

## At the coalface: medical ethics in practice

# 'He is too young to die . . . and you too, doctor'

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### Abstract

*Sometimes caregiving can be a matter of fear rather than of love.*

(*Journal of Medical Ethics* 1999;25:418)

**Keywords:** Fear; doctor-patient relationship; professional risk

I check my patients daily, talk with them and their parents. I am gentle, warm and sometimes confidential, always professional and objective. My rehabilitation department is a kind of limbo where patients are cured and healed by expert professionals, and they are supposed to be respectful, grateful and polite. But when I enter that particular room I feel a kind of strange dizziness. I know what it is: fear and hate for the people I am going to talk to, who scare me to death with their lawless manners.

"Another coma patient in my department", I had mumbled to myself when I visited him the first time, "dirty routine". The boy had shot himself in the head but had not completely succeeded in his attempt to kill himself. Professionally sympathetic, and probably too self-confident as always, I explained to his relatives, the first time I met them, the extreme difficulties of treating such a patient, the high risk of death, the few chances of saving the mind together with the body ("vegetative state" is one of my favourite issues). "Please, help him. He is too young to die . . ." sobbed his obviously desperate mother. "And you too, doctor," whispered, with a vulpine grin, the strangely quiet father. I started with surprise: "Did I hear right? I am the doctor, the one who can decide between life and death, how does he dare to say that?" This thought passed in a flash. My excessive self-esteem had suddenly abandoned me: something in that grin really did remind me of a wolf and made me refrain from answering; I

promised myself that I would scold that man later when my ego had been pumped up a little more by other, thankful patients.

A policeman came to ask me about that particular patient and recommended me to deal very carefully with his parents. "Don't even think to mess with them. That boy was the only human amongst them. He shot himself when the father told him he was not a man, as he had not revenge his brother, killed one year ago . . . a bunch of rabid wolves, that's what they are, especially the father." That was the first time I felt that dizziness, now so familiar, near that room where I meet every day that grinning man. He quietly tells me that what I am doing to his son will be returned to me, that he wishes I will never suffer over my daughters (how does he know I have two girls) what he is suffering over his son. Thank God the boy is much better now, he starts moving a hand, recognises his relatives, sometimes smiles or cries, his father always near his bed. I visit him daily and check the therapy, trying to control every word I say, and leave the room with my usual "have a nice day" to which the grinning answer is a ". . . and you too, doctor", which makes me sweat in paranoia. I am scared. Reading the newspaper I sometimes hope to see that grinning face in the daily casualties of the never-ending war among rival clans.

I am self-confident no more, my self-esteem has drowned in that grin. This experience will probably make me a better caregiver; certainly it has taught me that medicine, a matter of love and care, sometimes can be a matter of fear and hate.

*\*Published under a pseudonym at the Editor's request in order to protect patient confidentiality - and the author, a practising doctor, and his family.*