



Thursday Memo – March 3, 2016

Seeing the Human – by Ginny VanDuyne

“In the sufferer let me see only the human being.”

~*Moses Maimonides*

She follows the medical assistant, feet nearly grazing each other as she walks, hair askew and young child in tow. Our eyes meet as I’m clacking furiously away at the keys, punching in the descriptors of the last patient’s hard life. Her gaze is clear and piercing. Does she see my nerves laid out in front of her?

Minutes later, I knock and push open the door, breathing in as I meet her glare from atop the exam table. I place my laptop down and reach to shake her hand, which approaches mine tremulously. I plop down in my swivel seat, thankful for the ability to adjust the height as I ask her the loaded question: how has she been since the last visit? Which diatribe will it be today: the “I can’t ever get ahold of you” one or the “your front office people suck” one or the “you’re not managing my symptoms like my previous PCP” one?

I muster my strength, reflecting, summarizing, apologizing where needed and affirming her frustrations. We (I mean mostly she) figure out a plan for her medication adjustments and we make a plan for the next appointment. “Yes, I’ll overbook you,” I groan as I swallow down the toll I know that will cost me, knowing that she will end up with an appointment in a month one way or another.

A really wise person told me I should try balint [weekly support group for family physicians to discuss challenging patients and learners and personal struggles; *editor*]. Good thing I

listened. It was my turn to present and I shared about this patient, baring my not-so-pretty feelings of frustration, confusion and sense of defeat in the face of my difficult and trying interactions with her. I was encouraged to reach back to my training and pull out one of the tools in the good family doctor's black bag, the genogram. How had I let this tool fall by the wayside so quickly?

The day for her next visit arrived and with not a small amount of trepidation, I resolved to take a break from puzzling over her migraines and complex neurological symptoms to focus on what would likely prove to be a very intricate family tree. She walked in, same gait, same glare, same hair. As I plopped down on the stool, I closed my laptop and instead grabbed a piece of paper, rolling closer to her. Now side-by-side, I invited her to tell me about her family. With a chuckle she asked if I knew what I was getting myself into and without missing a beat she launched forward with more openness than I had been privy to in all our previous visits put together.

Her genogram was complex, in surprising and not-so-surprising ways, with sisters who create drama, three different fathers to her children (two of whom know each other to this day, one of whom comes in and out of her life and bed), cousins and uncles who have taken the place of lacking relationships in her next of kin. Finally, at the center of all the swirling lines of relationship was a link between my patient and her mother. As we turned to this piece, she broke down in tears as she explained the similarity of her mothers' migraines to her own. The one time her mother felt relief from her migraines was the day she died suddenly in front of my patient from a ruptured aneurysm in her forties. Here was the key to understanding my patient's love-hate relationship with her own daily pain, both wanting it as reassurance of another day of life, but struggling to function through it.

Now I understand that with every birthday my patient feels herself getting closer to the age her mom died, the feared deadline of an inevitable fate: a pain-free day then leaving this life and her children behind. We are now able to struggle from the same side because I took a place alongside her at first just physically and then emotionally. I had invited her to share the story of relationships that have formed her over her lifetime and she shared as if having been just waiting for this invitation.

She knows I get it now when she calls and berates the front office staff, having reached her breaking point from the migraine pain and finally wanting some relief. With this new trust we have been able to order the dreaded MRI to assess for the even more dreaded aneurysm of her mother. She knows I feel her anxiety as we await the neurosurgeon's prognosis of the aneurysm the MRI actually did uncover. Where would we be if it weren't for the genogram clearing my vision to see the human beyond my frustration and her medically puzzling presentation?

