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# *Incurable*

Faith Shearin

*Photo by Lucien Morfils*

The summer before fifth grade, I was sick with a kidney infection, and for almost a month, doctors could not figure out what was wrong. I ran a high fever and felt an ache in my side; I sat with my cats in my lap, in front-yard sunlight, trying to get warm. This, I think, was the beginning of my troubled relationship with doctors. I did not like the questions they asked when I appeared in their exam rooms. I was ten years old and embarrassed by my body; doctors favored revealing paper gowns, showed a relentless interest in whether or not I menstruated. It was July, and I shivered in waiting rooms and in cold, hard hallways, sat on tables where I was inspected like something unpleasant under a microscope; my mother was told I probably had the flu, and for a few days I would improve; then I worsened again, until I was admitted to a hospital, where my urine and blood suggested the problem.

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I grew up on an island where there weren't many doctors; we had walk-in clinics in the 1970s, meant for tourists, but no proper pediatricians. This might have been part of the trouble: no one was very good with children. My sister remembers being chased around a gurney by a parade of angry nurses and doctors when she was supposed to receive her immunizations for school. There were no hospitals or birthing centers, so my mother was driven two hours inland for the medically induced births of my sister and brother. But in the rural farming community where my mother's family had lived for generations, there was a village doctor, Dr. Fred, who tended my grandparents and their parents and whose vacation cottage was not far from my grandfather's cottage, beside the silvery, rippling waters of the Chowan River. My mother worked for Dr. Fred in high school, during summers, as his receptionist. He came, in person, to my grandparents' house on old-fashioned house calls whenever one of them was ill. I have a memory of Dr. Fred arriving at my grandparents' house when my aunt had thrown out her back; I do not know why my family called him by his first name instead of his last or how the closeness with him began. Dr. Fred was a short man with sandy hair and glasses, and he stepped into my grandmother's kitchen and drank a glass of her iced tea in front of a picture window with blue curtains, his medical bag in his hand; then he disappeared down an unlit hallway to a back bedroom, where he spoke to my aunt with a calm, hushed voice. I had the sense that he was one of us, not separate or apart. Aside from the bag, he had no special costume.

I was told that Dr. Fred did not hurry, that he liked small talk and was a good diagnostician. He diagnosed my mother's mononucleosis when she was a senior in high school and began running a low-grade fever and falling asleep over her homework in the afternoons; he told my grandfather his gallbladder was acting up when he described an ache under his ribs after eating bacon.

I went away to boarding school and college and moved around for most of my adult life; I was a stranger to any doctor who saw me. My insurance changed and changed again; my insurance prevented me from seeing some doctors and forced me to see others. I filled out the forms that asked for my family history but felt that history was skeletal and meaningless when it was reduced to a list of diseases. The doctors I met could not picture my grandfather Henry, a postmaster who was so good at small talk that he could have befriended a lamppost. My doctors could not imagine my great-grandmother Irene, who sewed my Easter dresses

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without a pattern, cutting them out of her own imagination; they had not watched her tend a stray goat or mix a batch of biscuits.

Dr. Fred was never my doctor, but he was the only doctor my family could summon with a phone call. He drove over when my grandfather slipped on black ice and broke his hip; he answered a late-night call when my grandmother woke up with a kidney stone. Dr. Fred took up watercolor late in life, and I own one of his paintings: a delicate study of my great-grandfather's white farmhouse at the edge of his silky cornfields, the fine brushstrokes and deep greens suggesting an intimacy with that landscape where most of my extended family lived and died. Sometime in his eighties, Dr. Fred retired; he told my grandfather that he could not be the sort of physician young people were expected to become today: fast, efficient, controlled by insurance companies, ordering tests to avoid lawsuits; he had belonged to a certain small town in North Carolina during an era when milk was still delivered in glass bottles. He carried his medical bag during the summers when polio emptied swimming pools and during the flu of 1957, which sent my great-grandmother Helen, to bed for more than a week. In Dr. Fred's office, a single family member could make an appointment and the others could tag along with their nausea and fatigue, their strained muscles or constipation or warts, and my mother says he was willing to see them all, in a group, his exam room packed.

In sixth grade, my class was shown a movie about scoliosis; we sat on pillows in the library, an enormous projector spinning film from a canister which sometimes sputtered and turned white. This was supposed to be an educational movie, but I remember it as a horror film: young people growing hunched and crooked, their shoulders uneven, girls wearing heavy metal braces or flayed in operations involving metal rods. After the movie, each child in our class was asked to bend forward, over a desk, so their spines could be examined by a nurse with a gloved hand, and I remember watching each child flop forward and rise, the nurse nodding and moving past them in her big, soft shoes. When it was my turn, I bent forward and she paused, asked me to try again, then a third time, and I realized my spine was defective, like the ones we'd seen in the movie. I cried on the playground, and in the principal's office, waiting for my mother to pick me up. I had nightmares about growing crooked and deformed, nightmares in which I wore a heavy brace and suffered a misery of operations, a metal rod replacing my spine. I was taken to

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a series of embarrassing appointments during which my prepubescent body was inspected by doctors who wrote about me in files they carried on clipboards, their white coats cold. After X-rays, waiting rooms, consultations, and dread, my parents were told my scoliosis was so mild that there was nothing to do but watch it. I had paraded shirtless through hard, polished rooms and worried but received no help. It still seems to me that I would have been better off not knowing.

As a teenager, I erupted in acne: deep red spots that ached, and for a while, I saw a dermatologist in a low brick building an hour's drive from our island: an awkward man with a prominent nose who did his best to cure me. I sat under lamps and endured a thorny device meant to remove blackheads; I watched the doctor write the name of my ailment, *acne vulgaris*, on my file. I had not studied Latin yet, but I understood that the name suggested ugliness. I hated my face, and I envied the faces of girls without acne, girls with porcelain skin who did not require creams or sauces or salves, girls who woke up in the morning looking pure and clean. My dermatologist prescribed jars of antibiotics, and I swallowed the pills twice a day, though they troubled my stomach. In those days no one talked about probiotics, and sunlight was thought to improve the complexion, so—though I am pale and prone to burns—I sat on our deck for a half hour at noon each day, exposing my face to ultraviolet light. (This surely helped me develop the basal cell carcinomas I am now having removed from my forehead.) I had a series of nearly deadly allergic reactions to the antibiotics the dermatologist prescribed: my heart beat fast after I swallowed each pill; my scalp felt as if it were on fire; then my face and chest erupted in hives. My senior year of high school, my throat nearly closed on a long ride to a hospital. Afterward, the dermatologist apologized, said a reaction like that was very rare, and, wiping his face with a handkerchief, for he had heart troubles and sweated easily and would not live much longer, offered me a new drug, Accutane, which I declined after reading about high cholesterol and suicides and human babies that resembled seals. I tried various diets (one that favored drinking ridiculous amounts of water, another involving the complete removal of dairy products) and eventually had the revelation that acne was mostly incurable, that my trips to the doctor had been a way of passing the time until my acne cleared up on its own, receding like an ocean after a hurricane. The pills I swallowed made me sicker instead of healthier; my acne was not so much a disease as an obstruction to

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dating. My dermatologist was well-intentioned, and he might have been able to remove warts and cancers, but my acne left both of us helpless.

I had a good doctor when I was pregnant with my daughter, the first doctor I saw with any regularity; I found him by accident, after a miscarriage, when he did his best to comfort me, explaining that his own wife had lost a pregnancy early in their marriage and had gone on to successfully carry three children. I was so grateful for the way he acknowledged my emotional life that I enlisted him once I was pregnant again. This was 1999, before cell phones proliferated, and still he managed to call me from wherever he was to give the results of a test or to tell me whether a symptom was benign or serious. He advised me not to read the frightening books full of pregnancy complications—preeclampsia, club feet, chromosomal abnormalities—but to call him, day or night, with my symptoms. This was before googling, when bad outcomes were confined to stories told by new mothers at baby showers and fat volumes in libraries. Still, I could not seem to pass the pregnancy tests my friends had no trouble acing: my blood pressure was often high because I was frightened, and it took a while for my doctor to learn that it was best to take it at the end of an appointment rather than the beginning. I flunked the fasting blood sugar test during which, after fasting, I was asked to drink a sugary syrup; I flunked the pap smear after childbirth, my irritated cells appearing abnormal. My daughter was born small instead of large, so I did not have gestational diabetes; my pap smear was normal again after I was given another month to heal; my blood pressure has been high in any doctor's office for the rest of my life, though it is not high if I am at home, drinking tea. *Professes lifelong fear of white coats* a doctor once wrote in my file; surely this was an understatement. I began to dread any sort of test, which in my case nearly always turned up a slight abnormality that was unsettling but not treatable.

After my daughter was born, I fell into a depression. At the top of any staircase, I imagined her sliding out of my arms and landing on her head; in any kitchen, the knives glistened and seemed to consider her soft limbs; I stepped back from fires in fireplaces because I was afraid I would drop her into the flames; I could not sleep because I found myself, every hour, checking her breathing and surveying her head. I stared and stared at her head, which was so small that every other head in the world became immense. I was breastfeeding, and several times, my breasts became angry and fevered, the milk inside painful and hot. There had been a place for me, pregnant, in the obstetrician's office and in childbirth

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classes, where I belonged to a swollen tribe, but postpartum I was on my own again. When my breasts ached, a lactation specialist sent me to an internist, and when I could not stop crying, the obstetrician prescribed an SSRI that didn't work, then suggested I see a psychiatrist. The deep forest of strangers reasserted themselves.

Psychiatrists deserve their own taxonomy; they are doctors, but they did not create the same anxiety for me as internists and gynecologists. They belonged to the sea, but they were more like oysters than jellyfish. For one thing, they never asked about my menstrual periods or sexual habits. Most of mine sat in offices with braided rugs and mahogany desks in the years before Prozac. I fell into a depression at a wintry boarding school when I was sixteen; I know now that I am prone to November depressions, that the absence of the sunny island where I spent my childhood was the trigger for this one; I also liked a boy who was not smitten with me. My psychiatrist was blond and smartly dressed, and her office had a clock that ticked audibly; I don't remember her offering any new insight or medication. A bay window stretched behind her desk, and sometimes, outside, a squirrel flicked its tail and carried a nut up the trunk of a copper beech tree.

I saw a psychiatrist in graduate school: a man who after several sessions admitted that he could not treat me because he found me attractive. I saw one when I moved to Michigan, before my daughter was born, when I was having trouble adjusting to my life in a stiff Midwestern suburb. I disliked the endless highways of Detroit and the lack of public transportation; I was a bad driver, and though my troubles were more formidable than this, my psychiatrist became obsessed with my relationship to my car, spending each session on names of driving schools and exits; she liked to discuss my working knowledge of Big Beaver Road. I believe that, like the dermatologist, my psychiatrists meant to help me, but my problems were elusive, subterranean, not easily parsed, I wanted to be a writer, but I was not sure I could get published; I loved my husband but was insecure about my capabilities as a wife; I was a shy, mediocre English teacher and a poor earner, and I lived amid daydreams, stacks of dusty books, clutter. I missed the East Coast, where I had gone to graduate school and held a writing fellowship and where most of my friends remained. My husband, however, adored the Midwest and had been raised there, in Interlochen, where the northern lights emitted their eerie green glow and cherry blossoms fell each spring off Old Mission Peninsula. I grew depressed each November of the six years we lived



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there: the leaves briefly yellow before littering the damp ground, the sky a permanent ash gray. My psychiatrist never recognized the trouble my husband and I seemed to be having with geography, though my stories might have led us there; she never helped me understand what our separate homelands meant to us or how we might find a coast or mountain where we could both feel at home. After spending a year discussing traffic patterns and trying medications that made me feel weird and depressed or dry-mouthed and depressed or unable to have an orgasm and depressed, I decided that this was another kind of doctor I could do without. I thought I might be better off unpacking my feelings in poems or confiding in my dog, my notebook, my friends.

There was an auntie on my father's side who liked to tell stories about terminal diseases. At Christmas, each year of my childhood, we sat at an oblong dining table, knives and forks scraping china, cranberry sauce bleeding into our turkey, a fake tree throbbing in the corner, while this aunt told stories about people in her town who had died slowly of horrible diseases. She favored flesh-eating bacteria, immune disorders, sudden infant deaths, and spider bites, but many of her tales involved cancer. They began with a person who had a cough or lump and thought it was nothing; then, there was the terrifying diagnosis, the x-ray or biopsy, the treatment that left them weak and bald, the terrible, painful death. This auntie told a story about breast cancer one December, just as my breasts had begun to develop, and I was consumed with the fear that my new breasts were killing me, that my nipples were actually tumors. I was so frightened that I allowed an attractive male doctor to touch my diminutive swellings. I was afraid at an early age of death, before the idea troubled the imaginations of most children, and there was a year, when I was about eight, when one or another of my parents would stand at my bedside, singing or rubbing my back, hoping to soothe my night terrors. I knew my great-aunt Anna had died in my canopy bed. I thought of death as a starless, moonless night, and I thought of my great-aunt's soul troubling the canopy that floated above me. My mother was also a talented worrier, so perhaps I inherited my anxiety from her; she was capable of staying awake all night, haunting the hallways of our leggy beach cottage, her hands sunk in suds, black-and-white Bette Davis movies casting shadows in the living room where she ate bags and bags of peanut M&M's. There appeared to be no cure for our vivid imaginations.

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I went to college in the Pioneer Valley of Massachusetts, where foods are organic and Western medicine is less popular, and here I visited my first acupuncturist, who had an office in a Victorian house with polished wooden floors, hand-knotted rugs, incense, and candles, situated at the edge of a dense forest. I was recovering from mononucleosis—a virus that left me so tired I felt like a character in *Sleeping Beauty*—and I remember filling out a form on which I answered questions about my favorite seasons and foods, about whether I preferred to be warm or cold, whether I preferred salt or sugar (questions I found interesting and whimsical). The woman who took my pulse and examined my tongue spoke to me as a person, with my clothes on; I found her less frightening than my previous doctors because she was not searching for abnormalities and because her knowledge of me seemed vague and magical; her thin needles, when she placed them, created the sensation of rivers moving inside me. I do not know if acupuncture restored my energy more swiftly, but I was happy to have gone to a doctor and felt cared for rather than frightened. During these years, I also fell in love with the books of Dr. Andrew Weil, who had attended Harvard Medical School but, disenchanted, found himself on a journey that included herbalists and medicine men; he was interested in the relationship between the body and the mind and seemed to feel that there were benefits to meditating, eating organic vegetables, and practicing yoga. These things seemed to me gentler, less invasive, more spiritual. Several of my college friends embraced homeopathy, which I could not quite understand—small amounts of a substance that matched their symptoms melted under the tongue?—and one of my boyfriends was in love with shamans; he was sure the placebo effect illustrated the power of the human mind over the body. When he was sick, he stayed in bed drinking ginger tea. He did not believe in popping Tylenol for headaches or Pepto-Bismol for stomachaches; he thought most doctors and most pharmaceutical medications did more harm than good. He believed, instead, in fasting, herbs, rest, sweat lodges.

When I went home to the South on holidays, my family members were under the care of traditional doctors. My mother's menopause was being managed by a man who believed in hormone therapy; my father's doctors prescribed medicines for diabetes and gout; my grandparents endured operations on their joints and tests for all the things that might be wrong with them: colon cancer, breast cancer, prostate cancer; they were often nervously awaiting results. They were advised to catch cancer

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early, even if this meant living in a state of perpetual anxiety. My friends at college, conversely, believed in exercise and the wonders of a vegetarian diet. Increasingly, I was not sure what I believed.

My father's retinas tore one weekend when he was in his early fifties, while he was working in his yard, building a fence. He remembers seeing a series of ethereal flashing lights and tiny comets the next day in his law office while reading a brief, before he went blind in one eye; what followed was a series of emergency operations to save his sight, and just before these commenced, he signed a waiver acknowledging that he might be blinded by surgery, but if he did nothing, he would also be blind. My daughter was a toddler, and she and I spent several weeks cooking his favorite foods—tuna salad, oyster stew—and shuttling cups of tea upstairs while he recovered by lying facedown on a cot, listening to Bach and Agatha Christie novels. He had visited the eye doctor just a few weeks before, and things had seemed fine, so in his case, prevention hadn't worked. (I don't have a friend who has gotten sick or died in the past decade who hasn't been accused of not taking preventive measures, as if dying necessarily involves fault and blame.) I remember my father wondering if he would be able to read again, if he would be able to practice law; there were no doctors during the weeks when he lay suspended between sickness and health, no doctors while his golden retriever slept beside his bed, waiting for him to stand up again and take her for a walk. During the April when my father was recovering, his garden fallow and untended, we listened to Spalding Gray's monologue *Gray's Anatomy*, in which Gray recounted suffering from a macular pucker in his left eye and—finding himself frightened of surgery—sought increasingly outlandish cures from alternative healers. We remembered the religious healers on TV and under the tents of my father's Southern childhood with their snakes and dancing; we contemplated the family on our own street who practiced Christian Science and had replaced doctors with prayer.

There were family stories about doctors who had done harm: one, for example, had failed to deliver my aunt's daughter by C-section, and the daughter, who had gone without oxygen, suffered seizures and mental disabilities and lived at home for the rest of her life. My father, who had been prone to ear infections in childhood, was subjected to a Southern hospital's experimental radioactive treatment applied inside his ears that later may have caused skin cancer; he had been quite small when this procedure was performed, and my grandmother wept each time she described his scream as he was taken away on a gurney. In college, I

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read about medicine's long, sordid history: traveling wombs, miasmas, leeches, lobotomy, phrenology, thalidomide.

There was a societal shift toward safety while I was raising my daughter, as if absolutely anything could be prevented, and the world of childhood became populated with car seats, helmets, and kneepads. Cigarettes were extinguished, and smoke vanished from restaurants; playground equipment was no longer made of sharp metal poised over cement; I was not supposed to allow my daughter to go alone, as I had, to play in the woods; she dressed like an astronaut each time she tried ride her bike.

On a holiday once, in London, I read a newspaper article about how Americans were exposing themselves to dangerous cumulative levels of radiation, regularly hopping in MRI and CAT scan machines or getting injected with radioactive dyes. I read about how American dentists favored X-rays, whereas dentists in other countries saw no need for them, and how the tests that save some of us might be causing unnecessary distress or harm to others. What exactly do we mean by "preventive"? So many people I know have died of something undetectable after years of enduring tests for things they did not have. I had one friend who smoked her whole life, and she did not die of lung cancer; I had another who never smoked and did. I had fit friends who died of heart attacks and friends who were careful drivers who died in car crashes. I think sometimes of a poet I know who was diagnosed with terminal cancer and was so upset that he went home and suffered a fatal heart attack, of the grandmother in the movie *The Farewell*, who seemed to survive lung cancer because she did not know she had it.

The AIDS epidemic broke out while I was a teenager, and nurses were dispatched to our high school gymnasium with baskets of condoms and lists of risky behaviors. Young people were told that each time we slept with someone, we slept with everyone that person had slept with, unseen bodies piling up around us. There were lectures about monogamy and celibacy and waiting for marriage. There was a test for the AIDS virus, HIV, and if we were having sex, doctors urged us to take it, though this was so early in the epidemic that knowing your status meant knowing you would die in a horrible way without any meaningful treatment or cure. One of my friends took this test in college, at the urging of his physician, then stayed awake for a week in the kitchen of the apartment we shared, surrounded by cats and magazines, deep circles under his eyes.

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There were no doctors in this place either, at our breakfast table, where he contemplated his own mortality.

The people in my own family who lived longest were my great-grandparents: farmers at the turn of the last century. My great-grandmother delivered two sons at home, tended by her female relations, because the town doctor was so far away in winter that he did not arrive in time. My great-grandparents, who spent most of their lives outside and read books by lantern light and walked for miles and ate vegetables they grew on their own land, lived to be nearly one hundred, though they endured the first third of their sicknesses and infections without antibiotics, relying instead on chicken broth and garlic. They refused medical tests, which had caught on by the time they were old, my great-grandmother famously hopping off an exam-room table and running away before a doctor could perform a colonoscopy. I have, of course, been saved by antibiotics many times, and I don't really believe that health grows in some garden from the past, but I did notice that my uncles, aunts, and parents, with their tests and drugs and interventions, their TV dinners and pesticides, did not fare as well. This is, of course, anecdotal; there are all kinds of factors—genetics, stress, wars—but maybe what I'm trying to say is that in some ways, the health of my family doesn't seem to be improving. We have gotten fatter; we have chronic conditions; we are dying of things our ancestors didn't have a few hundred years ago. I have also lived long enough to see all kinds of diets proclaimed healthy: low fat, high fat, keto, paleo, plant based. Meat keeps you from getting fat or else meat will fill your arteries with fat. The kind of food my family ate for generations is now referred to as farm to table—as if this is a new, artful notion.

My boyfriend who studied shamans told me they were concerned with the health of a whole community; he described how they traveled into spirit worlds by inducing ecstatic states. Shamans could tell the future, help with the hunt, influence the weather, alter the course of illnesses, recapture wandering spirits from trees. I like the old TV show from the '90s, *Northern Exposure*, because the villagers of that fictional town in Alaska are cared for by a Jewish doctor and a local shaman, because one woman begins to sing while she is pregnant and one man wakes up in trees after night flying, and because the Jewish doctor contracts a local virus that he cannot cure himself, one that only the townspeople understand. I like it because the healing in these stories is often spiritual.

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You may have read before about the Collyer brothers, Homer and Langley, sons of a prominent New York doctor, who stayed on in the family's Harlem apartment after their parents died, hoarding books, furniture, newspapers, umbrellas, pianos; the brothers became increasingly afraid of the outside world and built a series of tunnels and traps to ward off intruders, though in the end, they trapped themselves. Whenever I think of my fear of doctors, I think of the Collyer brothers: one blind and paralyzed but avoiding medical attention, the other crawling through a tunnel to bring food to his sibling when he tripped a booby trap he'd built himself and was crushed by debris. Langley Collyer told a reporter, "You must remember we are sons of a doctor. We have a medical library of 15,000 books in the house. We decided we would not call in any doctors. You see, we knew too much about medicine."

I once had dinner with an oncologist who admitted that if he had terminal cancer himself, he wouldn't use the chemotherapy and radiation he prescribed for his patients but would go instead, with painkillers, to a pretty place and wait to die.

I think sometimes of Emily Dickinson, who apparently preferred that the doctors who attended her speak to her from outside her bedroom door. I want a doctor who can help me think about my body as a metaphor, a doctor who can help me accept my mortality.

I want a doctor who has considered the veil that hangs between worlds. I know I am seeking something mythic and impossible. I know our medical system is in a state of collapse, that doctors are under enormous stress, that medical school is exhausting. Yet I go on.

My husband was working in Australia when he suffered what would turn out to be a fatal heart attack, and a group of emergency room doctors told him his EKG looked fine, so he flew home while a hole opened and attended a business conference in Colorado a week later, thinking the strange ache in his chest wasn't serious. The first surgeon who spoke to me in the windowless hush of a Denver hospital where they had tried to repair his heart did not offer condolences or take my hand; he was dry-eyed and seemed irritated when he said, "Your husband's kidneys are failing. He cannot leave the hospital like this."

A year and a half later, in March, when COVID broke out, I drove to my daughter's college to move her out of her dorm room. She lived in a basement that was thick with the objects the women at her school could



not fit in their suitcases or trunks as they fled in fear: aquariums, mirrors, slippers, pillows, yarn. My daughter and I listened to news stories about blood clots and ventilators, sewed masks, began hiking in cemeteries full of sculpted lambs and slate headstones and mausoleums. We hiked in the towns that were drowned to create the Quabbin Reservoir in the 1930s, so the citizens of Boston could have enough water, wandered among the stone remains of houses and churches and country stores; we followed old roads that disappeared under water. We found a dead cat in our garage and did not know whether it had died of the virus. Hospitals were overwhelmed, and we were advised to stay out of their waiting rooms, and we hid for nearly a year without seeing any doctors.

Sometimes I look at Dr. Fred's painting of our family farm: the tin roof of a white farmhouse that lulled my mother to sleep in an upstairs bedroom during a summer rain. I don't want to wait for a nurse to take my temperature and mispronounce my name. I know the world is full of accidents, that people who keep all their appointments may still die young, that some people are lucky and some are not, that certain cancers will grow no matter how we screen for them, that certain cars will swerve on bridges and certain blood vessels are weak and certain heart attacks will go undetected. Still, I go on longing for a doctor who has

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just finished a glass of my grandmother's tea, a doctor who walks the hallways of my grandfather's house with a medical bag under one arm and, turning, opens the door to a bedroom where my aunt appears to him as a person, not a disease. I want a medicine that has vanished like pocket watches or horse-drawn carriages, something the Carolina parakeets knew, something practiced by wolves, something not orchestrated by insurance companies. The best surgeons in America could not save my husband from a heart attack at the age of forty-eight, but one doctor, who called me when I was on my way home to empty rooms and a vast, cold bed, spoke to me the way you might speak to a daughter who is alone and afraid. I will not ever forget his voice.



## FAITH SHEARIN



I began working on this essay in little notebooks in 2019—just after my husband died suddenly at the age of forty-eight—and I continued as the COVID pandemic broke out; of course, in many ways, I’ve been writing this essay all my life. I used to tell my creative writing students to make a list of their fears and obsessions and use them as the starter seeds for essays, stories, and poems. A fear of death and disease has been

among my own obsessions since childhood. I’ve had questions about the relationship between the spirit and the body for as long as I can remember, and I’ve had questions about a health care system that is so strongly influenced by insurance and pharmaceutical companies.

During the spring of 2020, my daughter and I stayed home, hiked in abandoned cemeteries, tie-dyed masks, and ate a ridiculous amount of broccoli. This time period coincided with my own early widowhood, when my health insurance was so undesirable that most doctors in my area didn’t accept it. My daughter and I had no familiar doctor to advise us, and during those first months of the pandemic, I found myself studying a framed watercolor on my living room wall painted by the only true, close, soulful old-fashioned doctor my family had ever known: the one who kept my grandparents alive well into their nineties. Dr. Fred was the first and only doctor I ever met who did not greet my family members with clipboards full of insurance forms and paper gowns; he was leisurely and friendly and applied common sense; he answered late-night phone calls and made house calls.

While 2020 doctors and nurses suffered burnout and COVID patients died on ventilators, my daughter and I found ourselves watching medical dramas at night, as if the fantasy of a doctor might save us: the talented, witty, heavy-drinking Hawkeye Pierce in *M\*A\*S\*H\**; the British Doc Martin, who feared blood and insulted the citizens of the sleepy fishing village of Portwenn, even as he correctly diagnosed them; the hopelessly rational Dr. Joel Fleischman in *Northern Exposure*,

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who discovered spirituality in Cicely, Alaska. Sometimes, in pandemic dreams, a wise, comforting doctor with a black bag tucked under one arm stepped out of the forest behind my house and knocked on my front door.

Faith Shearin is the author of seven collections of poetry, including *The Owl Question* (May Swenson Award), *Orpheus, Turning* (Dogfish Poetry Prize), *Darwin's Daughter* (SFA University Press) and *Lost Language* (Press 53). She has received awards from Yaddo, the National Endowment for the Arts, the Barbara Deming Memorial Fund, and the Fine Arts Work Center in Provincetown. Her work has been read aloud on *The Writer's Almanac* and included in *American Life in Poetry*. She won the 2021 YA Leapfrog Global Fiction Prize and has two novels forthcoming from Leapfrog Press: *Lost River, 1918* and *My Sister Lives in the Sea*.