

Going With Guts

WHEN I first saw Mary, she was in a wheelchair being pushed by her elderly daughter. I was young and new to my rural family practice, but even a neophyte knew that this 99-year-old was going to be a challenge. She was from that moment my oldest patient. She had survived nearly a century without me; there was no way I was going to let her die now.

Mary was a hellion in her day, I was told. I never knew exactly what that meant, but from the gleam in her eye and the cackle in her laugh, I knew it must be true. It flavored my appreciation for her and we hit it off instantly.

Forget your biased image of a centenarian. Mary was plump and rosy of skin tone and personality. She was gutsy, sharp mentally, and possessed a keen wit. She laughed frequently and easily, and, of course, we performed and joked with her all the more for that.

When Mary was about 103 years old, she became unresponsive. A hospital workup revealed no indication of infection, dehydration, metabolic

imbalance, or anything else. I gathered the family together for a hall conference, and we all agreed that Mary's time must be near. I shared with them that there was something I wanted to try, and they agreed that I could do whatever I believed was indicated. Without knowing exactly what I was doing or why (some would argue this point), I ordered intravenous steroids just on a gut feeling.

The next morning, Mary was sitting up in bed, talking a mile a minute, and eating everything in sight. As I sat at her bedside holding her hand, family members stood around teasing her.

One said, "Mary, what you need is a man!"

In a quavering voice, but loud and clear, she replied, "Don't you get me no man!"

We laughed at the thought of Mary not wanting a man to have to take care of, and I said, "Mary, you're a stinker!"

Her eyes widened and she looked at me just as serious, and said insistently, "No, I'm not! They keep me cleaned up!" Then she was the first to break into the uproarious laughter that followed.

Later, as I was leaving to continue morning rounds, I said, "Mary, I'll see you later." She retorted, "No. You see me sooner!"

I visited Mary at home many times. She had a modest country home that she shared with her daughter and son-in-law, both in their early 80s. He cut the wood for their Warm Morning stove that sat in the living room near Mary's bed. Her daughter cooked and Mary ate. It was a good arrangement.

When Mary was 105½ years old, her heart failed for the final time. On morning rounds one summer day, she opened her eyes and looked straight into mine. Her fleshy features were soft, and her hair had been tied with a bow by one of the nurses. A stuffed animal shared her pillow. She fixed me in her gaze and asked in her high quavering voice, "Will you die with me?"

Startled, I replied, "No, Mary, I can't"—even though a small part of me would.

And in that void, a small part of that cherished and feisty lady lives on.

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