REFLECTIONS



Young mothers are the hardest to care for, the most difficult to console.

What's a mother to do?

Ann J. Brady, RN, BSN

remember her at Christmas because she wanted to make it to one last Christmas.

"For the children," she said. I nodded, and I didn't disagree. I knew she was hoping for the unlikely, but I knew I would have done the same. My own prayer as a young mother was to see my children grow up.

As an oncology care coordinator, I work with cancer patients, addressing their symptoms, both physical and emotional. Young mothers are the hardest to care for, the most difficult to console. They understand in a special way what it is they leave behind. There is something painfully wrong about watching a mother realize she will not be there for her children. That all the things she hoped to see them do, she will miss. The list of missed things is endless. Her list was endless.

She had three daughters. I have three sons. We laughed about boys making boy noises and bathroom humor, while girls fussed and whined in a way that only girls can. We came from diverse backgrounds but shared the culture of motherhood. We smiled over stories about our children, the similarities and differences. Then I'd say, "I'll see you tomorrow." I went home while she stayed in the hospital.

Her immune system was shot. Her pain waxed and waned, but it never left. Too sick to go home, she had to wait and hope that the latest chemo might do the trick. But she was too debilitated to start treatment. At her age, 38 years old, the likelihood was that she would recover enough, just enough, to try more chemo. She said she didn't really want to. She was certain more chemo wouldn't help. More nausea and fatigue were not appealing.

But then she thought about her kids. "What's a mother to do?" she said and laughed. We'd said those words to each other in recounting a struggle with one of our kids.

I met her during one of her first hospitalizations. By then, her prognosis was already dire. She was well into her second line of treatment, but she remained upbeat. Even with nausea and other symptoms, she would be sitting up in bed crocheting when I checked on her, the colorful yarn spread out across her lap. She wore a hat she'd crocheted herself. "If I can't have my own hair, at least I'll have my own hat." She was making matching hats for her girls. "They'll look so cute in them."

Sometimes, instead of crocheting, she'd be at work on her laptop, logged on to Facebook so she could stay in touch with friends. She taught me how to get onto Facebook, "Then we can be Facebook friends." She hated the boredom of the hospital, always wishing she were somewhere else. "I want to be back in the drop-off lane at school, listening to my girls complaining about homework."

er husband wanted her to keep fighting, to keep her spirits up. He said, "You never know what new drug might be coming out. Just hold on a little longer." Behind the false light of her too bright smile, I saw that she couldn't fight him any more than she could fight the cancer. Backed into a corner like a boxer, she faced her adversaries. There were two of them. On the right was her husband. He loved her too much to even consider losing her. He'd spend each hospitalization rallying her into another stand. One last stand, again

and again. On her left was the cancer. It wanted her too much to let go. It had taken over her ovaries and filled her pelvis with itself. She was being devoured by it.

"He doesn't know what he'll do if he loses me."

"It's hard on families, especially with young kids." I said, trying to be supportive.

"Did I tell you we were high school sweethearts? He could always talk me into stuff. I'm crazy about him."

I didn't say anything. I nodded back, noncommittal. I wished for a different death for her. I knew the one she was heading for. Dying in the hospital when she wanted to be home, with Christmas decorations and the gift of her girls clamoring to be near her, with her mother singing to her while she rocked in the rocker she'd rocked her babies in.

"He thinks it will be a bad idea for the girls to see me die at home," she said.

"He said that?" I was surprised since he refused to discuss what might happen if the chemo didn't work.

"No. But I know how he thinks. He's afraid."

I wanted to say it was her place to be afraid and his to be strong instead of the other way around. When he was at her bedside, she comforted him, telling him everything was going to be okay even though we all knew it was a lie. But it was her lie.

Her symptoms kept changing. She suffered in ways that medicine did not help. One day, she was fatigued but otherwise fine. The next day, her pain was out of control or her nausea was relentless. One thing was constant, though. Her family kept urging her to stay strong, as if any sign of giving in was a personal failing.

"They don't want me to give up." She said it as a rational explanation and expected me to accept it as fact. They were trying to cheerlead her into good health.

"How do you feel about that?" I asked. "Loved."

"Of course, but it's hard on you." I wanted her to open up, to admit that the pressure her husband and family placed on her was a burden. But how could she admit to that when she knew her family was praying for a miracle?

he was readmitted to the hospital for the last time early in December. We had spoken by phone since her most recent discharge, so I knew she was declining, yet the sight of her was still a shock.

"I want to make it to Christmas." Her hands curled over the side rail, her skin as pale as snow, the gnarled ridges of tendons and bones blanching her fist. She was literally hanging on. I knew it was unlikely she would last until Christmas, but I nodded back.

"Let's do what we have to do."

I wasn't there when she passed. She picked a time when her husband was home with the girls, the early morning time when the hospital was eerily quiet. Her night nurse said she just faded away. No pain, no clenched fists. Peaceful.

She didn't make it to Christmas. But she did everything she could to make it. She did what she thought was best for her family. She did what mothers do. ■

Ann Brady is Symptom Management Care Coordinator at the Cancer Center, Huntington Hospital, Pasadena, California.



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