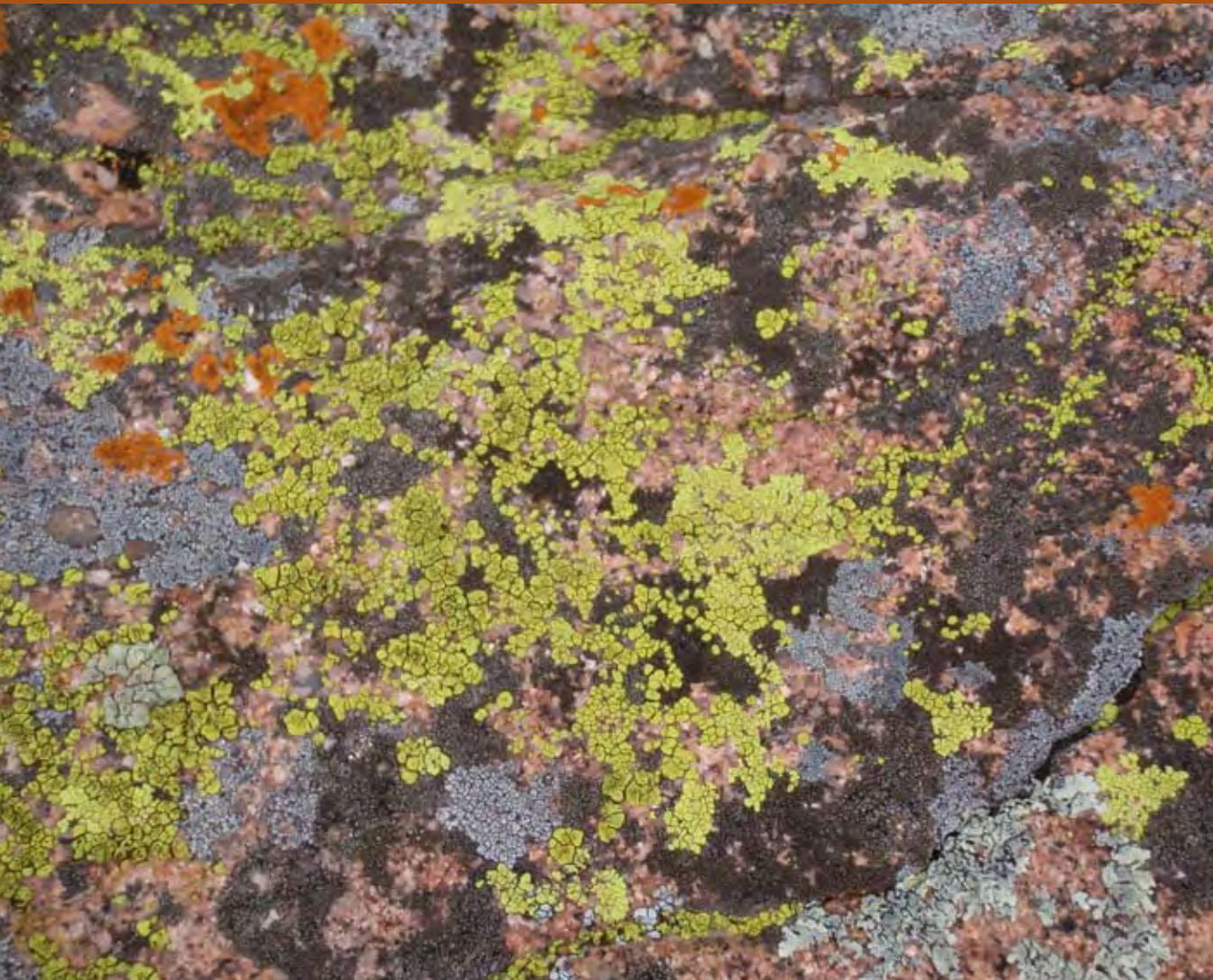


Connective Tissue

art and literature at UT Health Science Center San Antonio



2010 • Volume III



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Connective Tissue

2010 • Volume III

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The works published in this magazine were selected based on their artistic and literary merit and do not reflect the personal views of UT Health Science Center San Antonio, the Center for Medical Humanities & Ethics or the editorial staff.

For more information about Connective Tissue, including past issues and details on how to submit your work, please see our web site at http://www.texashumanities.org/connective_tissue.cfm.

Front Cover:
Clayton Windham
Enchanted Rock Lichens

Back Cover:
Richard De Vera
Mother and Child

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Krista Young
Mwakwila Health Clinic

Haiti and Earthquakes

I was on a medical mission sponsored by the Center for Medical Humanities and Ethics in Haiti 48 hours before the earthquake hit in January 2010. Sixteen years before that I was awakened at 4:31 a.m. by the most violent shaking of my bed imaginable and the crashing of my possessions falling all around me. This was January 1994 the morning of the massive Northridge earthquake. My family lived in Sherman Oaks California only 2 miles from the epicenter of this 6.7 earthquake. Having experienced many small earthquakes while living in California prior to 1994, I was not particularly afraid of these temblors. This was another beast. I awakened next to my wife with tremendous fear and as the bed was shaking I kept repeating “this is the big one, this is the big one.” When the ground stopped violently shaking and rolling and the crashing sounds came to a stop, I was thankful to be alive and not in the ocean.

My wife and I were not physically hurt and immediately I thought of my children. Fortunately, I had a constantly charging flashlight by the side of my bed so I grabbed it and started to see the damage as I began to run for my children. With the flashlight, I encountered my 7-year-old daughter on the other side of the kitchen with the floor covered by broken glass. Living in California, I had my shoes next to my bed and was better prepared for the broken glass than my daughter’s bare feet. I yelled “Rebecca, don’t move” and shined the flashlight on the broken glass. She stopped long enough for me to run and pick her up. Next I ran to my 2-year-old son who was standing in his crib screaming in terror.

Our house was still standing and my family was still alive. We all left our house immediately and joined our neighbors on the sidewalks in front of our homes. There was not a light on in all of Los Angeles. The sky was clear and the stars were beautiful. The constellation Orion and the Milky Way were visible in a way that does not occur in the normal heavily lighted Los Angeles. The beauty of our universe was only a minor consolation to the destruction of the homes and lives around us.

One minute later a large aftershock scared us all once again. When we went back into our home we saw that virtually everything had fallen to the floor including the books, the TVs, the glasses and plates. We cleared the floor in our front room and our close neighbors spent the next hours with us waiting for the sun to rise. The Northridge earthquake caused over \$20 billion of destruction in Los Angeles but fewer than 40 people died that day.

One week ago I returned from a medical mission trip to Haiti. I fell in love with the people and their country. In one week our medical team consisting of medical students and doctors from the University of Texas Health Sciences Center in San Antonio saw more than 700 people desperately needing health care. We were fortunate to be hosted by the wonderful Project Medishare organization. With Project Medishare leading us to small villages we brought medical care to many children and adults with little access to care. As a family doctor working with a team of medical students, we saw many children with malnutrition, malaria, intestinal parasites, and skin infections. Despite all the illness and poverty, the children were beautiful and obviously loved by their parents. Little girls had their hair beautifully arranged in braids with multicolored hair clips and wore pretty dresses. In one day we saw a baby with meningitis, another baby with severe pneumonia, a child with intestinal obstruction and a 12-year-old girl dying of malnutrition. We transported all 4 of these children over bumpy dirt roads to the nearest hospital for more intensive care than we could provide in the field. When we visited their small fragile homes we saw how clean and organized they were. We experienced the dignity and love of rural Haiti.

Our last night in Haiti was spent at the hotel Villa Creole in Port-au-Prince. Forty eight hours after we arrived on US soil, Haiti was devastated by the most massive earthquake to hit it in 200 years. This 7.0 earthquake made our Northridge earthquake seem like a mere roller coaster ride. At first I was shocked by the magnitude of destruction that was being reported through the news and Twitter. Family called me to tell me how thankful they were that I was home and alive. I felt mixed emotions of relief to be safe and sadness that I could not provide emergency health care for the Haitian people. Other members of our team were still in Haiti and we did not know if they were alive. At this moment we know all are alive except one. He is a young college student from Haiti who served as a translator for us and he remains to be accounted for. A young man who took us on a tour of a Children's Hospital is dead. The Haitian doctor who worked alongside us lost his home when it collapsed into rubble in Port-au-Prince. The hotel we stayed in before leaving is now a makeshift hospital being used to care for the people from a nearby collapsed hospital and the wounded survivors.

Earthquakes cause great devastation to people and places. It is even worse when buildings and homes collapse and kill so many people. The hurricanes of last year in Haiti caused great destruction and loss of lives. This earthquake has caused unimaginable damage, injuries and deaths. I am proud of the world community and how it has mobilized with food, water and disaster relief. I count the days before I will be able

to go back and help the people of Haiti.

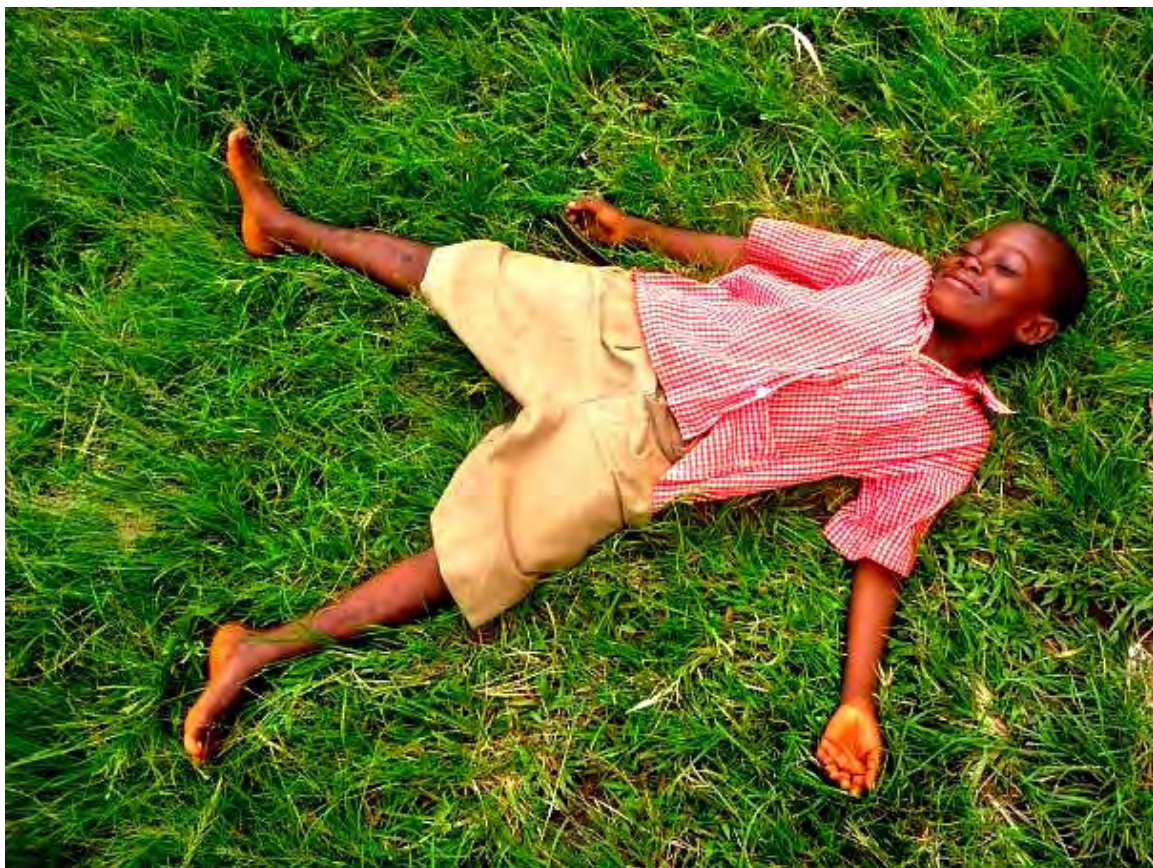
Sixteen years later I can remember the Northridge earthquake as if it were yesterday. Such traumas become emblazoned in your memory. The trauma of this earthquake in Haiti will affect the people and its country for generations. My prayers and thoughts are constantly with the people of Haiti at this time. As the wealthy neighbor of Haiti, our commitment must be firm and ongoing to help them heal physically and psychologically from the horror of this earthquake. If everyone contributes something there is some hope for healing.

Two Haitian proverbs that are appropriate at this time:

Men anpil, chay pa lou (When hands are many, the load is not too heavy).

Tet pa koupe toujou gen lespwa mete chapo (As long as your head has not been cut off, there is hope of putting a hat on it).*

*Proverbs and translations courtesy of Ruth Berggren, MD.



Tiffany Castellano
Happy Kids



Stephanie McClain
Sprinkler

An Ode to my Garden

I walk smiling to my garden
To hear her soft and unspoken voice,
I know my beloved garden speaks to me of peace, life and wonder

My garden is rectangular, full of hypnotizing living greens,
There I have two talking benches, facing at each other
They talk day and night like two great friends.

The best friends talk of unbroken promises of each spring divine
The benches wonder when the blue iris will bloom,
And when will the Texas Bluebonnets will put on
Their blue hats and look like great dames
Walking in the aisles of the grand ballroom

Oh my garden, my garden green,
I sit one more time at my talking benches
While the spring breeze touches my soul
Marking every second of my life

My garden talks to me of infinite tranquility and harmony
My garden is the sanctuary to my soul,
It is the windpipe to my dreams.
There I dreamed and found devotion and longing peace
There my unconsciousness sleeps so softly
While I am still awake

Rene Carlos Renteria

Standby
in memory of Flight 447

This sweet woman
Not like hard candy, my dad used to say
But the reverse--he doesn't know--
Soft on the outside, hard on the inside
I scramble to find that sheet of paper
What time is it?
"You'll be late!"
But when do I leave?
Arguing with people I love
Not seeing their
Bright, shining eyes
"For the last time, are you ready?"

I honk the horn, get lucky
By hammering through insistent yellow lights
Obscured by hot mist
Now rain
Pouring like the Second Coming, my dad would say

Someone kissed too many times
To make his flight but
Somebody wanted home early
And got on
Standby

I have forgotten
What I have forgotten
Straps and elbows akimbo
(You really need to exercise more)
But I make it
Clicking in as they slam shut the door
Sweat starts down like the warm rain
Outside
Pouring into the vast ocean I must cross
Ripples lit by hot flashes

What have I done?

Moving Aster

Aster is 38 and almost 600 pounds. On the pillow her face is colorless and sticky, with two thin braids framing her cheeks and folding into her neck. Her body is massive, puddled across the bed and pressing against the handrails. Her uncovered feet are petite, inflated, and bandaged unevenly at their ends. They are incongruous with the rest of her body, these tiny, soft feet. She thinks that in some way, she is more naked with her feet unwrapped than if the whole of her was laid out in the open. Her feet are her secret parts, the part that is still pretty and perfect. Well, the part that was: Aster is in the hospital because her toes went gangrenous. Her doctors tell her this was to be expected; with the diabetes and the swelling of her calves, the lacework of blood vessels has flattened and decomposed. In her head she can watch her veins, like fragile spaghetti spiderwebs, breaking across the arch of her foot, leaving her toes to rot. For some reason she likes this image, finds a little comfort in tracing out imaginary paths to the dying pieces of herself.

Around Aster there is a half-moon of six medics who arrived in three ambulances. This is what it will take to move her. The medics are watching her quietly, deciding the pushers and the pullers with low voices and conflicting hand signals. They are not sure quite how to go about this. Her eyes are closed. They consider enlisting a nurse or two to help, but then again only so many people can effectively fit around the bed. Aster is aware of them but choosing to feign sleep; there are enough eyes on her spectacle. And then a hand touches her shoulder:

“Ma’am. It’s time to go.”

They load her into the ambulance with a careful, organized effort and slam the rear doors. She is propped up slightly, with oxygen running from a tiny spout into each nostril, but she is still finding it a little hard to pull a slow breath. Across from her is a girl medic, blonde and thin-limbed with long fingers she is pressing into Aster to find a pulse. This girl probably weighs one hundred pounds soaking wet with rocks in her pockets, thinks Aster. The medic is watching her, scrutinizing the slightly labored breathing, the face filmed with sweat. Good God, thinks the medic, this lady weighs as much as five of me. But she is concerned- the patient looks anxious, and there is so much relying on a fist-sized heart. She turns up the oxygen and the air-conditioning, and frowns at Aster’s blood pressure.

“I like your glasses,” says Aster. The medic’s glasses are rimmed by red hexagons. Aster likes red and thinks they are spunky.

The medic looks up from her clipboard and smiles: "Thanks."

"I have a red bag," says Aster, "and a red coat with toggle buttons, which doesn't fit anymore."

The medic nods.

"It will fit me again, I think," Aster continues, "I've already lost half my body weight."

"Really?" The medic notes this on the clipboard. "How's that?"

"My heart gave out, and I died for awhile." Aster is quiet, remembering. There was very little pain, just a hot flush to her face and a tightness behind her ribs, and then a sudden feeling of empty stillness. She woke with her daughter's face above her and vomit in the back of her throat. Dr. Phil was on the T.V. She has not been able to watch the show since.

She stares at the medic's hand on hers. The medic slips her fingers towards the pulsepoint again.

"Anyways, I was in a coma for some time, and that's how I lost the weight."

"Wow," says the medic, who is mentally calculating how much Aster *used to* weigh. It is a staggering amount. She wonders who took care of Aster, specifically who kept feeding her. This is what she has never understood with the obese patients- when they reach the point where they can't sit up in the bed, can't get themselves to the bathroom, *someone* has got to be bringing them all the food they need to stay that immobile. Someone has to be the enabler.

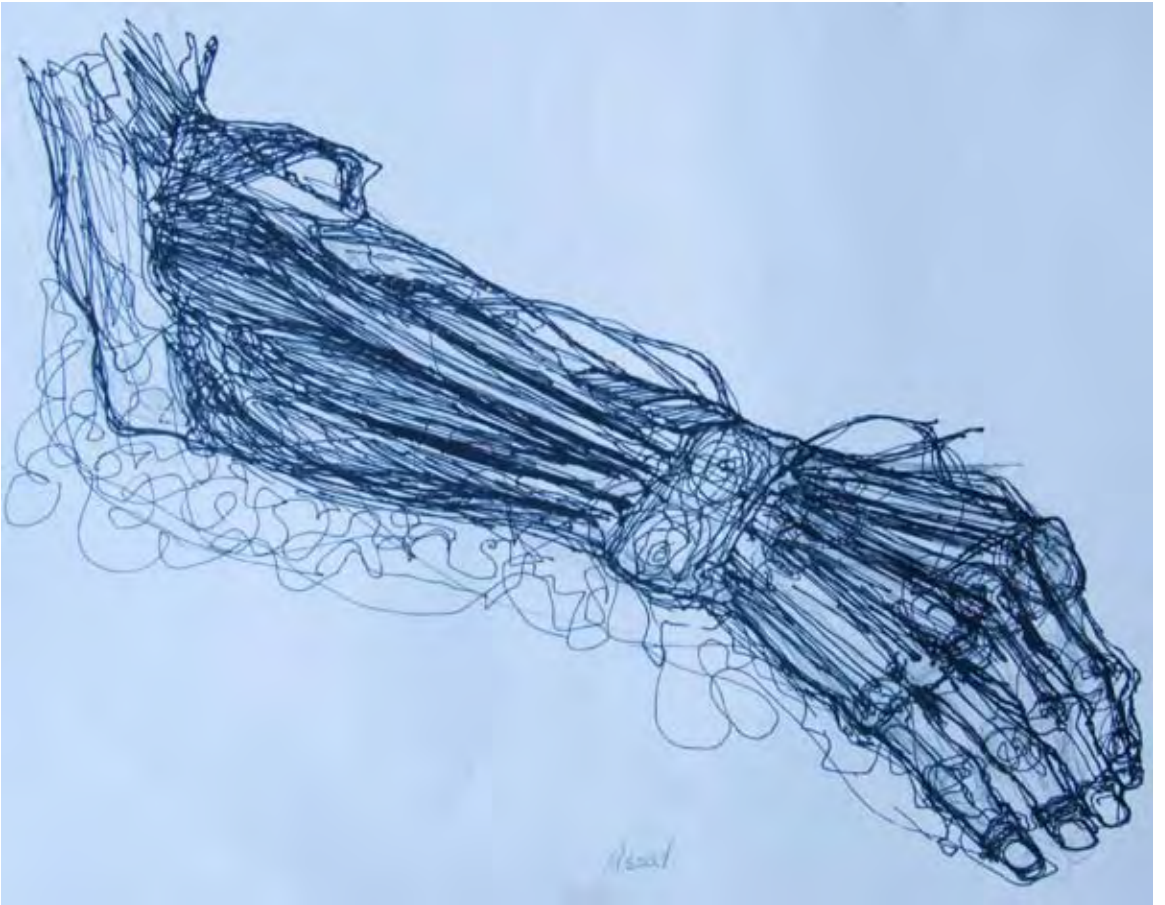
There is one patient her ambulance service picks up regularly who is so big he can't pass through the hallways of his house. The fire department had to cut a panel out of the side, and they literally drag him out on a tarp. The floor of the room behind the removable panel is always piled with paper cartons and pizza boxes stacked around the king-size mattress. The patient is so heavy he cannot get his own hand to his face. His mother feeds him. The medic wonders if the daughter feeds Aster, what kind of warped and desperate love must fuel that kind of relationship. She thinks, not for the first time, that the overfeeders should have to get treatment along with the overeaters. She twists around to glance out the front windshield.

"We're here, ma'am."

The halls are filled with slow-moving elderly people, who tap carefully out of the way of Aster's stretcher as the medics roll her to her room. Again there is the parade of ambulance personnel around the bed. As they pull her over, her severed toes knock against the frame and she makes a high squeaking sound behind her closed lips. The girl medic is finishing the forms and the others file out to sit on the tailgates and smoke before their next calls.

"Feel better, Miss Aster," she says, taking back the clipboard, "I hope you get out of here soon."

Aster would like nothing more, but is not having a hopeful moment. It just took two hours to move her 10 minutes down the road. She is very tired of all of it, and wishing her daughter had left her in that bright, weightless quiet. She stares at her ruined feet, and then at the medic. "You should get yourself some red shoes," she says, and turns her face to the wall.



Assaf Fesseha
Study of Arm

Anatomy

A brain, a heart, a foot, liver, spleen.
I never knew you in life, but now it would seem,

We are closer than many two people could be,
From you my dear teacher, deep knowledge I glean.

I wonder to look at your hands and your heart,
What kind of life did you live on this earth?

Was your way glad? Did you take lots of chances?
Did your hands hold a child and heart hold romances?

You chose to live on, in a way, through my eyes,
Each patient and your form, in me, are now tied.

I've learned so much from you and of you, and yet,
My questions of person and story aren't met.

And thus, your last lesson firm-pressed on my heart:
We are far greater than this summation of our parts.

Labor

At the end of the day Rae lay down for another restless night. However, an additional pain prevents respite yet again. Rae allows herself a glimmer of hope and a little questioning prayer. Was 39 weeks of agony sufficient dues to birth her child and allow entrance to motherhood? There was only one way to find out.

Rae plus one sister and minus one husband (who was serving the U.S. military in the deserts of Iraq) made way to the hospital. Each movement was a grueling battle. Breathe then struggle and the pattern continued. As they reached the Birthing Unit, several competent nurses met the pair. However the capable earnest look about the medical workers only solidified Rae's feeling that something perilous was about to happen.

Rae's anxiety increased as she was ushered into her room. Like many new mothers before her she realized that she was utterly alone. Only one person could push this baby out safely. No nurse or expert medical team, nobody else could feel the pain that continued to rip through her body. If something went wrong, only she would be to blame. If the child didn't live, no other human could feel the utter loss and guilt the way she would. The fate of one innocent baby boy rested upon her young unsure shoulders.

As Rae lay down for the natural birth she had prepared for, she finally unleashed all of the hopes and dreams of motherhood. Rae stared out her window into the night. She saw shining white lights of yearning mixed unevenly with the dark gray fear of the unknown. There was no turning back; the outcome of tonight would change her life. The weight of this overwhelming responsibility was upon her and she knew she must perform. Rae focused her energy and her very essence into delivering her son. Excruciating pain multiplied until her verbal cries were matched by inner screeching.

Finally a bruised and angry-looking little body appeared. Rae thanked God for this blessing above all others. As Rae stared at her infant all surroundings disappeared. Brilliant red and gold lights of joy and harmony flooded Rae's soul as she held her only son. All anxiety fled and time stood still while the perfect bond of mother and child was formed.



Amanda Lipsitt
The Kuna Midwives



Harry Burg
Grand Central Terminal

Barry Bridges

Insomniac's Delight

Insomniac's delight
To lie awake at night
To revel in impossibility
A dream with clarity
Of memories blurred by time
Mind erect body supine.
Reality delivered by light
Residue of the night
Supply a sated smile
Mona Lisa in style.

The Southern Thing to Do

“SOUTHERN DOCTOR UNRAVELS MYSTERY OF RARE HEART DISEASE.”

Beverly Winfield glanced quickly at the front-page headline of the Science section of Tuesday's *New York Times*. She tossed the unread paper aside; the recipient was probably another high-profile physician from Houston or New Orleans. She doubted if any physician from this part of Louisiana had ever received even a brief mention in that newspaper, much less a headline. Maybe she'd check the story out later. But not now. Not this morning. Not after “the summons.”

She dared not be late today. Not that lunch at the local Women's Club was such a big deal for her. She actually preferred a quiche at the quaint little French bistro next to her law office on Main Street. No, what was important about the upcoming lunch was the fact it marked the first time in ten years she had been invited to join her late husband's two aunts for any occasion. Ten years since the untimely death of Walt Winfield III, M.D., on the local tennis court. *Her* Walt. Struck down at 37 by a rare heart disease neither he nor his own physician had even recognized.

Beverly found herself reliving that horrible day. The aunts had come to her in less than an hour after Walt's death. That day she learned how quickly news traveled in small Southern towns.

Miss Harriett Winfield, the elder of the two aunts, was the first to address Beverly. “Don't worry my dear. Charlotte and I will take care of everything for you.” She was already clad in black—black dress, black hose and laced black shoes. Beverly swore her hennaed hair was even blacker than usual.

“Thank you, Miss Harriett, but I can take care of all the arrangements. Walt and I had made plans, just in case you know...”

It was Miss Charlotte's time to speak. “Don't be ridiculous, Beverly. I've already called Bobby Ray Beauchard over at Beauchard's Funeral Parlor. He'll see that the body is picked up immediately from the hospital and taken to his place of business. And the good news is that he happens to still have one of those luxury metal caskets in stock. You know, the satin lined ones. Red satin no less. Just like the one Mabel Jo Favre used for her husband the mayor's funeral. And better yet, there's a special on funerals this week. Can you imagine! The visitation is included at no extra cost! If young Walt had to die early, he couldn't have picked a better time.”

Beverly shuddered. Was she hearing an actual conversation? The combined talents of Tennessee Williams, Evelyn Waugh and William Faulkner could never top this

bizarre dialogue.

She looked at the aunts. “Thank you, but you don’t seem to understand. I’ve already called the Anatomy Department at one of the medical schools in New Orleans. I’ve donated Walt’s body to the school for research. I do plan to have a small memorial service here in a few weeks to celebrate his life. I’m sure that’s what he would want.”

Miss Harriett gasped. Miss Charlotte gasped. Both stared at the widow of less than two hours.

For once Miss Charlotte spoke first. “How dare you! Every member of this family has had a funeral service, a BIG funeral service in this town for generations. And every one of them at Beauchard’s Funeral Parlor. The Winfields and the Beauchards go back for generations. It’s the way we show the town folks how much we loved the dearly departed. But then you wouldn’t know about that. It’s the Southern thing to do.”

Another reminder that Beverly had the bad manners and poor taste to be born north of a certain infamous line.

Despite her numbness, Beverly suddenly remembered Walt chuckling a few years earlier when he read of Billy Bob’s youngest son graduating from Tulane. “We Winfields sent more than one Beauchard through college.” Beverly hadn’t understood the joke then; now she did.

Miss Harriett quickly regained her voice, too quickly. “Not only MUST there be a formal funeral service, but there will be the traditional funeral luncheon at Billy Bob’s reception hall. It’s right next door to the funeral parlor. In case it rains, we can just walk under the covered walkway right into the hall. The funeral service and reception hall come as a package deal you know. And now we have the visitation thrown in.”

Beverly wondered if a special sale at the local Wal-mart ever brought such consumer enthusiasm to the aunts.

Not to be outdone, Miss Charlotte picked up on the plans. “And we worked out the menu on our way over here, my dear. We’ll donate the fried chicken. I’m sure Miss Amelia Hanson will be glad to bring the mashed potatoes and braised okra and Mrs. Beauchard herself can always be counted on for two large doberge cakes. I’ll just have to remind her to use salt butter in the batter. Now we’ll have a problem if that newcomer Mrs. Hancock from Shreveport insists on bringing her green bean casserole. She uses CANNED cream of mushroom soup. Can you imagine? CANNED soup in a casserole?”

Beverly COULD imagine. Just like she could imagine what she’d like to do to

the two elderly aunts suddenly taking over her life. Then she reminded herself how Walt would chastise her whenever she lost patience with the two women. They were all the family he had once his parents died. And despite all their eccentricities they had seen that he went through public school, college and then medical school. With honors.

Beverly knew what she had to do. It wouldn't be easy, but then the sisters never made anything easy. "Miss Harriett, Miss Charlotte, listen to me. There will be NO big funeral service at Beauchard's. There will be NO luncheon at the reception hall and there will be NO plans made behind my back. Walt was my husband, I am the executor of his estate, and I am the one with the legal authority to make these decisions.

"The medical school will have the body picked up within the hour. It will be taken to the Anatomy Department and placed with other cadavers. The students call them their "teachers." Students from the medical, dental and physical therapy schools all learn from dissecting and studying them. Learn in a way they could never learn from a textbook.

I will have a memorial service to celebrate Walt's life in a few weeks. It will be at our new home, the home he designed and loved. Of course you will be invited. This is what Walt would want and it's what I want. If you can't accept that, then I'm sorry."

Miss Charlotte spoke first. "You, young woman, have defied and defiled the traditions of this family. The townspeople here will think we have no regard for our dearly departed nephew. We are shamed, Beverly, and you are shamed. Come, Harriett, we must go."

Ten years ago. In those ten years, Beverly had no conversations, no contacts, and no communications of any type with the two sisters. Every birthday or holiday card she sent was returned unopened.

Despite the sisters' dire prediction her life was shamed, Beverly had managed to build a solid law practice here in town, specializing in elder law.

Yesterday Beverly received the curt note, the summons, in the mail. No cordial greeting, no explanation: "You will meet us at the Women's Club on Tuesday. Lunch is at 12 noon, prompt. Don't be late. Charlotte Clarice Winfield. Harriett Hortense Winfield." At least Beverly finally knew the two sister's middle names.

Beverly arrived at 11: 50, unwilling to risk a rebuke for being the least bit tardy. She saw the sisters already seated in the smaller dining room.

Approaching their table, she nodded to each. "Miss Charlotte. Miss Harriett. You both look well. Thank you for inviting me." She sat down at the empty seat.

Harriett started out first. "You are probably wondering why you received our note. Well, we need to ask you a few questions. First, was that new cardiologist in town, Dr. McGowan, a student at the medical school where you donated Walt's body?"

Beverly wondered where this was leading. "Yes, that was mentioned when he was introduced at the Newcomer's dinner last month."

Charlotte came next. "Was he a freshman in medical school the year Walt died?"

Beverly did some quick mental math. "Yes, he would have started medical school that year. What is this all about, ladies?"

Ignoring the question, Harriett beamed at her sister. "I told you so, Charlotte. I knew what I was talking about at the prayer meeting the other night. You didn't have to go to all this trouble to confirm anything."

Before Beverly could pursue her questions further, Elsie Porche, the presiding leader of the local ladies prayer group, approached the table. "Well, I must say, you Winfield ladies deserve the recognition of this town. You were so far ahead of the times. I marvel at how progressive Charlotte and Harriett are. You must be very proud of these ladies, Beverly. They told us all about their decision regarding their dear nephew's body. You were brave to go along with them, my dear."

Charlotte was quick to answer. "Oh, it was a hard decision. Going against family and town traditions. But we just knew it was the right thing to do. It was what our dear Walter would have wanted."

Beverly's patience was gone. As soon as Elsie was out of hearing range, she turned to the two sisters. "Okay. What gives? You ignore me for ten years, and then you summon me to lunch and ply me with off-the-wall questions. Answer up."

Harriett spoke first. "Obviously you've not heard the news. Dr. McGowan just received an international award for discovering a cure for that rare heart disease Walter had. He said he owed much of his discovery to what he learned from his cadaver "teacher" in his freshman year in medical school. It seems less than one percent of the world's population has the disease. And poor Walter was one of the unlucky ones. Naturally we just put two and two together and happened to mention our decision about Walter's body to the ladies at the prayer meeting."

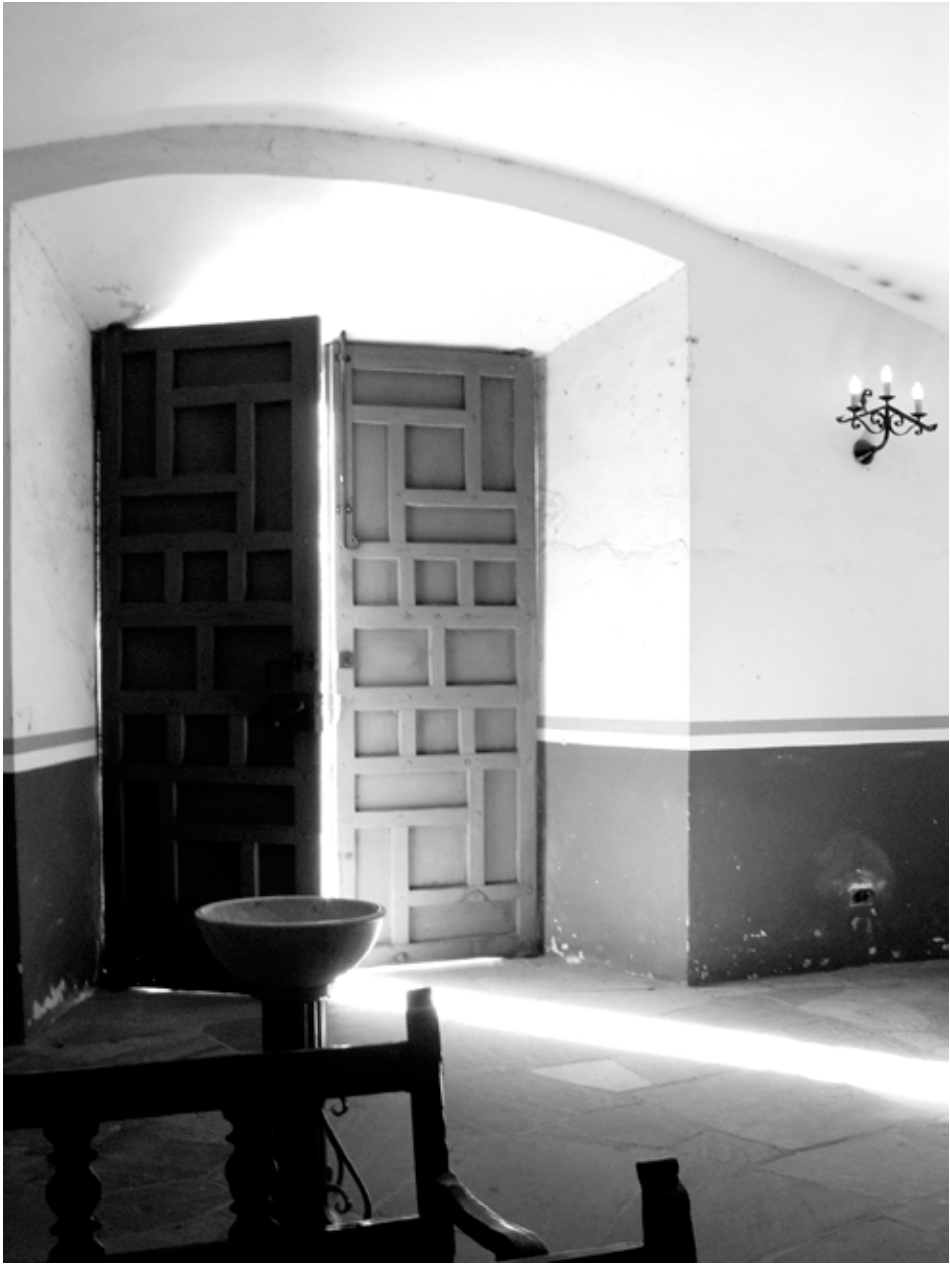
Beverly got the picture. The two sisters, who had ignored her for ten years, were suddenly taking credit for the very act they had abhorred so long ago. She had

two options: walk out and never speak to the two again or turn this into what Walt would have called a “teachable moment.” The decision was easy.

“Ladies, I have a proposition for you. I won’t blow the whistle on your taking credit for something we all know you fought me on. You, in turn, will take this as an opportunity to use your great influence in this town to enlighten others about how they can do the same as the Winfield family. You’ll tell them how to participate in an anatomical gift program and thereby be an important contributor to medical research. Take it or leave it. I would recommend the latter approach. Do you agree?”

Slowly the two elderly aunts nodded.

Beverly smiled. “I knew we’d all agree. By the way, ladies, it’s the Southern thing to do.”



Chris Gelabert
Mission Door



Amanda Dominguez
Childhood Sweethearts

Quilts of Humanity

Brightly colored pieces of silver and gold
Some freshly woven, some very old,

Tattered and torn, with no certain shape
A jumble of size, none seems to relate.

There isn't a purpose, what use is this mess?
"Out in the trash it belongs," I confess.

But one with an eye that's much keener than mine,
Says, "Wait just a minute, these scraps are just fine."

When lovingly sewn and fitted with care
These scraps work together to cover the bare.

Like rag-tag children alone on the street
Starving and dying accepting defeat,

The old and the lonely, their usefulness gone,
Weary and wandering on this earth too long.

"Let's forget these unneeded, they don't have a place,
They can't be of value to our human race."

How wasteful we are with our blinded sight,
Afraid to create, we can't see the light.

So quick to discard, to turn a cold eye
Not to see, not to care, to casually walk by.

But One who knows better, confronts our tender heart,
And guides us so gently to make a new start,

We must fit together each person, each life
With stitches of love to terminate strife.

And now when we step back to view this creation,
We see what was promised by His revelation.

Like scraps of a quilt all ordered in place,
Each life is of worth to our human race.



Tiffany Castellano
Elmina

Rebecca Wright

Quiet George

For Hannelore

George stares at the row of red socks
above the hearth; a chorus of children
sings Silent Night and other tunes
George is sitting in his wheelchair
with bells and candles all around.

The visitors: the adult children with their
kids, and friends have filled the tables
in the crowded hall. George sits with a family
he is quiet but well dressed
he feels his tight black shoes, red tie.

He doesn't remember his wife, his
high school sweetheart, their honeymoon
in Cancun, the first son who never returned
from Vietnam, his daughter who now lives
in Japan, and even the recent funeral.

George is wheeled into his quiet room
the tree outside is all bright; he ponders
where before did he see the blinking lights
where did he smell the roasted chestnuts?
Now in his dimly lit room all is calm.



George Gold
Study after Escher



Richard Rigby
Fan Tail Falls, New Zealand

Christopher J. Wisely

The Voice

Like the brightest star
In the darkened sky
To a sailor lost
You caught my eye

Like the song of a bird
So uplifting and clear
On a bright sunny morning
You awakened my ear

The sun set, day turned to dark
On my world of canvas without art
And your voice rang out
Gave me hope, touched my heart

Yours is a voice of beauty
That sings through the rest
A voice so charming, inspiring
So pleasant from your breast

I was lost and afraid
Left alone to die
When your sweet voice touched me
All senses returned to life

It is to you I owe my life
Saving me from despair
Sheltering me from the storm
Providing protection and care

When I needed it most
You reached out your hand
You opened your arms
Paused the hourglass' sand

My spirits were raised
As you brought me near
Love, peace, and hope
In your voice so dear



Dan Clark
Untitled

Haiti

I didn't plan to break down that day.

It was our third day in Haiti's central plateau, and I was beginning to adjust to the organized chaos that inherently characterizes mobile clinics like ours. The preoccupation with my own competency that had plagued the day before was being replaced by a desire to absorb and an attempt to understand Haiti's culture, beauty and struggles. More than anything, however, I was beginning to feel like a doctor. After nearly two years of working with standardized patients in hypothetical settings as a first and second year medical student, addressing our Haitian patients' real concerns and offering real solutions was exhilarating. From TB and STDs to worms and heartburn, we were making diagnoses and writing prescriptions. We were equipped. We were ready. We were doctors.

Perhaps it is this confidence that can be so dangerous for medical missionaries. Perhaps God could see how the mentality I was developing that day – a mentality of being capable and competent to write prescriptions and cure disease – could ultimately threaten my ability to provide compassionate, Haitian-oriented care. And that heroic, action-oriented persona was exactly what God was preparing to destroy that day. Like I said, I hadn't planned to break down, but that is exactly what needed to happen.

She came in with a severely swollen left hand. Several abscesses had become infected, leading to painful cellulitis. As materials to perform a rudimentary surgery in order to incise and drain her hand were collected, I sat with Dr. Berggren to take her history. I listened to the conversation in Kreyol, Dr. Berggren pausing occasionally to translate for me. The woman swayed gently, back and forth, humming. At times, her gaze would shift, as if she were looking for something in the distance. But the humming was constant. My mind was already at work explaining her behavior. Perhaps a fever caused by the infection had also led to delirium. I asked Dr. Berggren if the infection in her hand could have caused a mental status change. "No", she replied. "She's doing this because she's in pain."

I broke down.

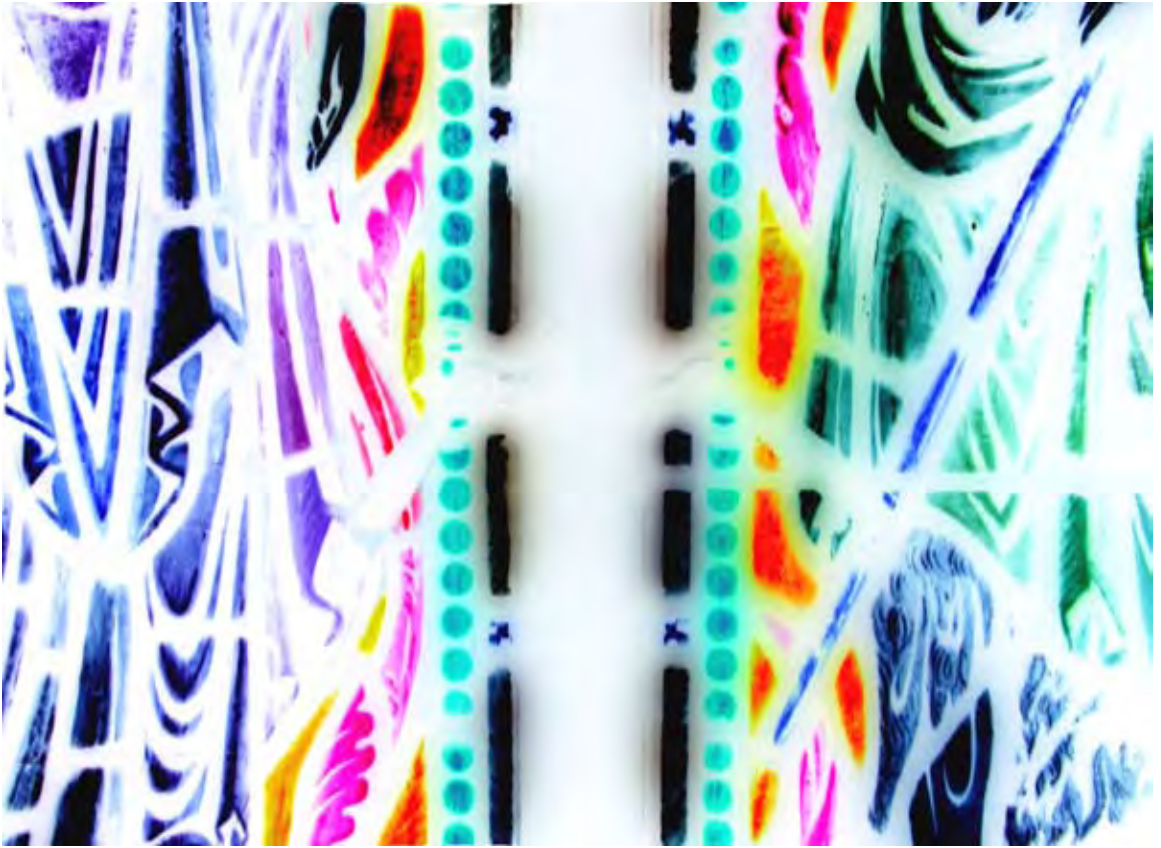
I'm not sure why then, specifically, but I suspect it was because I had acknowledged, for a fleeting moment, that her humming might have been a mechanism of distraction. I had just as quickly dismissed the thought, however, focusing instead on what I could do as a doctor to cure her infection and count her as another case successfully treated. I wanted to justify her actions with a logical, medical diagnosis, instead of owning the fact that for this woman, her sole option for enduring pain was through song. I wanted to believe that by treating this woman's infection we might also be relieving her of the pain caused by poverty and injustice.

As we incised her hand, her humming turned to song. As the pain of the procedure increased, so did the volume and passion in her voice. And as her song echoed throughout the church that housed the clinic, the limitations that we faced as doctors overwhelmed me. Yes, we could heal her infection, but healing her infection without addressing the circumstances that have allowed her to exist and tolerate pain the way she does is like the Haitian health worker's description of giving people medicine without food in Tracy Kidder's *Mountains Beyond Mountains*, like "washing your hands and drying them in the dirt."

I can still hear the woman singing. Her voice humbly reminds me that I must never think of myself more highly than I ought as a doctor. It reminds me that cleaning a wound and healing an infection are but small steps in the journey to improve healthcare in Haiti. No, I hadn't planned to break down that day, but I believe it happened just in time.



Krista Young
Off the Rift



David Albers
Stained Glass Negative

Fire, Fire, Everywhere

I shook my head with disdain, and my heart ached as I held the thick legal-size parcel, a citation for a medical malpractice law suit, in my lap. I sat in front of the fireplace of my two-bedroom apartment and opened the envelope and glanced at the thick stack of legal papers. There were over eighty pages of double-spaced typed script; and the list of defendants in the case was a “Who’s Who” of the New Jersey College of Medicine and Martland City Hospital’s officials. The citation was issued on behalf of a burned patient, William, against anybody who had any contact whatsoever with him during his six months of hospitalization. All together, forty-nine people were named as defendants: three departmental Chairmen, twelve faculty members, nine residents, the director of the hospital and several employees, a nurse supervisor and me. My name, number forty-nine, was at the bottom of the list.

I felt the weight of the package and despised it. The cold wind was pattering the window; and the fire in the fireplace was beginning to wane and begging for more fuel. My eyes stopped at the last word of the last line of the package, William. The package was cold and heavy and unpleasant and dangerous as it was contaminated with lethal venom. I intuitively decided to make good use of the voluminous material.

Deliberately and with a bitter sarcasm I began to dismember the package: delicately and one page at a time, I dropped the entire citation into the flames. Like floating leaves of fall, lost kites on a deserted playground, the wilted pages would glide in the hot air above the fire change color from white to yellow and bright gold and then shrink and come to rest on top of the burning wood. With my eyes gazing at the burning law suit, I would lift the goblet and take a sip of the warm wine.

By the time I dropped the last page in the fireplace, I felt pleasant heat in my chest, my initial anger had subsided and an ephemeral sense of relief spread through my tired muscles. I stared into the vanishing flames and the image of William, the burn patient whose ordeal was the crux of the law suit, emerged. I recalled that infamous late night when I was on call in the hospital ward, trying to relax by reading medical journal articles, when a sudden call from the emergency room made me hurry down; I vividly recalled William’s half-burnt body lying in a pool of slimy ooze on a stretcher in the corner of the emergency room moaning.

Earlier that night, there had been an earth-shaking explosion at Newark Chemical Company where William was working the night shift and where he and several other workers had been hit by flying debris and flaming liquid and gas. All together five of them had been pulled from the inferno, but William had the worst injuries by far.

Three ambulances had brought the victims to the emergency room of the main hospital of New Jersey College of Medicine. William was in the first one and unconscious, near death. He had no skin on his cheeks and forehead, and no eyelashes. He was in a state of hypovolemic shock.

As a rotating intern in the division of plastic surgery and on duty that night, I was assigned to admit William to the ICU, then to call the plastic surgeon on call and request his involvement in the case. Two general surgery interns and two medical students took the four other patients, leaving me in sole responsibility to care for William. An RN at my side, I began cleansing the wounds. The fire had vaporized his clothes, burned his hair and grilled his chest. Almost seventy percent of his body surface including face, neck, head, chest, abdomen, hands, and the front of his thighs had incurred first, second or third degree burns. But the worst damage was on his face, neck, and chest. William's face had lost most of its skin and was covered with puffy layer of a frothy red slime. His lips were bleeding, eyebrows were gone, and his swollen eye-lids were like pieces of sausage that totally concealed his eyes.

The fire was dying. What was left of the citation package and burnt woods were embers of the dying fire. The document I read and disposed of stated, "The abovementioned defendants failed to deliver the necessary care to safeguard the well-being of my client and left him with numerous deformities as a result of which he became totally disabled, disfigured, and deeply depressed and miserable," It put the responsibility of all of William's misfortunes squarely on the shoulders of those forty-nine medical and hospital administrative people. And I was at the bottom of the list, the intern who ". . . failed to attend to his medical care promptly, efficiently, and accurately."

I liked William; and I became accustomed to his slimy face and stench odor. For thirty days until the very last day of my plastic surgery rotation, it was my daily routine to start my morning very early with a visit to William; to change his bloody dressing, and prepare him for his trips to the operating room for debridement of neck, chest, and face wounds, and for the skin transplants. The ordeal of cleansing his wounds, caring for his face, separating his eye-lids, and opening his mouth would fill half of my early morning hours. Unfortunately despite all available medical efforts, he developed infection in the chest and thighs and developed high fever. By the next morning, half of his body surface was covered by yellow thin pus that required extensive cleansing and debridement. He was a large and a strong fellow who resisted death, responded to antibiotics, and eventually survived the infection but his body bore many scars.

On the ninth day of admission he was able to open his eyes. I was the first person who appeared in his new world, and the first person who passed a straw between his wounded lips into his mouth and fed him milk and apple juice. I was the first person who answered his first queries: "Where am I?" and "What happened to me in the factory?"

I slowly began to communicate with William and actually began to like him. He was thirty-eight years old and had a mother and a sister. He had graduated from high school, but had to drop out of Newark Community College because of his diabetic mother and mentally-ill sister. He began to murmur words and one day asked me to read him highlights from the newspaper, and a few days later he asked for The Newark Ledger's account of the explosion at the factory. His mother who had kept the paper brought it to me. As I was reading the details of the accident, streaks of tears flowed from his puffy eyes. When I bade farewell to him at the end of my rotation, he struggled to speak and said a few heartfelt words like "Thanks for saving my life," and "I'll miss you, Cyrus." Two months later, I started my internship rotation to straight obstetrics and gynecology, but I would still go and visit William occasionally, until one day when I found his bed empty.

Several years later during my fellowship at the University of Texas Health Science Center, I had totally forgotten about William's case. I was now busy in a new specialty of medicine caring for female patients with gynecology cancers unaware that he and his fiery accident would not go away from my life. During my fourth month at the University Hospital in Texas I was returning from the operating room to my office in the department, when I received a surprise visit by the chief of the gynecology division, Dr. Paul Weinberg. He sat in the chair and said, "Why aren't you responding to the registered mail from New Jersey? The lawyer retained by New Jersey Medical School has called me and asked if you would kindly respond to his correspondence." Out of the blue I remembered William's face, the face of a man at death's door, and the numerous yellow packages that I had received in the last four months, and the fire, the flames and the bitter sips of warm wine. I tried unsuccessfully to stop sudden tears. "I liked that patient. I'm certain he liked me too," I said, "We really became buddies." He nodded and patted my shoulders and left my office.

The fire that had begun in the factory and engulfed and burnt William's body was spreading. A trial lawyer looking for a case to earn a living had visited the victims' relatives and had become their legal representative to initiate a law suit. He felt William's damaged face and contracted body represented the most persuasive subject for his case. So he filed a law suit and embarked upon legal procedures which have lasted several years. I was in Texas, five years after the date of explosion, when I received my share of

the citation.

I took the fourth parcel to my apartment and late at night when the rest of my family had retired and the living room was calm and quiet, I poured wine in a glass, feeling like someone in a Gothic novel, turned on the fireplace and opened the parcel. This time I didn't even peruse the pages; but I simply ripped the package apart and delivered page after page as fuel to the needy flames of the young fire. I did the same for the fifth and the sixth parcel. And then I received nothing more, from either William's lawyer or the medical school's legal team.

It was near the end of my fellowship that I realized through a comment from Dr. Weinberg why there was an absence of further communications about William's case, and why I was not getting any more yellow parcels from New Jersey. "They settled the case and the medical school's liability insurance paid William one million dollars."

"Are you sure, Paul?" I asked.

"The dean of the medical school told me. They had to drop your name from the law suit in order to settle and close the case. By then they had received the signatures of all other defendants."

Dr. Weinberg smiled and I smiled, too, but soon we both became quiet. "There must be a better way to help these victims," I said.

"Well, you are off the hook." He said

I went home that night and looked at my cold, black, and gloomy fireplace. I heard my wife's steps, "I got you some firewood," she said. "It is in the garage." She brought a bottle of Pinot Grigio, two glasses and a tray of cheese. I went out to carry in the wood for the fire.



Bryan Wilson
Prayers in the Wind

J. J.

Blind Woman in Blue

She is
lovely
in a suit the color of
smooth sky
wind-walked
Eyes in
and thin feet feeling
the sidewalk
Red-tipped wand
keeping cadence
she is always
Watching
with fingers like this
and capable hips

She has a lover
he wonders if she can love
in color
Papers her room
with things he cannot say



Richard Rigby
Lake Mapourika, New Zealand

Adam T.

Parting Clouds

The fog of youth hangs low on my horizon
A foreboding presence she can't see
Siren's beckon still whispers on the breeze
Why do they still call to me?

Burned pictures, a breadcrumb trail
Paths I so long to forget
Trees still echo love's suicide oaths
To those feigning Juliets

Love is, she reminds, her only gravity
No matter what happened in times past
Yet what happened then is what happens now
The dye has already been cast

A love-leader is what I require
Someone to shatter the mold
To command the ranks, to light passion's fire
To placate my fears of the cold

At moments she appears my Pericles
Fallen to gift what I lack
But Mephisto still tempts my hesitant heart
To instead make a Faustian pact

Her first mountain climb she sees only adventure
But this is no postcard resort
She wants to climb quickly, I stick to my ropes
For now my fears too she must court



Melissa Vanover
Fata Morgana

Editors' Section

by Stefani Hawbaker and Catherine Reppa

Stefani Hawbaker

Holding Back

I see them and it eats me up inside.

His wrinkled aged skin brushes her weathered cheek.

She smiles.

She strains as she tightens his wheelchair in place, only to await the troubling words of the doctor.

Her hand in his. Little does he know, she is more nervous than he is.

What will she do without him?

He cannot be dying, she thinks to herself.

Her resilience holds back the tears.

Her patience holds back the tears.

Her character holds back the tears.

She knows though. She knows.

He does not understand her pain.

He can only brush her cheek and wipe the cold tears from under her eyes.

Then, he walks in.

The one man who gives limit to their days.

The doctor gives news that the cancer has spread.

The original three years left he was once given has diminished to three weeks.

After the doctor's thorough explanation of the diagnosis, no words are left to be said.

With her hand grasped in his, her lips softly kiss his.

Her love holds back the tears.



Catherine Reppa
Playground

Interview with Poet and Physician, Fady Joudah, MD

Stefani Hawbaker: Dr. Joudah, thank you for your time. I think many of our readers are curious as to what inspired you to go into the medical field?

Dr. Fady Joudah: I don't know, exactly. But I suppose a sense of naivete and hope and idealism are a good thing to have at certain points in one's life, and I don't mean at an "earlier" stage *per se*, but as scattered moments. Although this is the kind of answer that will get many doctors to ask, "Where is the narrative?" My parents and most of my family grew up as refugees. Perhaps their stories and anxieties crept into me at a young age.

Hawbaker: I'm sure you heard very interesting stories from a young age. I can only imagine. When did you first begin writing?

Joudah: I started memorizing poems at age 5 or so. Writing perhaps began at 10.

Hawbaker: Dr. Joudah, is there any one interesting patient story that has made an impression on you? Any one patient that continues to impact your career to this day?

Joudah: There is no *one* story. One soon finds out that the well is eternal. The answer to your question is impossible. I can choose a narrative to please or appease the question. Somewhere within the question lies the presumption that learning stops after a certain point, whereas in fact it never does, patients continue to inform and impact the rest of my life and practice. But I think your question, *per se*, is interesting, when looked at through the reflexive glass, so to speak.

Hawbaker: Through your many stories, how would you advise future doctors and medical professionals?

Joudah: Do not treat your patients like numbers and statistics. While the "mathematics of knowledge" seem inescapable and essential, one must resist their absolutism and tyranny if one is to maintain a significant humane impact that fulfills the doctor's calling.

Hawbaker: What do you think is the most prominent problem in modern medicine?

Joudah: It relates directly to what I said about. Everything seems to drift toward numbers, measures, and outcomes. People become partitioned into organs and not whole human

beings. Doctors become complicit with “the real world,” resigned to it, and the patient becomes the object of the doctor’s endless excuses.

Hawbaker: So then, in your experience, what is the most significant trait that makes a doctor a “good” doctor, in your opinion?

Joudah: A combination of discerning scientific knowledge and humble compassionate recognition of our humanity and its limitations, its paradoxes and difficulties.

Hawbaker: How do you encourage development of writing skills among individuals pursuing other careers outside of writing?

Joudah: For those who love writing, they already know the answer: they cannot stop writing or reading. Perhaps your question means the rigors of the practice of medicine, its time constraints. On the other hand, being a physician often provides one with what Virginia Woolf called “A Room of One’s Own,” the wherewithal for independence and ability to carve one’s own space for writing, if one wills it so.

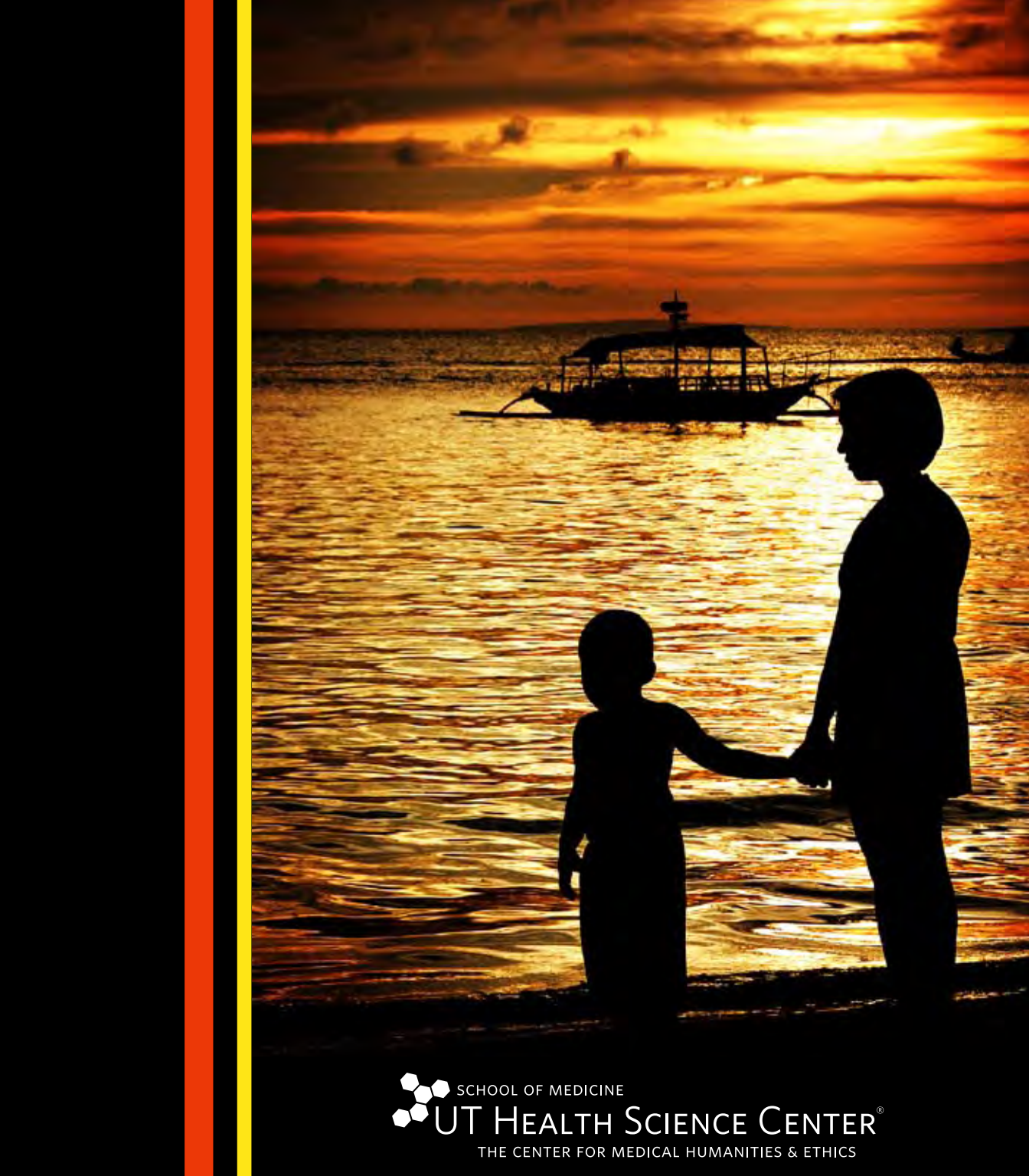
Hawbaker: How do you balance a writing and medical career? What advice do you give to one interested in the same?

Joudah: As I said above, writing becomes an inescapable reality, a Siamese existence.

Hawbaker: On a more ethical note, considering the depth and trust of a doctor-patient relationship, what is lacking in this relationship in modern culture?

Joudah: The realization that doctors hold power over their patients and practice it everyday, occasionally abusing it. It is a very complex and difficult dynamic, but it cannot be made better without simply recognizing it first, without the usual litany of apologetics that go along with it, where we as physicians are explicitly or implicitly trained to classify the patients according to some unspoken hierarchy of suffering, in order to lessen to ourselves the demands of our profession’s calling.

The Palestinian-American Dr. Fady Joudah is a published poet, brilliant medical humanist, and active supporter and participant in Doctors Without Borders. He holds an MFA in poetry from Warren Wilson College and currently practices Internal Medicine in Houston, TX.



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