

Reflections

MJA Dr Eric Dark Creative Writing Prize

Doors

That Love is all there is,
Is all we know of Love;
It is enough, the freight should be
Proportioned to the groove.

Emily Dickinson

I often start a consultation with a little test: en route to my chair, discreetly using my back foot, I gently nudge the consulting room door so that it slowly closes.

Ideally, the manoeuvre is timed so that, just after I have sat to face the already seated patient, the door shuts as though automatically, with a satisfying click. Unless I miscalculate, this sound is not loud enough to startle any but the already anxious. It is, however, sufficiently audible to plink the room with an air of expectancy and creates a hiatus, after which I can either speak or wait for the patient to begin. Occasionally, the movement catches the patient's eye and I see them follow the door's passage, transparently wondering whether the force that has been deployed is sufficient — that is, whether the door and I will pass the test. But it is not only the lock that is well oiled: I have become skilled through repeated practice. The door, though light in colour — and, so, itself seemingly lightweight — is actually solid and deceptively heavy, so its own stolid momentum assists its reliable closure.

Apparently this door is also very well made. Mr Triffitt, spare of words and knowledgeable of touch, commented favourably on its carve and heft, qualities which I had neither the eye nor the hand to gauge. His opinion carried weight: from salvaged Huon pine and other timbers he expertly crafted, detailed and dovetailed, wooden boats of all scales, from matchbox size to those large enough to float their human occupants safely. Although he did supplement his modest needs in retirement by selling some of his vessels, he seemed somewhat bemused by their popularity. It was the making rather than the marketing that was his primary passion; the secondary income he derived, while definitely not unwelcome, was not his principal motivation.

Deliberate and unhurried, he worked on his boats in the same way that he spoke, and I found his obstinate refusal to be harried by the unending demand for his craft appealing. So, when, on our first consultation, the door, with a velocity right on the razor's edge of sufficiency, finally completed its lingering arc and clicked satisfyingly to, his appreciative and barely audible assessment, muttered more to himself than to me — "That's done it" — meant a great deal. By passing this test, not only did the door click, but in that instant, on some unarticulated level, we did too.



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See *Med J Aust* 2012; 196:
412-414 for winners

Highly commended

MJA Dr Eric Dark Creative Writing Prize
(Practising and retired doctors category)

Our next meeting began after my call for "Mr Triffitt!" rang through the full waiting room. He rose from his chair a little stiffly, admonishing me mildly as he walked in.

"Only my father ever called me Mister." His tone indicated that he had disliked his father's choice. It was, I inferred, an epithet calculated to maintain distance, rendered more potent by its inbuilt whiff of unbridgeable disapproval.

"Call me Don", he continued, more as a command than an option. Despite my offer of reciprocation he seemed generally much more at ease addressing me as Doc. Don and Doc: the balance seemed right.

Don improved my listening skills. It was not that his voice was quiet — on the contrary, it was preternaturally (sometimes explosively) loud, in common with many whose hearing is diminished and diminishing. His aural acuity had been whittled down by a lifetime of unguarded exposure at close range to noisy woodworking machinery of all sorts, principally, powered wood saws. Don's formal education was minimal — he left school after 4th Form (now Grade 10) — and his vocabulary was limited. This, coupled with an innate stoicism and a disinclination to fuss over what he felt were trivia, meant that his infrequent complaints, despite his being strident, were rendered sketchily and often dismissively. Thus I learned to listen more for nuance of intonation and to scan for minute changes of expression in his generally impassive face.

While his poor hearing was a source of irritation to him, he wore the other scars which had resulted from his encounters with wood saws with an uncharacteristic pride. During our first consultation he unexpectedly lifted up his shirt to display a jagged scar running from left clavicle to left abdomen, its crooked teeth testament to the dangers of a moment's inattention. It had left him with a long-term "biting" pain in his left chest — presumably some of the superficial nerves in the skin had been involved in the damage, becoming hyperalgaesic in their filamentous regrowth. A separate accident had led to the loss of a good part of the fourth and fifth fingers on his left hand. He held up this hand to show me their absence, a gesture he used subsequently as a little "take care" wave that bequeathed another dimension to his voiced goodbye.

He was very close to his wife. Less informal than her husband, she never called me Doc but Doctor; I never used her first name but addressed her as Mrs Triffitt, and I hope I was correct in assuming that this actually was her preference. She was truly afflicted, one of the scarified: her arthritis was widespread, thwarting, and painful; despite new pipes, the plumbing to her heart and legs was blocking up again; her diaphragm, inefficient due to a left-sided paralysis (collateral damage of one of her heart

surgeries) conspired malevolently and effectively with her severe asthma and emphysema to render her almost completely dependent on continuous oxygen; and, not least, while her long-standing diabetes was expertly assessed as “stable”, it had nonetheless ravaged her kidneys and eyes. She was stoical and frail, ageing and ailing, and Don was her uncomplaining staff and support.

His devotion to her was of such an order that had he been able, he would doubtless have carried some of her burdens himself. Perhaps this partly accounted for his own parallel and sympathetic development, in later life, of the unholy trinity of asthma and diabetes and heart disease — although none of these illnesses were evident when I first met him. I nearly missed diagnosing his heart condition. Given his reticence, I formed a pattern of asking, towards the end of each consultation, whether there was anything else that was important: he would dutifully mention the biting pain continuing to niggle in his left chest. Given its chronicity and stable characteristics, I was usually able, in an exchange that took on the quality of a closing ritual, to provide appropriate reassurance.

The only clue on this occasion that there was anything different, that something was newly amiss, was in his fractionally protracted hesitation before answering, and a certain weightiness in his answer, as though gravity itself had become more concentrated in the words of his response. In a manner, it had: for the first time ever, walking up hills aggravated the pain to a vice-like grip,

loosed only by rest. He admitted too, that during this time his breathing became unusually laborious. Hitherto, by contrast, the distraction of activity had diluted his pain — to some extent this might have partially accounted for his relentless work ethic. Despite initial reluctance, he agreed to undergo the indicated tests, and he too ultimately received some new plumbing — a stent to the single stenosed culprit blood vessel that had been progressively failing to adequately supply a part of his heart.

Ultimately, Mrs Triffitt died. Within weeks of his wife’s release from life — a release both expected and unexpected, welcome and unwelcome — Don developed a new cough, lost appetite, lost weight, became gaunt, hollowed. “A shadow growing around the heart”, he termed it when shown the x-ray and its incontrovertible evidence — a large and aggressive lung cancer that bloomed untreatably within his chest. He continued to see me as he weakened. On the day of our last consultation together, he insisted that I sit first, then, with his left hand raised in his characteristic gesture of goodbye, he lightly set the door in motion, pulling it to. I feared the force was insufficient, that the door might not even reach its goal. I should not have fretted — he knew his materials. Reach it did. And engage it did, solid and secure, without a jolt. Together we sat in the splendid isolation of our cave. He looked across at me, his expression amused, defiant, final. “That’s done it”, he said.

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