagues from the Family Health Center wept with me, and many were very close to her, my relationship was different as her family physician and as the family physician for some of her family. I don’t provide care for many of my co-workers but it was comfortable with her and the truth is, Valentina was fun. She had a bright smile, positive energy and would always share a great laugh with me and with patients for whom she interpreted. Many such patients knew her well as the Albanian community in Worcester is very tight.

I could not help but think that morning in Worcester, its Albanian community and heaven all wept together, causing today’s rain. Losing her is just so sad. She was buried that Wednesday morning while I saw patients. Unfortunately, the story does not end here.

That same Wednesday morning, less than an hour into my session, I was interrupted by a nurse to inform me that the medical examiner’s office was on the phone and needed to speak with me. The warning shot did not help. A second Albanian woman, in her 50s, for whom I provided care and for whom Valentina had interpreted many times, was found dead by her daughter in bed that morning. By all accounts, it was a natural death, with the medical examiner releasing her body to the funeral home, and leaving her family wondering forever what happened. There were no major risk factors per se but of course, I ruminated that I had missed something as we all do with these unexpected deaths. A review of the record was modestly reassuring but that feeling takes days or weeks to go away. I went to the family home the next day to be with her family, also patients of mine, to grieve together. I attended the wake on Thursday night, comforting as best I could, those who loved her so dearly.

Now a community and heaven wept for two of my patients. The shock waves affected the community as a whole. One of my physician colleagues, when told of the second death, now understood why her Albanian patients were asking for tests for this or that symptom later in the week.
I pray that my shared empathy and sadness provided a modicum of comfort with these two families but know from personal experience that the process of grief is a long one. I pray that I will have the time to reconnect with them periodically in this world that runs too fast to make such actions uncertain.

In the following week, two expected but very untimely deaths followed: a middle-aged man with severe mental illness who died from esophageal cancer at age 60; and a woman who died from a dreadful head and neck cancer that was very aggressive. She was only in her early 60s as well. Every time I lose a patient that I cared for at the Family Health Center, I realize that there is a preponderance of premature deaths, well before the average life expectancy. I never get used to the questions that linger. Have I lost my edge? What could I have done different? The day I stop asking those questions will be the day that I retire from practice. Yet, the answer is almost always the same: that I did nothing wrong and I reflect that the population at the health center has a higher risk of premature death due to the social determinants of health.

To you, my caregiver community, thanks for allowing me to share this. Writing to you always helps with the healing.