

Fly away home

By April Hudson

My view gives me a glimpse of the real world—a world beyond IV lines and liver function tests. The Blue Lady, a nine-foot-tall sculpture, overlooks the cement sidewalk that runs through the middle of my view and the numerous trails that lead off from the sidewalk. The trails disappear into a groomed forest of sugar maples, pine, spruce, cedar, birch, tamarack, and one lone, very tall elm. From my room at Dartmouth-Hitchcock Medical Center, I watch the action unfold on this canvas.

My journey here began with two days of intolerable back pain after I tried to lift a bag of books. The first stage of the trip was a short ambulance ride from my home in Island Pond, Vt., to North Country Hospital in Newport, Vt. When the ambulance arrived, I was almost blacking out from the pain but the EMT headed for my 90-year-old mother—until my husband, Waid, said, “That’s the wrong one.”

Tests at North Country Hospital revealed extremely elevated enzyme levels in my liver. Suddenly my back pain became secondary. I was heavily sedated, loaded into an ambulance again, and rushed to Dartmouth-Hitchcock in the middle of a cool summer night.

Best view: When I wake up in this air-cushioned bed on DHMC’s gastroenterology unit, I can hardly remember the trip. But I’m aware right away that my third-floor room must have one of the hospital’s best views, through an eight-foot-wide expanse of plate glass. I gaze out on the forest over which the Blue Lady stands guard. A young couple spreads a blanket on a manicured strip of grass. I watch them share their lunch, feeling a little like a Peeping Tom. I wonder how many other patients in this wing are Peeping Toms.

An elderly couple sits at a nearby picnic table. They are holding hands and looking at each other as if they’re recommitting themselves to their reality. I wonder if they have a loved one in the confines of this great hospital.

Now my eyes are drawn to two six- or seven-year-old boys racing along the sidewalk. I can’t hear them, but they appear to be either laughing or yelling at each other. Ah, a child’s reality. They disappear from my view and then suddenly reappear, racing back toward their parents, who have just come into sight. The parents look worried. Who are they visiting? A grandparent? A friend? Another child?

This is a busy sidewalk. People wearing scrubs of all shades—green, aqua, pink, lavender—stroll or stride past. Doctors? Nurses? Aides? They’re too far away for me to see their nametags, so I can’t tell. I wonder who they are, where they live, what they do. What their reality is. Some pause to eat their lunch. One young man chomps away at a sandwich while scurrying to some unknown destination.

The Point of View essay provides personal insight or opinion on some issue in medicine or science. Hudson lives in Island Pond, Vt., about 10 miles from the Canadian border. She extends thanks for her care to North Country Hospital as well as to DHMC.



**“Look,” my nurse says, tapping on the window, “a ladybug.”
The ladybug flutters its wings and floats away on the breeze.**

A lawn tractor comes into view, using the sidewalk as a road. I can’t hear even a hint of its rumble through my sealed window. It’s like watching a silent movie. I can see the wind ruffling the leaves on the trees. I can see the brilliant sun. But I can only guess at the temperature, just as I can only guess at what is happening inside my body.

A nurse arrives to take my vital signs. “Look,” she says, tapping on the window, “a ladybug.” The ladybug flutters its wings and floats away on the light breeze. “They’re good luck, you know,” says the nurse.

“Have you heard anything yet?” I ask her.

“Yes,” she smiles. “We just got word that you’re going for the procedure at 2:00.”

Questions: Thank God, I think to myself. I’ll be glad to get this behind me. Questions have arisen about cancer, but they won’t know anything until they can take a look. Using a scope containing a camera, they’ll go in through my mouth and down through my stomach. Tiny instruments on the scope can take tissue samples or even remove a gallstone if one has blocked a bile duct.

I try to stay positive, but I remember that my Aunt Betty died of pancreatic cancer. I glance out my window again and see, coming out of the forest on one of the narrow trails, a young woman and a little boy—probably four or five years old. He pulls away from her grasp and runs toward a huge, rectangular boulder—about four feet tall and eight feet long. His hands reach for its top. Effortlessly, the young woman scoops him up under his arms and whisks him to the top of the boulder. I watch as the child stands up and dances around on its flat surface, beating his chest as if he’s chanting “King of the Rock.” Both he and the young woman appear to be enjoying their reality. I wonder what has brought the two of them here.

After my procedure—a technique called ERCP (endoscopic retrograde cholangiopancreatography)—I learn about my own reality. My liver is extremely enlarged and my pancreas is agitated. I am given a diagnosis of biliary obstruction secondary to papillary stenosis. All this time I thought I was just tired from taking care of my mother. But it wasn’t her at all. It was me. The doctor says bile and blood “gushed” from my liver. He puts in one stent to keep my bile duct open and another into my pancreas. But there is no cancer.

Home: I was at Dartmouth-Hitchcock for four days. When I left for home, I was at first unsure if my own world was still a reality. But the day after my return, I was able to go swimming.

Such is life. We each are on a different trail. Luckily, while I lay in my hospital bed worrying, I had that wonderful window to ease my mind. When I arrived at DHMC, I was like the Blue Lady, unable to move. But I became the ladybug and was able to fly away home.

Thank you, Dartmouth-Hitchcock. ■