

Practicing Medicine and Understanding Cancer Patients

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I began my journey as a volunteer at Emory Winship Cancer Institute through my service-learning course, Cancer Biology. At Winship, I was assigned to the BMT/Hematology Department, but I volunteered occasionally as a floater. During those occasions, I served as a Front Desk Greeter and a Hospitality Cart Volunteer. Volunteering at a cancer treatment center while learning the basic fundamentals of cancer not only enhanced my understanding of the disease, but also gave me a new perspective on cancer patients. This opportunity fostered a unique connection between the biology of cancer and the emotions and trials of the patients.

Cancer consists of uncontrolled cell growth and the ability of those cells to metastasize through the body. Not only do different molecular pathways cause different cancers, but there can also be multiple causes of a single cancer as well. These factors make treating and curing cancer a difficult feat. Each type of cancer has its own set of treatments. Despite the scientific success in discovering treatments, most drugs and surgeries cause pain and suffering to patients. This is why having scientific and medical knowledge of cancer is not enough when treating patients. It is equally important to consider the patient's state of mind and quality of life while battling cancer.

When I first stepped into Winship for my volunteering shift, my eyes were instantly drawn to the frail and bald patients. Many wore masks around their mouths. Initially these sights were unfamiliar and haunting, but I familiarized myself with them. This adjustment occurred more quickly than I expected perhaps due to my growing knowledge of the procedures following a cancer diagnosis and its treatments. Chemotherapy's damage to healthy cells leads to patient fragility. The patients also change their diets because of the drugs' side effects. Cancer is commonly treated with radiation and/or chemotherapy with side effects, such as nausea and changes in taste, that alter the patient's lifestyle. Not only are the patients tolerating extra pain and weakness, but they are also unable to properly nourish themselves because of those side effects.

I had many opportunities to volunteer in different parts of the clinic. While working as a Hospitality Cart Volunteer, I gained the opportunity to reach out to many patients. I experienced mixed interactions: some were quite friendly and held short conversations with me, some were also welcoming but limited their conversations and smiles, others were indifferent, perhaps wanting to be left alone. However, one patient, whom I had seen with a knitted hat in each of our short meetings, stood out. Her eyes remained lit up, she held a bit more energy than the rest, and she wore a heartwarming smile each time we met. Cancer treatments are capable of undermining patients physically and mentally, so it is quite rare to see a patient who displays that level of energy and warmth. Cancer patients have to deal with a double-edged sword. Their treatments fight the cancer, but also cause many adverse side effects. They are thus compelled to fight a larger battle for life, to fight against the very drugs used for their survival. This fight may either make them stronger or cause a mental or physical downfall. For example, I also met an elderly woman who was very different than the woman I described above; she displayed an attitude that is common among cancer patients. Right before her chemotherapy treatment, she expressed exhaustion and sadness while remarking that she had been coming to the clinic for too long – about ten years.

Another patient that stood out was from East Asia. He was blind, hard of hearing, and unable to speak English. It was his second day at the clinic and he was unaware of his whereabouts, so I was appointed to guide him to his destinations. Since I met him by the labs after his radiation treatment, I took him in the office to get his blood drawn. His interpreter translated the procedure and informed him that drawing blood may “sting a little bit.” Unfortunately, that “little bit” turned out to be more than he expected, judging from the expression on his face. While his blood was drawn, he cringed, shut his eyes, and tilted his head back as if he was exhausted and in pain. The final stop was in the Infusion Center for his chemotherapy treatment. When questioned if he was in pain, he mentioned that his right cheek and brow line were hurting. Unfortunately, this was the beginning of the side effects from his treatment. Before beginning the procedure, the patient was informed about his chemotherapy dosage and the side effects that may impact him. This situation opened my eyes to the difficulty for patients who never had to understand cancer until they were diagnosed with it. For patients like this man, cancer may have already been difficult to grasp. In addition, there was a large communication barrier for him. So not only did this man have to struggle with his disease, but he also had to tolerate the equally difficult treatments and their side effects.

In addition to interacting with patients, my major task was to organize paperwork for patients scheduled the following day. When surrounded by patients, I was able to focus on their feelings and comfort levels, whereas, when surrounded by stacks of paper, I focused on the science and medicine. This experience allowed me to understand the reason some physicians may not interact warmly with their patients. These physicians view their patients as people on file instead of viewing them as human beings who need to be treated *and* cared for. Similarly, researchers who help advance cancer treatments have only a practical perspective due to their lack of interaction with patients. Their goal is to eradicate cancer. So, as long as that occurs, they are content.

The standard paperwork patients receive during each appointment helps physicians keep track of their patients’ progression and the reactions of their bodies. Each patient receives a patient assessment form, a list of patient encounter forms, and a patient prescription and list of allergies form. For new patients, another packet regarding the privacy policies, including permission to allow their cell/tissue samples to be used for further research, is attached to the paperwork. The patient encounter forms contain information on the lab tests that take place during that specific visit and a list of symptoms the patient experiences during that appointment. This information allows the physicians to keep track of the progression of the cancer and the treatment’s effects. Physicians also consider the patient’s medical history, which informs them of any possible genetic or hereditary significance present in the patient; for example, it may inform them of the chronic presence of certain diseases, like breast cancer. That type of information may alert other family members to their own health concerns and possibly lead them to a genetic test to see if they carry any genes that may put them at risk for certain diseases. Another part of the paperwork contains the patient’s drug prescriptions. This set of papers shows that treating cancer is not as simple as taking an antibiotic for a few days. It requires the whole body to cleanse itself of cancer cells and even healthy cells. This is a difficult procedure because it involves the whole body, which is the reason patients require multiple treatments and extra precautions. Even if other alternatives are used, such as a targeted therapy that requires “fixing” cancer cells, more than one treatment will still be required because of the complexity of cancer. However, the side effects may not be as painful and thus, easier for the patients to handle.

Volunteering at Winship allowed me to develop a balanced perspective for the practical

and the human aspects of cancer. These diseases require an extensive amount of research to understand and treat. Until today, the approach taken to cure cancer patients was to eliminate the cancer cells. Now, scientists are looking to conform the cancer cells to normal, functioning cells and to prevent the disease by detecting cancer cells as soon as possible. I understand the importance of scientific success in eliminating the rising pandemic we know as cancer, but I believe that it is equally important to consider the patients' physical and mental states when reacting to treatment. Although I have interacted with many patients, I am nervous each time I begin talking to a new one because of the sensitivity of the situation. As I interact with more patients, my understanding and empathy for them increases. In addition, I have gained confidence and a better understanding of how to handle different patients. My volunteer opportunity continues to prepare me to become a caring and open-minded physician, as I will be able to understand these diseases through a patient's point of view.

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