

DEAR DOCTOR

from the desk of Rose Enfeld

Dear Dr. Thompson:

My hand trembles on the receiver. Silently I rehearse. No longer can I avoid the protection of those dedicated to my well-being! Your receptionist, Joy (so *earnestly* joyless!), your crisp nurse, Elizabeth (A treasure! So *few* crisp nurses left!) ... Yourself. You see, Doctor, this is big stuff! We are talking possibly Life and Death! We are talking *My Body, My Breasts! My Tits!*

I'm driven to this screaming vulgarity, desperate to break through this childish fear, this mess of inadequacies that grip at the thought of your level gaze, those milky blue eyes, listening (your eyes *do* listen), your slow controlled medical explanations, *sotto voce*, sotto *sotto voce*, patient, acknowledging my intelligence (layman's though it is -- *laywoman's*, really). Oh! The heavy seriousness of your *caring!* Awesome. Respect demanded, and given. I grope for words, stammer.

With phoney joviality I try winning over Joy with intimacies, "How've you been? Busy?" "Hold the line, please," she responds in her flat voice. And Elizabeth. Crisp. "I don't want to bother Dr. Thompson," I begin, "It's just a minor thing. Maybe *you* can answer my question ..." I hate myself. A woman of the nineties and still a browner. Sucky. "*Doctor* will have to speak to you," she crisps (They all say *Doctor*, generic noun, like *Father* as in Holy).

This is it, what I've been unable to spit out over the telephone even with written notes in front of me, after rehearsing again and again exactly what I want to say, each sentence word for word. Can't take chances here. No stumbling, no hint of uncertainty. Alas, I resort to communication by computer.

Do you remember, Doctor, (I think it only right I use a capital, although I'm told none is necessary), do you remember a mammogram I had taken back in February? The one you agreed to schedule after I thought I felt a lump? You were out of the office when I came in, but your associate, Dr. Hildebrand gave it a feel. No need to get excited. The radiologist's report was quite unexceptional. *You* had faith throughout the entire six weeks the x-ray department was searching for the lost film, and you turned out to be correct. Fibroid adenoma. Common. It's nothing, you said. It didn't help, of course, when my neighbor found a shadow on her mammogram proved to be "something," thereby proving her Doctor wrong (so much for the old Yiddish expression, "something is better than nothing"). Lucky for her, her Doctor sent her to a breast specialist as a courtesy, who aspirated the nothing, as a courtesy (my friend's a Doctor's wife), only to find a something. Oops! Surprise! I controlled my impulse to ask for the same courtesy and pushed all doubts aside.

Until the following November. I worked up enough courage to once more let my fingers do the walking, firmly around the perimeter of the right breast, around and around in smaller and smaller circles working toward the nipple, straining, listening more than feeling it seemed. Everything kopacetic here. Then the left. Around and around again. Objective, dispassionate fingers, flat, making little circular motions like rubbing out a stain. There it is again. That lump. Bigger? I test again. Not

so dispassionate this time, the fingers more earnest, listening more intensely. I called your office with no hesitation. Ode to Joy.

You were out of the office (again) when I came in, but a Resident examined me. I'm embarrassed to admit a crisis of faith when she appeared younger than my own daughter, a frightening thought if you knew my daughter. And there was that nagging voice, my mother's, coming from the centre of by being, heard, I imagined, clearly throughout your office, "*A WOMAN DOCTOR?*" I examined her face, Dr. Pathmanathan's, Dr. *Shabbandu Kasbri* Pathmanathan. Oh God! That too! Would she hear my mother's voice about that too? "*One of THOSE* people?" Would it sound like *my* voice? *Was* it mine? But Dr. Pathmanathan apparently heard nothing. "Is this the place?" she asked, feeling. Listening.

It wasn't, actually. I redirected her from the right breast to the left. She checked my file once more as if believing *it* the more reliable, but her puzzled expression indicated some discrepancy. "It does say *right* here," she said. "No, I assure you it's *left*," I answered. She looked down at the file again. "It *does* say *right*," she repeated. "Just another moment," she said as she riffled through the papers. "Ah, yes, the radiologist's report indicates *left*," she said, relieved, and flipped the papers back again. "Dr. Thompson made a slight error in transcribing. But it does say *right*, you see," she finished, showing me the report. I nodded and said comforting things. "But," I said, "Could someone please circle the spot on the correct breast with a marker should I need to have ... You know, if I'm under anaesthesia and not available?" "Not to worry," Dr. Pathmanathan assured me and continued with her probing.

"Mm. No, no change." She held up a small, white ruler. "Still only one cm. Really, it's nothing. I'd see Dr. Thompson and keep a check on it. Have another mammogram in a year," she smiled. I nodded in agreement, and determined to have one within two months. Not that I looked forward to the indignity of having my breasts laid on a platter then flattened between plastic plates like a sandwich. It's a contorted way to get one's picture taken and a far cry from the titillating appeal of an eight-by-ten glossy.

I dressed but felt older than when I came in. Dr. Pathmanathan was such a quietly confident young woman. A Doctor! My relationship with her was clearly not the same as that with my daughter.

Which brings us to the present. Not wishing to be a pest -- you recall your conviction that mammograms be given every *two* years, your concern being the costs to the system? -- I phoned Women's College Hospital. They received me warmly, but the catch was I'd need a referral from you. Oh, no! Joy again, and Ms. Crisp, and the unbearable *sotto voce*. What's the worst case response? I asked myself. Having steeled myself for that, I was unprepared for what followed. "Don't you *like* us here?" Joy asked. So plaintive! Cast now as underdog, wounded game, she became at once worthy of my sympathy. I couldn't leave her disabled so, impotent, exposed. "Don't *like* you! What has this to do with *like*?" I asked Joy and hastened to give my reasons for deserting the institution that had paternalistically, altruistically, watched over me, and for which I'd had so little appreciation. Ingrate! I chided myself. "*DOCTOR* will return your call," Joy said. Her normally cool flat voice edged with annoyance sounded weak, crushed. This was much worse than anything I anticipated. Couldn't she have been simply hateful?

You did return my call, Dr. Thompson. You, too, asked, "Don't you like us?" Again I hastened to reassure, explain that I wanted a second opinion and a mammogram within less time than you were willing to schedule. But this love thing ... It motivates us all, doesn't it, Doctor? It strikes me that without the manifest bestowal of love from patients (the public), the medical profession must seek the only symbolic redress possible. Money. Finally I understand the CMA's insistence on control

over payment. It's to do with LOVE! I wonder that wasn't apparent before. It's so obvious now! And explains an incident that happened to me last year with Doctor Epstein.

Dr. Epstein, the gynecologist? I went to him as follow-up to my hysterectomy (more accurately *berterectomy*, for if we're to believe *hyster*, meaning hysteria, refers to women, why not *berteria*? And *berterectomy*?) I could have forgiven being kept waiting while he delivered a baby, but when he returned to the office he announced, checking his watch, "Fifteen minutes! Twenty, tops, including time to get up to O.R. and back." Oh, he was proud. Rightly, I thought. So efficient! But then I asked, "Did the baby come fully equipped? Was it a boy or girl?" I remember he was caught up short and said, "I don't know! I forgot to look!" I worried for a moment about the baby's parts, but Epstein seemed undisturbed.

But that's not what I set out to tell you, Dr. Thompson. What followed will be relevant, I think. To be fair I should mention that two hours after the delivery, still waiting, flipping through Redbook, Cosmopolitan and Reader's Digest, watching pregnant women come and go, I was already out of sorts when the nurse led me into the examining room.

Dr. Epstein must have picked up my mood when he entered because he threw me a sidelong glance and asked sheepishly, "You're annoyed with me? I kept you waiting?" "Well, I'm not too pleased," I found voice to say, too mildly, muttered something about my time being valuable and noted that no self-respecting man would have waited that long. "No, but there aren't any pregnant men I know of," he laughed. "How's the bleeding been?" I looked at him blankly. "Bleeding?" "Mm. How're the periods? Still taking Premarin and Provera?" I explained to him he'd operated on me six months ago. He opened my file. "So, how do you feel?" He brightened, remembering. "I did a great job, I must say. Hardly a scar at all! A little bikini tuck." He looked as pleased as when he'd announced the baby-person's birth so I hadn't the heart to complain too much, but I had to tell him how depressed I was, perhaps it was hormonal, shock to the system. I was never comfortable about the ovaries coming out even though he'd assured me I wouldn't be needing them much longer, four-five years, maybe. "Vei, vei," he commiserated and gave me that sidelong glance again. His eyes grew dark and serious, contemplative; he leaned forward and placed his hand gently on my knee. "Sometimes ... at this time in a woman's life, a man begins to behave ... strangely. Brings little presents maybe." When he saw the puzzled expression on my face, Dr. Thompson, he tried again. "Some men can't do what they used to. It doesn't mean they don't love their wives anymore ... or any less." "Are you saying my husband can't get it up!" I exclaimed. Epstein pulled back.

On reflection, I have to admire his restraint, the delicate way he came at a touchy problem. Or what he thought was the problem. And why not? After all, Dr. Thompson, a woman's interests, talents and emotions are so tied to husband and children (aren't they?), her bonding to those around her so deep, so strong, it's only appropriate (medically speaking) to see her depression in light of those relationships, the most effectual being that of her husband as lover. Acknowledging that to allow such melancholy to persist would have a profound impact on the family, Epstein had no choice but to explore the performance aspect. He might have hit it head on in the blunt manner of men, asking for instance, "Has there been any change in your sexual relationship with your husband?" but obviously thinking that too direct and insensitive, chose instead the subtler, more oblique approach of women. Roundabout. Less threatening. The sophistication of Epstein's technique wasn't clear to me until later; unhappily, I hadn't fully appreciated him.

But you see, don't you, Dr. Thompson, how much importance the medical profession attaches to love?. That's not all, however. What happened next will prove what I mean. Epstein didn't respond to my *can't get it up!*, but said, "We'll have a look." (The Royal "We") "But first read this. If you have any questions, ask. Sign at the bottom and I'll call my nurse in to witness it." I glanced

quickly through the *Open Letter to Our Faithful Patients from Drs. Epstein and McLeod, Associates*. "But this says I agree these overage fees are legal," I protested. "Wasn't this issue settled by the Doctors' strike?" He explained that the amounts paid by the Government Health Insurance were not nearly enough to cover costs. "Do you want Doctors forced to run to the *United States*?" he asked and handed me his pen. "Well, you don't have to sign, no problem," ... withdrawing it, "We'll just put this aside," and took the paper from me. "No, you don't understand," I stopped him. I hated myself for the tremor in my voice, but my sense of social outrage had been pricked and I plunged forward. "I agree with the Government!" He was startled, seemingly unprepared for this idea. "I resent being invaded with your politics -- with *this*!" I picked up the paper and shook it in front of him, "It's tough enough being invaded, having to surrender to your probing and pushing and poking around inside my body so please leave my head alone." Epstein did whatever is meant by "sputter and fume." Clearly he was shaken. "Why aren't you complaining about how the Government is treating *your* Doctor?" "You still don't get it," I answered. "I don't agree with you." Epstein exploded. "This must mean you don't love me!"

YOU DON'T LOVE ME! There it is, Dr. Thompson. The Love thing. Not the Money thing, as I'd thought. Love. Everybody sings about it -- Remember the Beatles, Dr. Thompson, *All You Need Is Love*? -- or writes about it, philosophizes on it, Plato, Dante, Leo Bascaglia, and now I see it's the motivating force behind modern medicine, more specifically, behind the Canadian Medical Association. I wouldn't have believed it, but here was proof in the person of my GYN speaking for multitudes of misunderstood maligned Doctors! Never had I understood the power I had to hurt. I thought again of the hundreds of file folders packed together tight as cattle in a slaughterhouse, with all that penned-up power to gore the heart of Dr. Epstein!

I was (in a manner of speaking) caught on the horns of a dilemma. Touched by Epstein's need for love, I was at the same time scornful of it. Would he have expected the same devotion from my husband? I think not, Dr. Thompson. For instance, after I protested with, "Love You! Good heavens! I most certainly do not. What does love have to do with our relationship?" Epstein then asked in a demanding way, "What does your husband do?" Why would Epstein want to know about him? What was I, chopped liver? "What does it matter?" I asked. Perhaps I was missing something. "I *want* to know," he insisted.

There was a subtext (there always is), and I knew what it was. So I played to it. "He's a public servant, a Paleontologist for the ROM, paid a set wage, like teachers, University professors, social workers, and bureaucrats." Epstein's subtext hadn't taken that possibility into account. He'd prepared a counter-argument for Businessman, or Lawyer; Dentist. Now I ask you, Dr. Thompson, could you see *me* married to a *dentist*?

"There you have it!" Epstein exploded. He was feverish. He yanked at his hair so the strands brushed over his bald top flew wild, his eyes bugged out, large ears reddened, hunched fleshy shoulders leaned toward me and a poky fat finger shook in my face. "That's what they're trying to do. Make us the same as teachers and social workers. Control us. Take away our power." And then, Dr. Thompson, Epstein slumped as if by the very mentioning of taking away his power all his potency was sucked from him. His life force drained. He looked very sad, bewildered. Poor Epstein. Denied the essentials of existence: Love and Power. You see how mistaken I'd been about *everything*! I'd simplistically put the medical fraternity's beef down to the Money thing.

He went on. "We're headed for Socialism!" he cried, shaking his head, propping it up with his hand. Could he have been a clairvoyant, predicting as none of us could at that time the New Democrats' sweep of Ontario? "A Socialist country, that's what!" he threw at me. "Controlled greed," I threw back. I'd lost all my natural reserve, all tendency to cringe at seeing another embarrassed. The

tourniquet had been removed, my thoughts no longer wrapped by the fear and mess of inadequacies I struggled to overcome when confronted with your unruffled person, Dr. Thompson, as I've explained earlier. Epstein, with his *lantzman's* familiarity, his Yiddishkite invitation to debate, his *vei*, *vei-ing*, had challenged my social scruples, thereby igniting my anger, my passion, released (unwittingly) that brazen, outspoken, magnificent woman you, with all your measured caring and deference, were unable to free. That confident assertive woman I always knew was there, latently, potentially powerful like the genie in the bottle.

Oh, and the genie *was* out! It was when Epstein cried that he'd entered a profession promising status, money and power (I think he forgot the Love part), and after years of having enjoyed those gifts -- hard-earned and well deserved he pointed out -- all of Doctordom was about to be stripped, reduced to salaried employees no better than social workers, it was then I let him have it. "Move over, Doctor. You and your Associate, Dr. McLeod. Speed off on your boat docked at Port Hope, with your coiffed wife (chemical-blonde) who does good works on the Women's Symphony Committee and National Ballet Board, your Urologist and Proctologist sons, off to your Florida condo. Move over, make room for the younger ones."

And then he surrendered, or appeared to. Placing the *Open Letter* in his Out basket, he sighed, "Fine. We'll put this aside ...," (The Royal We again. It was big of him, he had no hard feelings.) and began to write on a memo pad, "... and just deal with each service as it comes up ... Let's see, thirty-five for each prescription renewal, thirty-five for ..." At that moment I was glorious, Dr. Thompson. I stood up, tall, regal, and in my most controlled voice said, "I think it best I leave. I wouldn't feel comfortable with your palm in my interior. No gratuitous gropes!" And I left him. For good. Jilted. He asked for love and what did he get? Nothing! *Bubkas!* How did I feel Dr. Thompson? Great! Like discovering how it feels to be part of an ethnic majority. Powerful!

I tried to recall that feeling when once again faced with the Love question, first from Joy, then you, Dr. Thompson. But there it was, your level blue eyes and *sotto voce*, the exterior calm, the assumed, awesome Word of The Healer. I assured you at the time of the high regard, if not love, I felt for you, and you agreed to schedule the mammogram, put aside your concerns over cost to the system. Our resolve, however, is constantly being tested. No more than a day after you and I settled our differences I read in the Toronto Star a letter to Ann Landers from a woman recounting how a something was mistaken for a nothing, the result of which led to parting with a uniquely feminine portion of her upper body. Her Doctor hadn't considered a biopsy necessary. Pity. He didn't think she had a problem.

My problem, Dr. Thompson, became the need to advance once more through the front lines, Mses. Joyless and Crisp, reach the Top Gun (you), to present as ammunition a letter printed in an Advice-to-the-Lovelorn column. With my hand trembling on the receiver, I struggled with the consequences of letting the whole matter drop. Whose life was it anyway? Whose body? Whose Love and who was deserving of its bestowal? The answers were clear. What was it precisely I wanted? "I WANT ...," I heard myself say aloud, practicing. "I want to see a Breast Man, uh ... Person." I sounded as if I were ordering chicken parts from a butcher. It was no different, I reasoned, from asking to see a rectal specialist for hemorrhoids. A *tushy* Doctor. We are all in the end (no pun intended) pieces of meat in a chorus line. *Tits and Ass!* But my wit would be lost. Joy would say flatly, "Hold the line, please," and Elizabeth, "You want a referral? Ultrasound? Biopsy? I'll have *Doctor* call you back," and I would wait for your call all the while predicting your counter-arguments, jotting down my responses, rehearsing.

No! No! Screw It! I'll write.

Patiently,

Rose Enfeld

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