

A Heart to Heart

Category: New Voices

written by Zarin I. Rahman | July 19, 2022



One unusually wintery April morning, when I was fifteen, my maternal grandfather (“Nanabhai” to me) passed away.

The phone call came before my sister and I left for school. My father solemnly handed the phone to my mother, who’d been expecting the call, but not this soon. From my seat at the kitchen counter, I watched her expression morph from shock to disbelief to grief. Without hearing a word, I knew what had happened.

All my life, Nanabhai had lived in Bangladesh, where my parents grew up and where I was born. My family immigrated to North America when I was two. Starting out in Toronto, we eventually settled in a small town—Brookings, South Dakota—several moves later. By that time, I was eleven.

Nanabhai and my entire extended family lived 7,500-plus miles and a \$1,500 airplane ticket away. This meant that we rarely traveled to see them. Growing up, I was jealous of friends who visited their grandparents over holidays and long weekends. I missed Nanabhai and my grandmother dearly. Their spotty internet access limited our ability to make FaceTime calls, so all I had of them were fuzzy memories and the sounds of their fading voices. When Nanabhai died, it had been almost five years since I’d seen him in person.

I later learned that he had died of a heart attack. I also learned that, starting in his late twenties, he’d been diagnosed with type 2 diabetes and eventually experienced decades of heart disease, hypertension and hyperlipidemia, culminating in double-bypass surgery. His medical history

sounded like a foreign language, full of words that I'd heard only on *House, MD*, my favorite TV show. I couldn't imagine them in connection with the man I knew as a mesmerizing storyteller and voracious reader who had a fantastic eye for interior design and loved a good home-cooked meal.

Now, as a third-year medical student, studying diabetes, heart disease, heart failure and heart attacks, I've learned the significance of the medical terms that puzzled me as a high schooler grieving her grandfather.

Amid the cardiology lectures and CPR training sessions, as the warning signs of a heart attack were etched permanently into my brain, I've often found myself wondering: *What might have happened if my current self had been with Nanabhai in his hospital room, 7,500 miles away, before he passed away? Would I have seen the warning signs? Would I have administered the right medications and put the right interventions in place? Would he still be alive today—or would he have lived long enough, at least, for us to fly out to see him?*

I've realized sadly that, unlike multiple-choice tests, my questions don't have answers, and never will.

Halfway through my internal-medicine rotation, I joined the hospital's cardiology-renal service.

In the early morning hours, I would review my patients' charts. Many shared Nanabhai's medical history—diabetes, heart disease, hypertension, hyperlipidemia, heart surgery. I assiduously documented their vitals, reviewed their ECGs and echocardiogram reports and pored over medication lists, formulating treatment plans to review with my team during morning rounds.

"Anticipate what might happen this evening or early tomorrow morning, order labs and medications, and try your best to keep the worst from happening," an attending physician had told me. For me, knowing what "the worst" could be gave this advice special urgency.

One morning, I entered a patient's room armed with only his last name, a working diagnosis from the emergency department and a creased paper with a scribbled list of questions.

When I saw Mr. Todd, I did a double-take.

An elderly gentleman not much older than Nanabhai had been when he died, Mr. Todd sat in bed, glasses on the tip of his nose, reading *War and Peace*—Nanabhai's favorite book, which I'd read the summer after his death. Mr. Todd's copy had dog-eared pages, with notes scribbled in the margins.

I felt a tingle of excitement.

Forgetting why I was there, I asked, "Are you enjoying the book?"

We plunged into a lively conversation about *War and Peace*, its characters and inspiring quotes. When the nurse walked in to give Mr. Todd his medications,

I ran through my questions as he continued to share anecdotes about his life and favorite books.

When I asked about any recent travel, he replied, "I've always wanted to travel to Europe, but life got in the way. Still, I learned all about European history by reading books. Tolstoy and Dostoevsky are my favorite authors."

"Hopefully once you get out of this hospital and start feeling better, you can schedule a trip," I responded.

I listened to his heart with my stethoscope and triple-checked his vital signs on the monitor. We went through his ECG and diagnosis.

"The ECG tracing showed us that you had a heart attack," I told him gently, crouched down so that we could talk at eye-level.

He looked off into the distance for some time.

"That's really scary," he said finally. There was another pause. "What can we do about it?"

"Right now, you keep resting. We have you on all the right medications and are monitoring your heart activity closely," I said. He nodded.

"I'll be back shortly with the team, and we'll go through our plan for the day and the rest of your stay. In the meantime, please let the nurses know if you start feeling short of breath or have any new chest pain like the one that brought you into the emergency department," I added, pointing to the button that would summon his nurses. "We'll do our best to take care of you, so that you can go home and get back to visiting the library."

"Thank you," he said, smiling.

Closing the door behind me, I reflected on all the parts of our conversation that I wished I could have had with Nanabhai as well.

Throughout my rotation, I met other patients who reminded me of Nanabhai. Like him, some were riveting storytellers. A woman showed me photos of the fresh coat of paint she'd started on her house before coming to the hospital. Another patient, picking at his lukewarm hospital food, told me how much he missed home-cooked meals.

Seeing Nanabhai in so many of my patients reminded me how important it was to ask about their lives outside of the hospital. It felt comforting to move beyond last names, diagnoses and treatment plans and discover who they really were.

I cherished these conversations, feeling that every moment spent like this with my patients was also one in which I was honoring Nanabhai's memory.