Confusion

Kathryn Maier MD
University of Massachusetts Medical School

Let us know how access to this document benefits you.
Follow this and additional works at: https://escholarship.umassmed.edu/soc

Part of the Creative Writing Commons, Digital Humanities Commons, and the Medical Humanities Commons

Repository Citation
Retrieved from https://escholarship.umassmed.edu/soc/vol1/iss1/6

Creative Commons License
This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License.
This material is brought to you by eScholarship@UMassChan. It has been accepted for inclusion in Streams of Consciousness by an authorized administrator of eScholarship@UMassChan. For more information, please contact Lisa.Palmer@umassmed.edu.
As I looked into her eyes, all I could see was a sea of confusion. That is how I felt the first day I met her. I remember seeing this well put together older woman. And then a whirlwind occurred when she spoke. She was speaking two languages, one of which was English. However, she kept insisting she was only speaking English. I had no old records from her prior doctor and only a few notes from a neurologist that stated she had mild dementia. No mention of speaking two languages. After further questioning, I finally found out her native language only to get her to reply, "no interpreter; I speak English well." At the end of the visit, I spoke with the neurologist who made a sooner appointment with her since this was new, however, when she saw him she spoke perfect clear English. The next year consisted of visits where she spoke clear English and visits of disarray. Always with a smile and always looking sharp and well put together. Her makeup, hair and clothes were always perfect.

Months later she walked in for her physical and she scored high on the phq9. She looked so sad, so scared. That day she allowed me to use the interpreter. Although, it was difficult since her language is rare for this area and there is only one phone interpreter. Unfortunately, the phone interpreter had trouble hearing us and I am sure he was not translating properly, as she would speak for 5 minutes and he would give me one sentence in English. However, I managed to find out that her estranged daughter came back into her life and was abusing her. That physical became a visit with elder services and my lunch spent coordinating their services with her for her safety. Even with all that, she ended up in the hospital over the weekend because of her daughter. I remember tears streaming down my eyes as I read the hospital notes. When she walked in my office disheveled for the first time with bruises all over and her arm in a sling, sadness came over me. It took all my energy not to cry in front of her. This perfect put together lady was now lost, sad; there was no smiles, no sparkles in her eyes…

I see her today because the social worker is concerned about her dementia. The visit consisted of discussing with her about going into an assisted living or a nursing home. A visit we both knew was coming but was both hoping it could wait. After a lot of discussion she agreed it was best for her safety. Her grandson who lives with her was never home and was no longer able to take care of her and she had no one else that could help her. Her daughter was getting out of the psychiatric hospital she was at and there was concern she may go right back to her house. We all knew it was for the best.
As she walked out, she gave me a huge hug and thanked me. I saw her strength come back in her eyes, I saw the sparkle that had been missing for so many months. I knew at that moment she was going to be okay although I was going to miss her.