JPSIM

Reflection Story

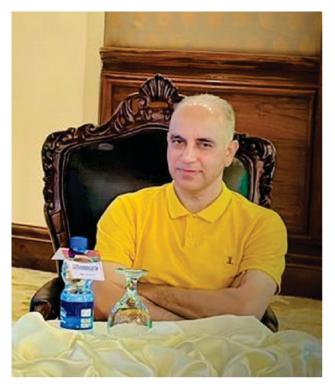
The Difference between Winning and Losing is Most Often not Quitting

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In mid 80s, a large majority of students in Pakistan dreamed to see themselves in white coats. Inspired by idealism, like other adolescents I had the ambition to become a doctor after passing my Fsc examination. The amalgamation of dreams and ambitions and the belief that healing is a divine virtue, have made career in medicine as the most sought-after profession in Pakistan over the last several decades. I was lucky to get admission in the King Edward Medical College. I am proud to have teachers and mentors like Prof. Javed Akram, Prof Aziz ur Rehman and Prof. Faisal Masood in that institution. Now I am a teacher and a professor of medicine, reflecting on some events and experiences of the professional life, being overwhelmed with mixed emotions.

As a doctor, we all have the privilege of protecting, preserving, rescuing and saving life. We had a female patient, young lady mother of three daughters, admitted in high dependency unit with shock. She had profuse bleeding, literally from any possible site. She had epistaxis, mucosal bleeding from mouth, P/V and per rectal bleeding, vomiting and coughing up blood. Soon she was in deep coma, being pulseless and with unrecordable Blood Pressure. She was cold clammy, unresponsive and chest was full of crepitations. She was a diagnosed case of ITP and stopped her medications while there was persistent thrombocytopenia without any bleeding. Her investigations revealed acute Dengue fever and nil platelet count on Automated cell counter. She was diagnosed to be suffering from capillary leakage syndrome and hemodynamic shoch due to dengue fever and severe thrombocytopenia complicated by her comorbid, underlying ITP. I was 3 sleepless nights, while medical team stood by that patient, she received 36 transfusions of different blood components, ionotropic support and supportive care. In the mean while she developed ascites and pleural effusions due to capillary leakage. She had three daughter the eldest being 8 years old. I was standing with her husband in the corridor in front of HDU, while he was holding his 4 years old daughter in his hands. It was never easy to communicate her condition, what we



are up against and what are we fighting for. "We are trying our best but we may lose her" was not an easy sentence to say. After 3 days, there was gradual improvement, as bleeding stopped and her hemodynamic conditions stabilized while still on ionotropic support. Now, conscious and in next 2 days she was sitting and communicating as well as taking liquid diet. Her condition further improved and didn't need ionotropic support. After one week her husband was sitting beside the bed as she was her one-year-old daughter in her lap. This was the moment when our medical team was immersed in the emotions of satisfaction, with a touch of accomplishment for their efforts of saving her life.

As physicians, like these are the experiences with lasting impressions, we often have in our daily practice. It, not only profoundly impacts but reminds us of the incredible power of medicine and the fragility of human existence. We saved a life, saved a mother and saved the whole family as she is now there to glue and hold it. There is nobody else in this world to take the place of a mother. The kids who have lost their mothers, remain deficient of the feel of the purest love and this blessing in their lives. As I look back towards the past of my personal and professional years, I have gained a deeper appreciation of the fact that there is no greater loss than losing a mother.

As a part of training, we are taught and trained in communication skills, especially breaking the bad news to patients and their families. This is the moment, where our cherished accomplishments are overshadowed with a touch of sadness. I remember my young patient, student of 10th class, admitted with weakness and anemia and turned out to be acute leukemia with all poor prognostic factors. It was the morning round, she was smiling and telling her mother that how she wants to appear in the upcoming examination. She was among one of the best top academic graders in her class and had an ambition to become a doctor. I was holding her blood report in my hands while observing her conversation. She had all the satisfactions on her face and shining eyes full of life. Her mother looked towards me with inquisitive eyes. I didn't find any words in my vocabulary to reply her, or even a merest courage to make eye contact to disclose the diagnosis. I came out of her room with other consultants and post graduate trainees. In the corridor, as I stood against the wall and eyes on the floor and asked them, "who had the courage to break this news to her mother?" It was not a surprise that no one had.

After almost one year or so, a lady entered in my office with her husband in the medical unit and introduced herself. They were the parents of that patient. She had a remaining family of two sons and two daughters, to live with and take care. Her daughter died a year ago but she is always alive in her memories. She had episodes of depression and low mood but life goes on. It was a strong message that we all need to look ahead, never look back and regret. "Life is to be lived, not controlled" and if every thigh remains perfect in life we would never learn and we would never grow.