

# HEAL

Humanism Evolving through Arts and Literature



ROSE  
Chaitali Hambire, MDS



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SPRING IS COMING  
Jane Hufnagel, Class of 2027



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# BECAUSE I SAID SO

Casey Hamlet

On the 15th day that Marietta had not eaten, the psychiatry team knew they could no longer take care of her. With each day, her body grew weaker, her blood pressure softened, and her heart had to beat a little bit faster to keep her alive. By the time the medicine team was consulted, her heart was laboring at 130 beats per minute. The psychiatrists could not get her to eat. Nor could her elderly mother, who shuffled in each morning, pulled along by her cane, blinking her black, wet eyes. Nor could her priest, who knelt daily at the side of her bed. Each day for about six hours at a time, Marietta closed her eyes and sang a prayer, summoning her remaining strength to hold her shaking arms open toward the sky. White film grew thick on her tongue. Yellow crust that had not been cleaned from her eyelids and eyelashes was congealing them shut.

Every morning and afternoon we visited her and every morning and afternoon she would not tell us who or what was keeping her from eating. We asked if it was God, if it was herself, if it was a voice in her head. Was she hearing voices? Was she taking her Risperidone? She answered without pause; I know I will die, I will not eat. I know it will be slow and it will be painful, I will not eat. I want to be at peace, I will not eat. And praying resumed.

The Bible condemns gluttons. Children who haven't finished their vegetables will be made to sit at the dinner table until their bedtime. Fraternity men present cartons of milk and vodka

and pickles and crushed cigarettes to their pledges for the ultimate punishment: eat. Since the beginning of time, the concept of force-feeding has disturbed something deeply innate in us. We recoil at its mention. Feeding Marietta against her will was something no one wanted to think about for very long and no one on the team knew quite what to do. Can a psychiatric diagnosis strip someone of their competence or bodily autonomy? Should it? The morality and legality of forcing her to eat hung in the air, thick and palpable and pungent. Discussing Marietta's case on

rounds conjured a strange, familiar feeling of the impotence of adolescence. Uncomfortably aware that my place in the world was to absorb, not decide. When girlhood felt light-years away from the grown-up world, and I didn't get a seat at the table. A wagging finger— you don't know what is best for you! Sisyphus ceaselessly pushing.

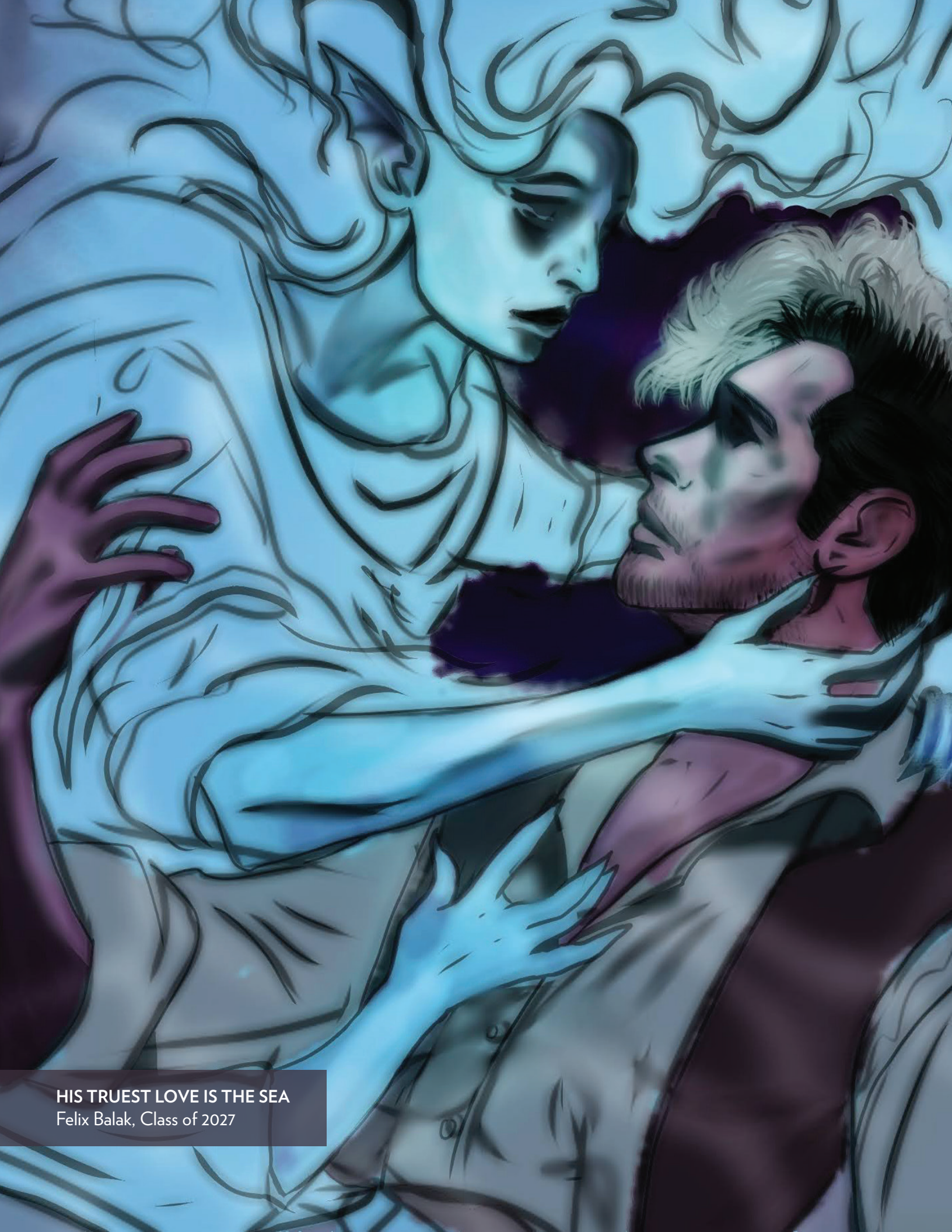
When the decision was made to put in a nasogastric tube, Marietta cried and gurgled and bucked against her restraints. The catheter snaked further, further, and further still; a hand pressed against her forehead to keep steady. Her chaperone sat by her bedside day and night because she kept trying to pull it out. For many situations in medicine, there is no guidebook on how to proceed. Unlike employees of any other field, medical doctors have the privilege of paternalism, entrusted to do good because of a diploma on their office wall. Rationalized, perhaps, by education, experience, or morality, on some subconscious level we believe that they, these enlightened humans, can claim agency over the lives of other humans if deemed necessary.

Marietta's chart, one day, showed the numbers in red indicating that her white blood cell count was elevated significantly; her temperature had soared upwards overnight while her blood pressure plummeted. Marietta was infected. This woman might die restrained in a hospital bed, damp and sick, needled and tubed, and alone. When we pledge to do no harm, who decides what harm means?

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*Casey Hamlet is a fourth-year medical student at Rutgers New Jersey Medical School.*





HIS TRUEST LOVE IS THE SEA  
Felix Balak, Class of 2027



# The Banyan Tree

Sanjana Eranki

My body stills as I descend into the landscape  
nestled at the base of the banyan tree.  
Callused fingers form a perfect haloed shape,  
just as I'm tethered, I seek to be free.

Kohl-lined eyes are cast into ebony black,  
an inky obsidian with endless possibility.  
Thoughts drift to color—blue, maroon, lilac.  
Ethereal in this search for tranquility.

Wind becomes breath, entering in and out.  
It evens, in my attempt to escape the mundane.  
Even as there lingers a shadow of doubt  
for that which I aspire, I am compelled to sustain.

My mind believes it blank, completely bare.  
Or is it a mere chasm between thoughts?  
That loom over a labyrinth as I sit unaware,  
and threads of contemplation turn to knots.

Defenses against distraction are as fragile as a glass wall  
as I hear the dulcet tones of a koel in its nest.  
Cerebral circuitry now animated by the banal,  
and if the intent is peace, I've failed the test.

That which I covet is a fruition of endurance:  
the path serpentine and long-lasting,  
each dawn affording an aperture of chance  
for the embrace of serenity everlasting.

*Sanjana Eranki is a fourth-year medical student at Rutgers Robert Wood Johnson Medical School. She is passionate about medical humanities, innovation, and health policy.*

# I can't sleep

Rida Khan

I can't sleep tonight  
I'm too distracted by the streetlight  
Distant trains and passing cars  
And memories of blood-soaked gauze

Bad dreams of grueling tests  
And social cues I've definitely missed  
And screams and cries from the trauma bay  
While the chaplain lifts his hands to pray

Racing thoughts of looming deadlines  
And terrifying front-page headlines  
And the smell of bone dust in the OR  
My nervous needle's stitches will likely scar

New year's resolutions remain unfulfilled  
Endless errands begin to build  
But his cold skin still lingers on my hands  
No matter how loud I speak he won't follow my commands

The phantom vibrations of my phone  
Did you notice the attending's irritated tone?  
Maybe I stuttered too much when I presented the case  
Maybe I wasn't working at a fast enough pace

Restless mind, restless leg  
Tomorrow night, this all over again

*Rida Khan is a medical student at New York Medical College. She has been previously published in other narrative medicine journals including Hektoen International, The Journal of Narrative Visions, and Quill & Scope.*



IN THE MIDDLE OF NOWHERE  
Jane Hufnagel, Class of 2027

## Entering where Truth Resides—Our AIDS Memorial Mandala

Julene Tripp Weaver

A stone, to absorb our walking fears  
we tread

Wood, to take the brunt force  
of our spewed anger

Sage, dead leaves, potent  
to assuage sadness of our lost souls

A bowl always present  
empty for what is alive in our  
world for the taking, for the giving

A squishy heart to embody our love,  
we give with the tightest squeeze of our fist

In the center, our earth pillow  
where hope resides waiting for our hugs  
she absorbs what we need to give back  
walking across these boundaries

Let us wait for our music in silence  
then speak through these  
passageway tokens of life

*Julene Tripp Weaver is a psychotherapist and writer in Seattle; her fourth poetry book, Slow Now with Clear Skies, was published by MoonPath Press. Her earlier book, Truth be Bold—Serenading Life & Death in the Age of AIDS, won the Bisexual Book Award, four Human Relations Indie Book Awards, and was a finalist for a Lambda Literary Award.*



# MY JOURNEY TO MEDICINE AS A PATIENT

*Brittani Kongala, Class of 2027*

Sickness has the most abrupt way of giving birth to our darkest fears. We must confront the fear of death, the unknown, and acknowledge the fragility of human life. It is a terrifying task that kept me up many nights.

It was cold inside the hospital. I shifted restlessly in my bed, trying to get comfortable, but no matter which way I turned the throbbing pain in my joints persisted. It had been a sleepless night of tests and routine checks by nurses. My husband lay asleep in a makeshift cot next to me, snoring softly. He had been up all night, steadfastly watching over me as my own guardian angel. Our life had been turned upside down seven months ago when I first became sick. It happened slowly at first, like a silent predator sneaking in: a low fever, a small rash, and hair loss. Then, almost without warning, I find myself here in a sterile hospital room asking myself, “what happened to my life?”

At 26 years of age, I had accomplished my life’s ambitions. Everything was perfect. I was married to my best friend, working full-time, and a mother of two beautiful young children. I had everything I wanted. That all changed in October 2018. My journey began with an innocent symptom. My scalp became itchy, and my hair began to thin. I was not overly concerned at first, but I quickly realized something was wrong when a few weeks later an angry red rash appeared all over my body. “You need to go to the doctor,” my husband urged, so I did. My PCP assured me that everything looked fine, and I was probably just stressed. “Try to get more rest,” she urged. “If you’re concerned about the hair loss, try to see a dermatologist.”

One month later my scalp was littered with small bald patches. My scalp became tender to the point that I could no longer brush my hair. So, I went to the dermatologist and was diagnosed with alopecia for which I was given a liquid steroid. When I asked about the rash, which was now not as prominent, I was simply told, “I’m not sure, but it seems to be going away now.” I trusted the doctor and went home thinking that my problems would resolve. My husband tried to apply the medicine to my scalp but every time he moved my hair it felt like small shocks of electricity.

After a few days of struggling to apply the medicine, I came to the sickening realization that I needed to shave off what was left of my hair. It was simply too painful to move my hair to put on the medicine. Tears streamed down my face. I’ve had long hair my entire life. I had also been using what was left of my hair to hide the bald spots now all over my head. I went

into the bathroom and grabbed the hair shears I used to cut my husband’s hair and handed it to him. “Please just do it,” I asked. I sat down in our kitchen chair, and he didn’t say a word but silently turned on the buzzer and slowly shaved my head. Hot tears streamed down my face as piece after piece of my remaining hair fell into my lap and spilled onto the floor. After what felt like hours, the buzzer turned off, and I felt my husband’s hand on my shoulder. “It’s all fixed now, baby.” I nodded but couldn’t speak. I was so ashamed. My son, who was only 13 months old, waddled over to see the commotion. He looked at me with confusion and started to cry. My husband went to comfort him and picked him up. “It’s ok, buddy, it’s just mommy.” He kept crying and staring at me. I went to my son, but his distrust towards me cut like a knife. “It’s ok, baby.” I sighed. “I don’t recognize me either.”

My condition continued to deteriorate. I became fatigued, nauseated, and all my joints constantly throbbed. I developed fevers that despite over-the-counter medications seemed to always persist. I went to another PCP for a second opinion and was told the same thing as my previous physician, “You’re stressed. You just need to relax.” I was flabbergasted. “I’m not stressed,” I insisted. “I literally woke up one day and all these symptoms started.” I left that appointment with still no answers and no referrals. Each day I continued to get weaker. We moved our family into my parent’s home so they could help take care of the children. I was no longer strong enough to drive, so my husband took me for all my errands and doctor appointments.

One day I went to the optometrist for a routine check-up, and he discovered that my optic nerve was inflamed. “You might have multiple sclerosis,” he stated. “I’m going to refer you to a neurologist.” I was so relieved. Finally, someone was going to investigate my case. My husband called to make the appointment. He went outside on the back patio, but I could still hear him speaking with the scheduling assistant. “You don’t have anything sooner than one month from now?” “I’m sorry, sir, that is our first new patient visit.” “Please, ma’am, my wife is very sick. She needs to see a doctor. Please is there anything you can do so she can get in sooner?” “I’m sorry, sir, like I said, our earliest appointment is in one month. If there is a cancelation, I will call you.”

I was passed from doctor to doctor with no answers and no indication of what was causing my debilitating illness. I learned nothing new about my illness after visiting multiple doctors of various specialties. I was disheartened and exhausted and my condition continued to worsen to the point where I was bedridden and needed assistance for all my daily activities. After seven months of illness and pain, I couldn't take it anymore. In a last-ditch effort for answers, I asked my husband to take me to the emergency room of a renowned medical center near my parent's home. "What do we have to lose? Worst case they send me away too."

To my surprise, they admitted me and said they were going to run some tests. I was relieved. For the first time in weeks, I was hopeful that someone would give me answers. But, as the night and following day waned on, I became discouraged again. Doctor after doctor, resident after resident, and herds of medical students later, and I was no closer to knowing the cause of my illness. It was the end of the day when the last physician, Dr. L, came to visit me. He pulled a chair beside my bed and began to ask me all the same routine questions, and I repeated all the same details I had told every other physician. He took his notes and listened silently to me, but when he stood up to leave, I felt an overwhelming sense of desperation. Yet another physician was going to leave me in this condition with no solutions. I grabbed his arm, desperate for someone to understand my pain, to feel my concern. Choking back tears, I begged him. "Please, I can't live like this," I cried. "I have two young children at home. You must help me. You must find out what is wrong with me." My plea gave him pause. Then he did something that previous physicians had not, he put his hand over mine and comforted me. "It's going to be ok. I promise we are going to find out what is going on. Sometimes doctors need extra time, but we are going to get an answer."

Dr. L kept his promise. Within a week, he diagnosed me with an autoimmune disease called Adult-onset Still's disease and started me on medications. Within a few months, I had my life back. The fevers left, my hair started to grow, and my body regained strength. I started looking like my old self, but I would never be the same person again. I was forever changed.


Words are so simple yet also so powerful. When patients like me are in their darkest hour, a physician has the power to give hope or shatter it. My experience with my illness is why I decided to become a doctor. I wanted to empower other patients living with chronic illness to persevere through the challenges and continue pursuing answers. What I learned from my journey is the critical importance of hearing my patients' stories, validating their experiences, and giving them hope.



**ICY AKUREYRI**

Emily Gansert, Class of 2024





TRAIL TO TRANQUILITY  
Emily Gansert, Class of 2024

# AS THE LIGHT FADES

Randy Fisher, DPM

Another year, another new pain.  
In recent months I have needed a cane.  
No doctors seem to offer any care,  
outside of suggesting a wheelchair.

But I can still think, my brain did not  
leave my head along with my hair.

Because of the pain, I wake in the night  
feeling like I had been in a fight.  
I ache like I had a knife in my back,  
and I was sure my skull had suffered a crack.

But I don't worry, my mind still works  
just like a crackerjack.

Another year, another new pain.  
I ask for help, but only in vain.  
The doctor's advice gives me alarm,  
"Better to just use your other arm."  
But I don't worry, my memory  
still works like a charm.

Was I to take two of these pills,  
or was it to be all of three?  
Today the doctor I did not see  
to ask, what about these very bad knees—

It seems I could not find my own car keys.

Now another day is here,  
and I wonder aloud with fear.  
As I see my car keys there on the floor,  
what in hell are these used for?

*Author's note: Two years ago I had a triple bypass surgery that left me with some ongoing brain fog and memory issues. In the course of discussing this with my primary care doctor he gave me the line, "If you sometimes forget where you put your car keys, don't worry about it. If you forget what they are used for, then you should worry." He sent me to a neurologist, who used the exact same line, inspiring this piece.*

# HOW BEETHOVEN HELPED ME DEAL WITH PAIN AND LOSS

Chester Freeman

In August of 2020 I was diagnosed with an inoperable cancer. When I heard that I just knew I'd been given a death sentence. My primary care physician suggested an oncologist who proposed a combination of chemotherapy and radiation at the same time. It would not be easy, but she felt I could do it. She gave me hope and I opted for treatment. However, there was one big problem. We had sold our home and did not have a place to live, so I was in a panic! Where would I stay during my treatment?

Out of the blue, I heard of the death of one of my friends, an older woman named Leigh. The email came from her daughter, who told me that she was going through her mother's files and had found a folder with my name on it. It appears Leigh had kept every letter I'd written to her. I responded immediately, and when I shared a bit about my cancer—she offered Leigh's home as a place to stay free of charge. She felt her mother would want to help in this way. It was just ten miles from the Cancer Center where I would receive treatments. This was unbelievable—like a miracle! I soon discovered a Bose music system and a complete boxed set of Beethoven's work in the house. Leigh's Beethoven collection turned out to be helpful in more ways than I could have imagined.

## BEETHOVEN AT BEDTIME

As my cancer treatments began, I seemed to be in tremendous pain at night. It was difficult to sleep. Thus began the ritual of "Beethoven at Bedtime." I decided to listen to the entire boxed set, in order. Beethoven would be my lullaby music.

Things started out well enough, but as time went on the pain became so intense, I found it difficult to even move in bed. I would focus on the melody or on a particular instrument in the orchestra. Sometimes, in a form of meditation, I imagined placing my pain in the music and letting it flow out of me. Other times I would hear pain in the music and connect my own with it.

In light of these encounters, I've become a student of Beethoven's life and music. I am not a historical musicologist, just an ordinary music lover: Speaking out of the depth of my personal experience. I interpret Beethoven's compositions as arising from his living through grief. In her 1969 book, *On Death and Dying*, psychiatrist Elisabeth Kubler-Ross proposed the need to process grief by working through denial, anger, bargaining, depression, and acceptance. Kubler-Ross wrote that "the reality is that you will grieve forever. You will not get over the loss of

a loved one; you will learn to live with it." I believe this is exactly what Beethoven did. I ask you to use your imagination and put yourself in Beethoven's shoes while I tell you a bit about his life. Journey with me and discover what you relate to and how deeply it resonates.

Everyone has the freedom to find whatever they choose in music. You can interpret it in your own way. It is what you hear that matters, and how it speaks to you. What is important is the impression that it leaves with you, how it touches your soul. That's what Beethoven was about.

## BEETHOVEN'S JOURNEY THROUGH GRIEF

During the 250th anniversary of his birth, there were many articles about Beethoven overcoming his deafness to write the Ninth Symphony. But little has been written about the boy who had to cope with the death of his mother while taking over the responsibility for his siblings.

Ludwig von Beethoven was the second of seven children, only three of whom survived infancy. In 1787, while studying and composing in Vienna as a teenager, Ludwig received word from his father that his mother was very ill. He left immediately, and on reaching home in Bonn, Germany, found her in a terrible state of pain and suffering. There was nothing he could do but comfort her with his presence. He was there to the end.

Ludwig's mother had been his strongest supporter and comforter. His father, inept and helpless, turned to alcohol. Ludwig had no choice but to grow up overnight and assume responsibility for the household. He was sixteen years old. His brothers, Caspar Anton Carl and Nikolas Johann, were thirteen and eleven; his baby sister, Maria Margarita Josepha, only eighteen months old. Now think about Ludwig rocking his baby sister as their mother is dying. How will he comfort his siblings when she is gone? Children do not grieve as adults do.







After Ludwig's mother died, with nothing to eat and bills going unpaid, he asked that his father's salary be given to him to support the family. Eventually they came to a compromise; young Beethoven got an allowance to take care of the children and meet household expenses. Amid this overwhelming crisis, as young Ludwig showed maturity and fortitude beyond his years, his neighbors stepped up to help. Without such friends, I don't see how he could have made it.

And then, just two months after his mother's death, little Maria Margarita died of an unknown cause. It was an unimaginably cruel trauma. And how does he grieve the loss of a child when he is already grieving the loss of his mother?

When I was sixteen, an entire family that lived down the street from me burned in a fire.

Suddenly spiritual questions became foremost for me. My faith was profoundly shaken. At sixteen, you think you will live forever. Death is not a part of your vocabulary until you lose a friend your age and the world changes. The only thing that got me through was the support of friends and family. I learned that grief is like the ocean. It ebbs and flows.

## A HEART OPEN TO HOPE

Bringing my own experience to bear in contemplating Beethoven—as I invite you to do also—I picture a person with the strength to keep hope in his heart. Augustine of Hippo, a Christian bishop born in the fourth century C.E., wrote that “Hope has two beautiful daughters; their names are Anger and Courage. Anger at the way things are, and Courage to see that they do not remain as they are.”

The young Ludwig made sure things did not stay as they were. Aware of the fragility of life, he earned money to support the family. He would provide a home where the boys could feel safe and grow. Becoming a father to his little brothers, he opened his heart to hope. Hope taught him patience. Hope taught him endurance.

I believe Beethoven used his energy and resilience, fueled by the power of hope, to compose his music. I believe the music helped him transform his life. I believe the music and the life of Beethoven have much to teach us about loving ourselves and the world through our own suffering, losses and grief.

Just as he became the father his brothers needed; we must stand up for those in our lives who depend upon us. We must also be gentle with ourselves as the seas of emotions ebb and flow. Sometimes we can only make it from one moment to the next, before we can manage one day at a time.

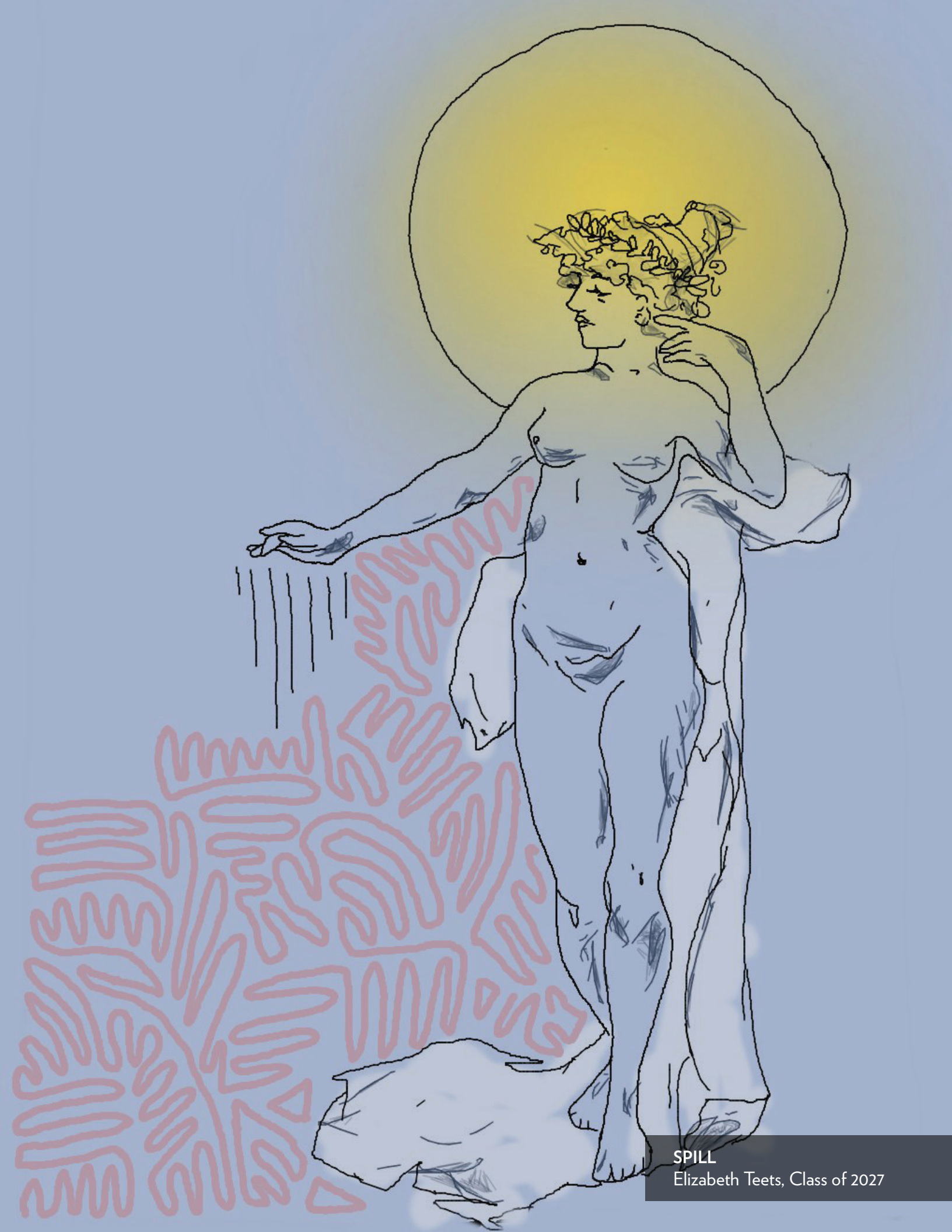
Beethoven did not get through his journey alone. He depended on friends for support. We must stay connected with our friends and family. Beethoven also understood holding onto anger. He never forgave his father for abandoning them when there was no food in the house. When his father died in 1792, Ludwig let his brothers make the funeral arrangements; he did not attend.

His paternal grandfather, though, helped heal the place in his heart that his father had scarred. Ludwig kept a portrait of his grandfather with him always. The painting was by his bedside when he died.

Beethoven did gain perspective, emerging from his journey of grief. His life and work found new expression, sustained by love, fueled by hope. Learning about Beethoven infused the music I heard, as the sounds coming from the Bose speaker soothed me to sleep during my cancer treatments. I heard his pain reaching out to mine. I heard his memories, sweet and bitter, reflecting mine. Nearly two centuries after his death, I could still hear hope.

Perhaps you hear the same. I can ask, but the answer belongs to your heart.





SPILL

Elizabeth Teets, Class of 2027



# THE BUNION

## INSIDE SCOOP!

### Medical Students Discover PM&R

**Silas Helbig**

Florida International University

In a stunning revelation that has left the medical education community scratching their heads, it appears that hordes of medical students across the country have suddenly discovered the existence of Physical Medicine and Rehabilitation (PM&R), a specialty that was once as elusive as the zebras you hear about in internal medicine rounds. For years, PM&R has been the quiet kid in the back of the medical class, overshadowed by the likes of other flashy specialties. Many medical students we interviewed admitted to only vaguely recognizing the acronym PM&R or the field known as physiatry when they matriculated to medical school. "I used to think people just had trouble with pronouncing psychiatry, I had no idea it was a different specialty. Now I want to put the funk in function!" -Milly O'Pathe (MS3).

The momentum seemed to shift when a fearless group of medical students stumbled upon the existence of PM&R during a late-night internet search for "cool medical specialties that won't make me want to cry every night." What they discovered was nothing short of miraculous, a secret field dedicated to helping patients recover from injuries and disabilities and improving their quality of life. "It was like discovering the lost city of Atlantis, but with less water and more ultrasound gel," exclaimed another ecstatic student, who promptly changed their career aspirations from cardiothoracic neuro-orthopedic surgery to PM&R faster than you can say "sacroiliac joint."

As news of this newfound specialty spread like wildfire through medical schools, students everywhere began to trade in their stethoscopes and dreams of the OR for reflex hammers and handouts on core strengthening exercises. Even practicing physicians in other specialties, many of whom had previously dismissed PM&R as "glorified physical therapists" are now expressing regret for not considering the field. "I used to laugh at medical students who told me they were pursuing PM&R. Now that I have back pain and see a physiatrist regularly, I secretly wish I became a recovery wizard like them." - Dr. Mia Algia (Pediatric plastic and oncohepatobiliary-otolaryngologic surgeon).

With PM&R now topping the list of most sought-after specialties, medical schools are scrambling to update their curriculum to include mandatory rotations in PM&R. Medical students across the country are eagerly flocking to the field and one thing is clear: Physical Medicine and Rehabilitation is no longer the specialty that time forgot – it's the specialty that everyone suddenly cannot get enough of. The question remains, what will happen when every medical student in the country finds out about PM&R? We can only assume the students who are not pursuing it just have not found out about it yet. In the end, as medical students embrace PM&R with open arms, this specialty is not just about rehabilitating patients – it is about rehabilitating our perceptions of what it means to be a doctor, one 30 second sit-to-stand test at a time.



#### Write for the Bunion: It's not scary

*The Bunion* is a place for satirical medical news and humor related to experiences with which medical students, faculty, and clinicians are all familiar. Such experiences can involve the FSU College of Medicine, the medical school experience, or healthcare in general. Content is not intended to offend or humiliate anyone. All names are factitious and any resemblance to actual people would be merely coincidental. Submit to *The Bunion* through the HEAL submission site: <https://journals.fcla.edu/heal>





VICTOIRE

VICTOIRE AMÈRE: "A  
MERE VICTORY"  
Felix Balak, Class of 2027

lx