The Legacy

"My last doctor was a real jerk, and I bet you will be too!"

That concluded my first conversation with Phil. I was starting my second month of internship, my first day on the cancer service. I had walked from room to room, introducing myself to all of the patients, and had found Phil sound asleep. A sign posted over his bed read: "CAUTION—DAY SLEEPER!" I shook Phil awake and quickly realized I had made a mistake.

"Can't you read, you idiot?" he yelled. "That sign's up there for a reason!" He went on to inform me that his opinion of doctors, *especially* interns, was very low. "I sleep until at least noon each day, and don't you forget it!"

Phil was six feet two and muscular, with piercing blue eyes. He was 19 and back in the hospital with another relapse of acute lymphocytic leukemia. As a result of chemotherapy, he sported only a few wisps of blonde hair. As the days passed, I found myself spending as much time with him as I could. I answered his questions and explained the results of his numerous tests.

One day I asked Phil what his life had been like before he became sick. "Before this leukemia got me down, I used to ride a Harley and party all night," he told me. "I could drink a six-pack of beer in less than three minutes."

Phil really came alive at night. Dressed in his favorite Guns n' Roses T-shirt and armed with a high-powered water gun shaped like an M-16, Phil terrorized the nurses. One night, while I was examining another patient, I heard screams in the hall. Looking out the door, I saw one of the nurses, her face already drenched with water, receive one last blast before Phil slipped back into his room.

Phil's mother worked at a local factory and spent all of her free time at his side. She slept on a cot in the corner of his room.

"Mom," I overheard Phil complain another night, "I just can't stop throwing up from the chemotherapy. Even the special medicines for nausea don't help."

"I know, baby. Just close your eyes and try to relax," she whispered in his ear. "This cool cloth on your forehead will help you go to sleep." Small and frail, she held his huge body in her arms, and the retching finally passed.

Two weeks later a striking brunet came to visit Phil. Tall and slender with green eyes, she spent most of the afternoon with him. I wondered who she was.

Phil, exhausted from the visit, was sound asleep. I noticed the sign above his bed had been amended: "INTERNS WILL BE SHOT ON SIGHT!" I gently nudged Phil awake and asked, "Who was the green-eyed beauty?"

"Now, Doc, you may not be as big a jerk as I first thought, but there's some information I just can't give out. It's for me to know and you to dream about."

"I see you added another warning," I nodded toward his sign.

"And it means what it says!" Without warning Phil whipped out the water gun from under his bed. A blast of cold water caught me on the cheek as I fled the room and his raucous laughter.

Later that night I asked his mother who the girl was.

"That's Lucy, his girlfriend. I think his happiest moments are during his visits from her."

Early one morning a week later, I was rounding with my attending in Phil's room. "So, how are you this morning?" the attending asked.

"I knew that intern couldn't read. I guess you're illiterate as well!"
"What did you say?" the attending demanded. In response, Phil
flipped a switch on his enormous boom box: "Highway to Hell" by
AC/DC screeched at full volume. As Phil started to sing along, the
attending's face turned beet red with anger, and I struggled to stifle
my laughter. Later that day, I went back to see Phil.

"I'm sorry that I was such a jerk this morning," he said. "It's just that living in this hospital is such a drag. My friends have quit coming to see me."

"What about your girlfriend?" I asked.

He paused, then said quietly, "She said it's too hard to be around somebody who's dying." He looked away and ran a hand over his head. "I don't even have any hair."

At that moment I finally understood who Phil really was. Beneath that outrageous, exasperating exterior was just a scared boy, alone, afraid of dying. Gently, I placed my arm around his shoulders, hoping he wouldn't shrug it off.

"I wish there was a cure for leukemia," he whispered.

"I do too, Phil. I do too."

After that, Phil often invited me to his room to listen to tapes. "I've always wanted to play guitar," he confessed one day, "and I'd just started to play with a band when I got sick."

He liked to play his radio loud, close his eyes, and strum along on his guitar. I think he must have imagined himself on-stage, before a huge audience, in a world far away from sickness and disease. I wanted to give him that world, to make sure that he never came back to mine.

Phil was finally discharged during my last week on the cancer service. As I walked into his room to say good-bye, I spotted him picking up the water gun. Quickly I ducked for cover.

"Hey, don't worry," he said. "I won't shoot you. I'm going home today and won't have much use for this thing. It worked real well on you—got you in shape. Why don't I just leave it with you, so you can blast the nurses if they get out of line?" I promised him I would take good care of it.

Three nights later, after an especially busy night on call, I was finally able to lie down. My beeper went off 15 minutes later.

"John, I just got a call from a local hospital." It was the oncology fellow. "Phil's at their emergency room with a fever and low WBC count. They're transferring him here. He should be here in about an hour."

I wiped the sleep from my eyes, grabbed some coffee, and tried to remember the workup for neutropenic fever. Forty-five minutes later, one of the nurses, frantic, ran up to me.

"Our emergency room just called. Phil went into asystole in the ambulance about 15 minutes ago. He's in the ER being coded."

"Does Phil's mother know?"

"No. She's still on her way here."

I found Phillying on the table, intubated, his young body jerking with each chest compression. For a moment he seemed to breathe on his own, then there was nothing. I glanced at the ECG monitor and saw only a flat line. We tried everything to revive him, but it was useless.

I left the ER, exhausted, and suddenly realizing that Phil's mother was still on her way to the hospital. How could I tell her that her son had died?

A few minutes later she walked up to me at the nurses station. I knew immediately that she understood what had happened by the stricken look on my face.

"I'm so sorry. Phil's gone," I said. "I just wish I could have done more for him." $\,$

"Doctor, I know you loved my baby, and he knew it too. And that's as good as any medicine you could have given him."

As I watched Phil's mother slowly walk away, I felt a tap on my shoulder. It was the head nurse.

"I'm sorry to bother you, but it's Billy," she announced. "He's here for induction chemotherapy. All the nurses have tried but we can't stop him from crying."

Grabbing a plastic bag from behind the nurses station, I followed her into a room. Lying face down on his bed was an 8-year-old child, softly sobbing.

"Hi, Billy. My name's John," I offered.

"I hate it here!" he cried, burying his face deeper into the pillow. "There's nothing to play with. And that lady in the white dress? She just stuck a big needle in me! Why can't you just leave me alone?"

"Billy," I pressed, "I had a very special friend who gave me a present before he left the hospital."

"Who cares?" He was quiet for a moment, then curiosity got the best of him. He peeped up at me, then his eyes widened as I held out Phil's giant water gun.

"My friend Phil used to shoot the nurses when they got out of line. Sometimes he would even shoot me. This helped him get through some tough times, and I think he would have wanted you to have it. Would you like to give it a try?"

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