

Time and Tide

SHE IS twenty-one, an age I passed so very long ago. She sits before me in a paper gown, while her dress—golden sunflowers on a deep blue background—rests neatly folded on the chair. To me she is the embodiment of springtime. She sits tall, poised, and completely at ease as she chats amicably about how she just moved into town and how she's looking for a job as a stewardess and how new and wonderful her life is today, how new and wonderful her life is every day.

To the eye, it is a routine office visit. But suddenly within me arise feelings and images that break through the fragile shell of our encounter.

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We walk along the shore hand in hand. The air is heavy with the smell of brine. The morning sky is all sunshine, but the sea is dark and full of rage. The boom and hiss of the tide can be felt in our souls, driving our thoughts, setting our hearts to its own tempo. The receding waves tear at the beach and draw us downward, toward the deep.

I push the fantasy from my head and try to focus on my health maintenance checklist. I am perturbed with myself. I haven't had trouble with my professional boundaries like this since I was in medical school.

"And what kind of birth control do you use?" I ask, continuing with the interview.

"I don't use any."

"Oh?"

"You see, I'm not dating."

"Okay." My pulse begins to race, but I attempt to ignore it. Quickly, I move on to vaccines and other topics. I watch her over the top of the chart, noting how open her body language is. We have just met, yet she

is completely forthright. Has no one in her life so far taught her deceit?

It is time for her examination, and I move in close. I struggle to focus on inspection, auscultation, and percussion, but I am distracted by the curls of her hair, the curve of her back, her tan, her smell. Acutely aware of her presence, my mind wanders. Suddenly, the walls of the examination room fade away.

We are lying in crisp cotton sheets. Breezes move through the open window and bring to us the smell of eucalyptus and succulents. White lace curtains ruffle in the humid air, casting diaphanous shadows that play across the wall. The rhythmic sound of a pounding surf calls from beyond our private revelries.

I stumble out into the hall to catch my breath and to retrieve a nurse. "I'm going to need a chaperone for the gyn part of the physical." A chaperone is office policy, but this time the rule has a unique urgency. The nurse and I return to the room. My patient has laid down on the examination table and yields to me with a warm smile. I try to concentrate. I try. Yet even with the nurse in the room, as my patient shares her body's secrets with me, I am completely lost.

I am the wave. At once rising and falling, I am driven by the powers of the green void toward the shore. I rush to it, cresting and curling down. I seek only destruction in a spray of white foam as I lay myself against this rock . . .

No! I push myself back from the table. I am frightened, spinning, drowning. I mumble something about eating right and regular exercise and make a hasty exit. The patient and the nurse both look a bit surprised at my sudden retreat. I seek the safety of the hallway and my next patient.

The next day, I try to share what has happened with some of my part-

ners. They mostly laugh and wink and try to reassure me. But I remain disquieted. Finally, I mention the event to Old Edward, and he hears a plea for understanding in my voice. We meet over drinks after work.

When the beers arrive, I tell Old Edward about her. I tell him how she looks like the best of every fantasy I have ever had. Then, more sheepishly, I try to tell him something about the unbidden feelings that threatened to overwhelm me.

Like a true friend, he takes it all in, and then says, "She's a metaphor."

My jaw hangs limp a moment in bewilderment. "A metaphor?"

"Sure. Youth, enthusiasm, innocence, and probably a few other things," Old Edward replies. "You know, all the things you don't have anymore!"

Suddenly, I am angry and I tell him so.

"Ah. Well, let's talk about your anger then," he says. So we do. We talk about loss and loneliness and years slipping by. We talk about mistakes that damage the intimacies in our lives and about desperately wanting second chances. I am surprised at all that pours out and how late the hour becomes. Finally, the flood of words slows to a trickle. The conversation finally returns to my patient.

"Were you thinking of trying something with that young lady, my randy friend?" Old Edward asks.

"I don't know," I reply lamely. "I don't think so . . ."

"Well if you do and I find out about it, I'll gladly turn you in to the state board myself."

"You would?"

"That's what friends are for."

During the next few weeks, the desire to contact her slowly begins to fade.

She is now twenty-two, and has come in for her annual examina-

tion. In the subsequent year, my life has continued with the same slow meter of middle age and mid career. But my patient has a boyfriend now, and has questions about sexuality and birth control and cystitis and dozens of other new and compelling facets of her life.

We move through the visit smoothly. It is a joy to see her again, but I am on edge. I am afraid that all this intimate chatter will expose my weaknesses. I try to keep a smile for her. My personal flaws are not her fault, and the better part of me hopes they need never be her concern. I stick to business. I do not babble or linger. I admire her good health and try to verbally reinforce healthy behaviors.

The general medical examination goes well. I begin to feel stronger and more confident. I step out of the room briefly and bring in the nurse for the gyn portion of the visit. The nurse takes her place, standing guard over the patient, over me, and over the deep. Gently, I pull away the drape, look up, and suddenly lose myself in her eyes.

We walk along the beach. The surf is breaking far out and flat, gentle sheets of foam glide up the sand to tease our bare feet. The siren whispers of the endless deep are mingled by the wind with the rustling of dune grass. There are yellow flowers blooming there within the reeds, and we turn our faces away from the sea . . .

The image fades. I have paused for only a moment. The patient laughs at me—it seems she has selected a fairly absent-minded physician. Her laughter is like a beacon that draws me back to my duty. We finish up without another interruption. Before she goes, I hand her a prescription for birth control pills.

I rush to find Old Edward. I catch him in the lunchroom leafing through *People* magazine. “I saw her again today,” I announce.

“Who?”

“You know—that young woman,” I stammer. “My metaphor!”

“Yeah?” Old Edward leans back in his chair. “How did it go this time?”

“Okay, I guess. I mean, she’s still attractive and all, but I didn’t feel compelled to . . .” I stop.

Old Edward raises an eyebrow. “Did you do something with her?”

“No!”

“That’s good,” he says. “Those things steal from everybody.”

“How do you mean, Ed?”

“Well, you steal from her an opportunity to feel trust. Worse yet, you steal from yourself an opportunity to show compassion.”

She is twenty-three now. For me, the year has passed so quickly that I am struck dumb with disbelief. She tells me that she is engaged to be married and, after the wedding, the couple will be mov-

ing to another state and she will be out of my practice forever. With vicarious pleasure I listen to her excitement over planning a ceremony, finding a house, the possibility of having children, and scraping up enough money to make all these dreams come true.

I find that I really want things to go well for her. I hope she never does feel the sting of deceit, and that her life is long, healthy, and productive. I do my small bit by talking about prevention and providing a few screening tests. I find myself wishing I could do more for her. I almost start to babble.

She thanks me for all I’ve done. I thank her aloud for being my patient and I thank her silently for the sweet struggle she has given me.

After she leaves, I retire to my office where I reflect a moment on the joy and pain of time’s arrow. Alone, I allow the surge its final moment . . .

I am sitting on a high point among spring flowers watching two seabirds soar in great circles across the sky. Together they turn and glide away, gracefully rising toward the horizon. The ocean, far below, is calm and smooth. In the setting sun, it silently reflects all the colors of heaven.

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Reprints not available from the author.

Clinical Pearl

Histamine₂-Receptor Antagonists and Proton Pump Inhibitors Decrease B₁₂ Absorption

Patients on prolonged treatment may need supplements or screening for B₁₂ deficiency. (*J Fam Pract.* 1995;41:595-600.)