

# Lean on Me

Category: Stories

written by Joseph Fennelly | October 20, 2017

**Joseph Fennelly ~**

One morning in my office, a tall, slim package arrives along with a note, a portion of which follows:[]

*Dr. Fennelly,*

*I can't apologize enough for not getting your walking stick back sooner. Since my dad's passing we have had to move my mother (who has a memory problem) several times, and with each move the walking stick moved too.[]*

*In some ways it reminded me of my dad and the relationship you and he had. It was comforting for him and us to know he had you in his corner to lean on and support him.[]*

*As you were well aware, Dad was a complicated man. He loved fiercely and struggled with his demons even more. We miss him...I miss him. But his suffering is gone and I rest in that thought...*

God bless,

*Maria*

The writer is the daughter of my late patient Raymond, who died about eighteen months ago.

I knew Raymond well: As his primary-care doctor, I treated him for more than four decades. A tall, kind and commanding man, he was an insurance agent who cared deeply for his clients. He was also the paterfamilias of a large extended family whose members he loved and nurtured. And, yes, he was a complicated and passionate man. His particular demons were his need to be in control and his inability to recognize when he couldn't be.

Given his stubborn self-reliance, Raymond seemed like the last person to lean on anyone else—and yet, in his last illness, lean he did.

At age eighty, Raymond was diagnosed with an incurable abdominal cancer. Despite receiving excellent care from his concerned and empathetic oncologist, he insisted on coming to me to get the exact details about his prognosis, and over the next eighteen months, he visited me frequently.

Our conversations were a mix of hope, fear and frustration. Fundamentally, he wanted a blanket guarantee that he would beat this illness—but I could not and would not let myself slide into giving false reassurance.

Instead, I tried to divert him by talking about our grandchildren—he always lit up when they were mentioned. I also encouraged him to keep on umpiring

high-school basketball games, which he loved, and I was glad that he followed my advice.

In the course of many such conversations throughout my career, I've learned how to offer a patient hope without making misleading or overly positive pronouncements. But Raymond, in his quest for absolute certainty, pushed me to the limits of my professional ability.□□

In a sense, this was simply a continuation of a dynamic that had marked our relationship for the previous forty years.

Years before, for instance, Raymond had confessed to having panic attacks while driving. After much pleading on my part, he saw a psychiatrist. This doctor helped him with appropriate medications, but kept his eyes on his computer, not on his patient. So I ended up handling the personal side of Raymond's therapy.□

I faced similar struggles in getting him to face up to his diabetes, hypertension and high cholesterol. Finally, after cardiac-bypass surgery, Raymond got religion, medically speaking: He began to pay strict attention to his diet, blood pressure and cholesterol levels.

Years later, he brought this laser-sharp focus on numbers into our talks about his cancer prognosis.

*Me: "What are your goals for care, Ray?"*

*Raymond: "I'll tell you once you tell me how long I have to live!"*

*Me: "I'll tell you how long you have once you tell me your goals for care!"*

After a half-hour of this, I'd feel an urgent need to *do* something. I was practically ready to start reading tea leaves in search of a comfortingly vague prediction—anything to keep the dialogue going!

Even as I did my best to stay attuned to the depth of Raymond's despair and to maintain our rapport, I realized that his illness, combined with his therapies, was beginning to damage his nerves. His legs grew weaker, and his balance faltered: He had to place a hand against the wall just to stay upright. It was a torment to watch.

Eventually, he struggled through my office door and sat down for what I knew would be our last office visit.

*What can I say? What can I do? I wondered desperately. How can I give him hope?*

Suddenly I remembered my maple walking stick.

It had been a gift from another patient, Gregg, who'd carved it for me to help ease the pressure on my arthritic right knee.

Gregg would survey the forest for hours, looking for the perfect tree. Like

Michelangelo visualizing David in a block of marble, he'd envision the perfect walking stick in a particular bough, then spend hours sanding and shellacking it into a work of art. The stick he'd given me was very beautiful, with prominent gnarls among its natural bends and twists. Whenever my knee became painful, the walking stick always helped.

As Raymond and I neared the end of our visit, I said, "Hold on, Ray, I've got something for you." I hurried out to my car, got the stick and brought it in to give to him.

He stared at me with an astonished smile. Then he pulled himself up and slowly walked out—leaning heavily on my walking stick.

I make it a habit to make a house call on dying patients, to console them and to better understand the family in hopes of supporting them afterward. And so, about a week later, I visited Raymond and his family.

As he lay there in bed, it was evident that he felt at peace.

"I'm not going to fight the reality any longer," he murmured faintly.

In the corner of the bedroom was the walking stick, leaning against the wall. I so wanted it back—but I didn't say anything; that would be too selfish. I had a sinking feeling that I'd never see it again.

I also felt a pang of remorse about Gregg: *What if he found out that I'd given it away? How thoughtless of me.*

Raymond died later that week.

Fast forward eighteen months, to the present.

Holding my beautiful walking stick once more, I study it closely. I'm struck by the profound, intimate mirroring of nature and nurture. The walking stick was once part of a tree—and, to paraphrase the poet Joyce Kilmer, all trees are poems of life. The breeze rustling through their leaves creates songs; the natural crooks, twists and gnarls of their branches reflect the crooks and twists of my arthritic joints, and of human aging.

At the end of Raymond's life, when I had few balms left with which to comfort him, I suspect that the walking stick became a symbol of support and hope for us both.

While healing is a mystery, it is also a gift. I hope that Raymond experienced the walking stick as a healing gift, and that it eased his acceptance of his illness and passing.

And I know that my gift to Raymond was also one to myself: It brought me comfort and hope at a moment when, in near despair, I felt I had nothing more to offer him.

**About the author:**

Joseph Fennelly is an attending physician in the department of medicine at Morristown Medical Center, NJ. He chairs the bioethics committee of the Medical Society of New Jersey and in 2015 received Lifetime Achievement awards from both the Society and Morristown Medical Center. In the mid-1970s, he was asked by Joseph and Julia Quinlan to care for Karen Ann Quinlan after the New Jersey Supreme Court gave medical decision-making to her father. "Writing not only helps me to deal with the proximity to suffering; it allows me to become both an observer and a participant in the ongoing narrative at the margins of life and death—perhaps strengthening my capacity for empathy."

**Story editor:**

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