



## JOAN POTTER

### *IN CHEMO WORLD*

We're all sitting in Infusion Suite II—the old lady in the grey wig snoozing under a bright yellow blanket, the hairless man wearing a baseball cap and reading the Daily News, the woman with short streaky brown hair in jeans and high-heeled boots, my lanky, bearded 77-year-old husband, Roy, and me.

I'm keeping my husband company and trying to read a magazine. Everyone is reclining on soft grey leather chairs. All have thin transparent tubes attached to their chests or the backs of their hands or the crooks of their elbows. Roy's tube pokes out between two buttons of his red plaid flannel shirt. Pinkish and colorless liquids drip into the various tubes from plastic bags hooked onto IV poles.

A heavysset blond nurse walks in from time to time and moves quietly around the room, examining the bags and tubes, adjusting some and adding to others. A TV mounted high on one wall mumbles faintly. Roy turns a page of his paperback mystery and smiles at me. This is the second once-a-week chemo treatment he's had since his colon cancer surgery. Only 50 more to go, or so we've been told.

Three months earlier, I was sitting by Roy's side in the ambulatory surgery center; he was resting up after a colonoscopy. I was happy to see that the sedative had worn off and he seemed in good spirits, looking forward to getting up and going home. The beds in the recovery room were separated by curtains, and we could hear doctors making their pronouncements to other patients: "Looks good...all clean...come back in five years."

Finally Roy's doctor appeared, dark hair slanting over his forehead, slightly crossed brown eyes, impassive expression. "So," he said, "I removed a couple of polyps that we're sending out to the lab, I saw a little diverticulitis, and, oh yes, a mass suspicious of cancer. Make an appointment with a

surgeon.” He scribbled something on a slip of paper and handed it to Roy. Very matter-of-fact. No hopeful or consoling words.

After he disappeared a nurse came in to get Roy ready to leave, and I moved to a chair outside the cubicle. As I waited there clutching my bag and Roy’s jacket I glanced at a man sitting nearby, next to a woman I assumed was his wife. They both looked over at me with what I thought were pitying gazes.

Roy called the recommended surgeon and made an appointment for the coming week. We were strangely calm that evening, watched a movie on TV and didn’t talk about the upcoming doctor visit. The next morning I woke up in a panic, my mind racing ahead into the terrifying unknown. But when Roy came to the breakfast table he seemed almost cheerful. “I’m glad I have good doctors,” he said over his toast and coffee.

How did we spend the next six days? We went out to lunch, friends came for a visit, we talked about going to the movies but Roy was too tired. One sunny day I felt optimistic: it’s probably not cancer, the doctor just said “suspicious of.” But the next morning, the trees outside the window disappearing into a gray fog, I found myself fighting off that smothering feeling that overtakes me when life seems impossible and there’s no way out.

The surgeon was a stocky, unhurried man who spoke slowly and calmly and whose eyes crinkled slightly as if he was amused by a secret joke. He told us the lesion was malignant and surgery was required. We didn’t react with gasps or sobs. We asked a few questions and then went home.

Another week to get through. We had to tell our four children and a few friends. Everyone seemed to know someone who’d had the same surgery and recovered successfully. My sister e-mailed from California: her husband’s brother-in-law had colon cancer surgery and a year of chemotherapy and now felt fine and looked ten years younger. “Great news!” Roy wrote back. “I can’t wait to look ten years younger.”

The operation was scheduled for the day after our 51<sup>st</sup> anniversary. We couldn’t go out for a celebratory meal; Roy had to fast. But in the afternoon a florist he’d called delivered an azalea plant covered in pink blossoms. We weren’t talking much about the surgery. I didn’t know how scared he was, and I didn’t want to ask.

Then once again we were together in a hospital room. Roy was being prepared for the operation. He was flat on his back in a narrow bed while

various people came and went: the nurse to hook up the IV, the anesthetist to describe his procedure, the man to shave Roy’s belly, which gave us a laugh, and, finally, the surgeon, still calm, still with that amused expression in his eyes. Then two men in green scrubs came and pushed the bed out the door.

When your husband is being taken away on a stretcher for an operation that you hadn’t dreamed of a mere 15 days before, the focus of your life changes. Your concerns narrow and many disappear. The arguments, disappointments, and resentments that mark 51 years of marriage lose their meaning. You sit in a straight-backed chair clutching the pair of glasses and the gold wedding band the nurse has handed to you. You’re struck by your husband’s bravery, his humor, and his vulnerability as you watch the stretcher roll down the long corridor and vanish around a corner.

Then the waiting began. In the dreary room with the blaring television and the exhausted-looking people leafing through worn copies of old magazines; in a chair by Roy’s bed in the critical care unit, where he drifted in and out of sleep, monitors beeping and nurses hovering. Later, sitting day after day next to the window in his hospital room, I wished he weren’t so frail and lethargic. I wondered if he’d ever be himself again, the man who’d taken up so much of my life.

He wasn’t always a great husband; he could be sarcastic, critical, and remote, but he was also a reader, a music lover, a moviegoer, an appreciator of ethnic food, and a clever person whose funny observations could always make me laugh. Looking at his gaunt features, his long, bony body under the thin blue blanket, I knew then that I’d take it all if I could have my old husband back.

After nine days in a hospital bed—his release was delayed by Labor Day weekend when much of the staff disappeared, and a quick trip to another hospital to have stents inserted in a newly discovered blocked artery—he was ready to come home. The surgeon had explained the stage of his colon cancer—somewhere in the middle of the seriousness spectrum. The oncologist, a round, balding man with a gentle voice, had said to come to his office to discuss treatments when Roy had regained his strength.

With Roy at home, my life was devoted to making him better. I delivered healthy meals to his bedside—soups and eggs, applesauce and cottage cheese—and watched with pleasure as his face lost its grey pallor, and his voice, so thin and wispy in the hospital, grew stronger. The first couple of weeks, though, too weak to leave his bed, Roy needed an aide to help with