



Linda Brodsky Memorial Journal

Vitamin C for the Soul

Jami Alamar

Death and dying are inevitable truths. One of the most important decisions we can ever make is how and *with whom* we choose to realize that destiny.

My aunt was diagnosed with Glioblastoma Multiforme in July of 2019. It is difficult to sufficiently describe the feeling of being at the precipice of the rest of my life, overflowing with inquisition and innocence, while simultaneously watching my aunt's life abruptly change. Nonetheless, as a budding medical student I thought it important to be at the forefront of her medical team, explaining the pathophysiology, procedures and likely treatment course to her and her children, my cousins, as if I had completed an oncological residency.

“What about Vitamin C therapy?” my cousin had asked the oncologist one morning. I silently scoffed under my breath. Vitamin C? I didn't blame her for her naivety. Years of higher-level education convinced me that the only way to win this battle was through weeks of chemotherapy and radiation, the medical recipe I assumed

was the natural next step after surgical resection.

To my surprise, the oncologist looked at my cousin, and with a soft tone she breathed, “whatever treatment you believe will feed her soul, I will be by her side.”

I recently reread Anne Fadiman's [The Spirit Catches You and You Fall Down](#) which reminded me of that time, nearly five years ago, since I sat with my family in the oncologist's office, discussing treatments for my aunt. In her book, Fadiman recounts the story of a Hmong family she met in Merced, California who recently immigrated from Laos. One of their daughters, Lia, is diagnosed with a seizure disorder, Lennox-Gastaut Syndrome, that required her family to seek medical care in Merced. At the time, the hospital did not have medical interpreter services for Hmong, and as such there was significant disagreement and confusion regarding the appropriate treatment options for Lia. Current medical education might require extensive pharmacotherapy to treat Lennox-Gastaut, however Lia's parents believed that her disease was rather a sign of spiritual giftedness, which led to conflict

regarding the trajectory of Lia's care. Her story challenged me to not only reflect on my experiences witnessing cultural disparities in healthcare, but it also urged me to recognize what it really means to treat patients.

The story, and my own familiarity as both a family member and healthcare provider, has created a lens through which I have deepened my own understanding of cultural humility and empathy within the context of patient care. I have seen patients receive good news and bad, both exciting and scary. I notice, now, how physicians attempt to relate to their patients. Some better than others. I have found that the best physicians are the ones that tailor their expertise to the comfort of their patients. They use their knowledge as merely a vehicle to guide patients' decision-making, letting them drive this figurative car-of-life, rather than the other way around. In doing so, they built very close relationships with their patients, signaling to me that there was indisputable respect and trust between them. As I find myself navigating my third year in medical school, I've come to realize that much of what I hope to do for my patients stems from this ability to listen, rather than to just prioritize diagnosing and offering life-saving treatment. Those were the qualities that made the oncologist who treated my aunt a very special person to us.

Whatever treatment you believe will feed her soul.

Looking back, I can understand now how chemotherapy and radiation ultimately played a minor role in my aunt's prognosis; similarly, pharmacotherapy for Lia must have only deterred from her spiritual gift. Instead, I see how important it was for my aunt to feel heard, to feel human.

I can better understand how invaluable it was for her and my cousins to feel some semblance of healthiness as she navigated the gravity of what it meant to be living with brain cancer. I realize now that medical education is often framed within the context of disease, rather than by a patient's illness. I, myself am guilty of becoming lost in the diagnostic odyssey, forgetting that there is humanity intermixed within complex patient histories. Nevertheless, I keep trying and I keep learning. I breathe. I listen. I have been granted the immense privilege to be a confidant, friend, and healer to the patients I have the honor of meeting. With that responsibility, I will treat my future patients with the grace, compassion, and empathy everyone deserves.