

Affected

Category: Stories

written by Jessica Tekla Les | September 24, 2010

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During my third year of medical school I was performing a routine breast exam, more for practice than anything else. I was trying the concentric-circles-around-the-nipple technique, one of several I'd been taught. About halfway through the right breast I found a lima-bean-sized lump, not far from the breastbone. I took liberties with this particular exam. I poked the lump, tried to move the lump, squished down on the lump.

I took such liberties because it was my own breast.

At the time, I responded clinically. I thought to myself, *I am twenty-seven years old, with no family history and no risk factors. Nothing to worry about.* I knew the likely diagnosis, a fibroadenoma or localized fibrocystic change, both common in my age group. I double-checked a textbook to be sure, then dismissed the lump from my mind.

A month later, shortly after my twenty-eighth birthday, my primary care doctor stumbled upon the lump during an annual physical—even though I hadn't mentioned it to her. She agreed that the lump was tender and freely mobile, the opposite of what a cancer should feel like, but she ordered an ultrasound, just to be safe.

I thought, *Really?*

Then fear crept in.

Five long weeks later, my biopsy results confirmed breast cancer, catapulting me from doctor-in-training to patient in one nauseating instant. My breast surgeon delivered the news with honesty and tenderness, but I felt desperate to escape that house of bad news and go somewhere else, even if only to another clinical building for the MRI that she'd ordered to determine the cancer's size.

I crossed the pavement and ducked out of the late summer twilight and into the imaging building's fluorescently lit halls. But in this new building I found no relief. The receptionist stamped my name and medical-record number on a stack of consent forms, then handed them to me. Turning to find a seat, I ran smack up against the absurd side of my diagnosis: the garish waiting-room artwork on the walls.

As I waited for my name to be called, my sister and friends came to join me. Together we deliberated, then voted, on which painting was most hideous. There was no question: the abstract horses dancing amid lurid pastel brushstrokes.

Since it was a Friday night, the MRI technician had some trouble cajoling a

radiology resident into coming downstairs to put an IV into me. Walking down the hall, the resident swaggered in his scrubs like an underwear model. But once holding the needle, he quivered.

After his third try at digging into my arm, I found enough courage to ask, "Can I put it in myself?"

I felt like a jerk, but I was desperate. I was also afraid that, if he continued, I would faint, which would have been even more embarrassing. I'd fainted once while on hospital rounds with a prominent internal medicine physician, who'd thereafter referred to me as "Swooning Suzie."

The resident glanced up at me. Sweat dripped down his forehead and into his eyes.

"No, are you kidding? You'd pass out."

On his fourth vein excavation, I did.

A bit later, still feeling woozy, I met the MRI machine—a new form of humiliation. Scrunching around belly-down on the table, my arms drawn back along my sides, I positioned each breast to fall through its individual peek hole. Then the technician put foam plugs in my ears to deafen the next forty-five minutes of *CLANK...WHAP...WHEEP...*

Even though I knew that the radiologist wouldn't read the images while the machine was running, I imagined him sitting in the control deck, aghast at the huge blur of cancer on the monitor. To ease my mind, I tried counting backwards: "One hundred thousand four hundred and ninety-two...one hundred thousand four hundred and ninety-one..." and then doing multiplication problems: "Seventy-two times thirty-six equals...let's see, six times two is twelve, so that's two, carry the one..." Maybe I should have tried naming state capitals.

The gadolinium contrast shot through the IV and into my body—a refreshing jolt of coolness that offset the machine chamber's warmth. I thought about the gadolinium circulating through my veins and arteries, then reaching my tissues; I imagined which cells were taking it up quickly and which were not, the cancerous separating from the benign on the MRI scan.

Finally the clanking stopped. I was birthed out of the MRI magnet headfirst and face-down. Through my earplugs I heard muffled footsteps, then the technician's words:

"Okay, we're done."

My arms felt numb. I wasn't sure how to raise myself out of the breast peek holes without them.

"We're going to have to image your left breast later," the technician continued. "We could only squeeze in your MRI for the affected side tonight."

I unstuck my face from the mold and looked up at her, spittle plastered to my cheeks. *Affected*. Why couldn't people just say what it was—*cancer*?

Lying on my belly with my head raised, trying to blink clarity into my eyes, I must have looked like a disoriented newborn seal surfacing for air for the first time. My awakening arms prickled on either side of my torso.

Standing between the control deck and me, the technician held a gown open as if she were hanging laundry on the line. I was supposed to get up now. By myself.

I maneuvered myself onto all fours. My bare breasts hung down, but at least they were shielded from the men in the control deck. I hadn't done my radiology rotation yet: I worried that I might run into one of these men in the fall. Awkwardly, I rotated myself to a seated position.

The technician draped the gown over me and ushered me out the door. "They'll contact you with the results."

I was no longer one of "them," the medical people.

Now I was a patient.

In a matter of hours, years of study aimed at carefully constructing myself as a fledgling near-doctor had crumbled away and left me bare. It was ironic: All along I had tried to identify with my patients, to imagine life in their shoes, but now, as a patient myself, I felt ill-prepared for the mounting sense of uncertainty and isolation.

I went back to the dressing room.

Once there, I saw that I'd stuffed my shoes and clothes haphazardly into the cubby, just as I would have done in the surgery locker room before going to an operation. But this was different. Instead of heading into the OR and waiting to be passed the suction wand, an exciting privilege, I would have to wait through an interminable weekend for my MRI results.

I wondered if I would ever hold a suction wand again.

Dressed, I trudged out to the waiting room. The pastel horses were still there, trying to dance out of the painting on the wall.

My friends looked first at the four Band-Aids on my forearm, then up at me for a silent moment.

Then they said, "Let's get you out of here."

About the author:

Jessica Les is a graduate of Stanford University School of Medicine and London School of Hygiene and Tropical Medicine. She is currently chief resident at Santa Rosa Family Medicine Residency, a UCSF affiliate. Her passion for writing was sparked in Sharon Bray's cancer writing group, then

funded by a Stanford Medical Scholars Grant. "Affected" is an excerpt from *The Heart Undressed*, a book nearing completion. Jessica's interests also include care for the medically underserved, walking, dogs, sewing inexpertly and, someday, revamping medical training in the US. In October she will be celebrating her three-year post-treatment "cancerversary."

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