



A time for renewal

A RETIRED PHYSICIAN KEEPS THINGS FRESH BY STAYING CURRENT IN MEDICINE AND EMBRACING NEW ADVENTURES

[By **SIDNEY SPIES, MD**]

Tell her it's all right to go," the hospice nurse whispered.

I felt lost. During the 48 hours she had lain there, only the faint rise and fall of her chest told me she was still alive. I had repeated over and over that I loved her, that both kids were doing fine, that the youngest grandson had just won a music award. Nothing I said had evoked even the slightest sign of recognition.

I leaned farther over the lowered side rail and

glanced again toward the hospice nurse standing near the foot of the bed.

My thoughts slipped back to 53 years ago in Chicago, when Rita and I met as medical school freshmen in anatomy lab. For the rest of the semester, we both reeked of the smell of formaldehyde, which no amount of bathing could wash away. When we would travel on the "L" (Chicago's rapid transit), other riders would move away, leaving an empty circle around us. My mind's eye shifted to our wedding photo 3 years

GETTY IMAGES; LIFESIZER/STAFFORD

Retirement can be a time to embark on interesting adventures, stay active in the field of medicine, and relish new friendships.

later, when she glowed with the happiness and ebullience of youth in her white gown.

The hospice nurse repeated, this time in a slightly louder whisper, "You can tell her it's all right to go."

I placed my lips against Rita's ear. It was still warm, slightly moist. My voice was hoarse; the surrounding silence made it louder than I intended: "You can go now, darling. It's all right to leave."

I thought she gave a deeper breath, like a protracted sigh, before her breathing slowed again. I climbed farther onto the bed and held my cheek against hers, feeling its slight movement with each breath. A few minutes later, her breathing stopped.

A NEW PHASE OF LIFE

That was 9 years ago, 2 years after we moved from Los Angeles to Oakland to live in a retirement complex not far from our son. Piedmont Gardens had close to 300 residents in independent living apartments, with roughly another 150 in assisted living and skilled nursing. When we first arrived, Rita could still get around on her own; although she had already begun to have memory difficulties and an uncharacteristic lack of motivation, both of which suggested early Alzheimer's disease.

When we arrived at Oakland International Airport, she was in tears and became more confused than ever. As my son and I steered her to his car and then to my future home, I became resigned to the thought that my active life was over.

I was wrong. I had embarked on a new phase of life that was to become as rich and fulfilling as any in the preceding 73 years.

MEMBERS OF AN EXTENDED FAMILY

Before Rita died, while we were living in Piedmont Gardens, we were never exposed to the isolation that I had so often seen develop in my own

patients during their terminal illnesses. In those last 2 years of her life, we had become members of an extended family. Even after I left her room in skilled nursing for the final time, I had to run a phalanx of hugs from fellow residents, some of whom joined me in my tears. A memorial service was being planned the next day.

My situation wasn't unique. Among my widening expanse of new friends, almost all either had been through the trial of losing a mate or were aware that they too would be facing similar pain in the foreseeable future.

Rita's parents had had fine voices, which Rita remembered as high points from her childhood. She herself had a pleasant voice. During her progressive loss of cognitive and physical function, her desire to sing persisted, whereas all other motivations wasted away. Other residents recognized this, and she was invited to join the Vespers choir. Every Sunday, I would take her—using a cane, then a walker, and finally a wheelchair—to Vespers services. The other choir members supported her, and while she sang, her face would light up with the same glow I remembered from our wedding photo 50 years earlier.

'PAR FOR THE COURSE'

It has been 11 years since I moved into Piedmont Gardens. I'm not getting around as fast as I did then. Every 2 years, the refraction prescription level of my eyeglasses has increased; the last change didn't help much, however, and my ophthalmologist tells me that I will need cataract surgery one of these years. That doesn't bother me—it seems that almost all of my friends here already have had their cataracts removed and they read with no difficulty. My back aches more often, and many times the neurones in my brain need to take a detour through my neocortex before they come to the name or word I'm trying to say. That's okay. Here, it's par for the course.

By now, my extended family has grown to more than a hundred. Every night, I sit for dinner with people who were teachers, librarians, chemists, lawyers, and engineers, to name a few. Each meal becomes a learning experience as well as a social one. Tuesday nights, I go to concerts or solos held in our auditorium, and during the season, I take our van to Davies Symphony Hall in San Francisco for Sunday matinees of the Philharmonic. Desirable choices often compete with one another for time.



**"THESE LATER YEARS CAN BECOME A TIME FOR RENEWAL OF THE
EXCITEMENT AND ADVENTURE OF LEARNING...AND BECOMING
PART OF A NEW ENVIRONMENT OF PEOPLE AND IDEAS."**

STAYING CURRENT IN MEDICINE

Other opportunities here serve as a stimulant for me to keep abreast in medicine. The University of California (UC) at Berkeley has partnered with its UC Medical School branch in San Francisco to form the innovative Joint Medical Program (JMP), in which rigorously selected medical students spend 5 years working toward both an MD and a research-oriented master's degree.

Students enrolled in the JMP come to Piedmont Gardens for their pre-clinical experience in geriatrics, and I serve as a preceptor for five of them each semester as they gain experience performing the complex histories and physicals required for elderly patients.

I also write a medical column for the *CREST*, our monthly in-house magazine.

I'm one of only two physicians who live in the residential living section of Piedmont Gardens. The other doctor has Parkinson's disease. He still lives with his wife in their apartment, but eventually he may have to move to skilled nursing. Still, he won't be isolated; he will continue to have friends from his years here.

Two other doctors were less fortunate—they were admitted directly to skilled nursing. Both were widowers who had chosen to stay in their large homes when personal disaster struck. One had fallen and was found on the floor of his home when his housekeeper arrived the next morning. He was transferred to Piedmont Gardens after acute hospitalization for hip and skull fractures. Several months later, he died.

The other doctor was transferred to skilled nursing from a convalescent hospital in the East, so that he could be near his only child. He had sustained a devastating stroke and has lain immobile for the 3 years since he arrived at Piedmont Gardens. His son visits occasionally on Sunday afternoons.

UNBENDABLE DETERMINATION

I remain in close touch with a few old friends in Southern California. Two are widows, the surviving halves of couples who had been integral parts of my life in another era. Both chose to continue living in the spacious houses they had shared with their physician husbands. Now, they watch the roster of their once nearby friends slowly fade through moving to a new location, illness, or death.

They've had to increase the number of days their

yardmen come, and they check handymen ads to help maintain the wear-and-tear of their houses. I've heard them speak essentially the same phrases once spoken by many of my patients, "I'm going to live here as long as my legs hold out," "I'm not leaving this house until I have to be carried out," or similar expressions that showed their unbendable determination.

They view it as defeat to move into peer surroundings, where they could return to an active form of life. And when they finally leave their large, empty houses it will be in a wheelchair or on a stretcher—starting them on an unyielding path toward fulfilling their greatest fear: ending up in a "nursing home."

Most of the advice on aging that they hear on TV or read in magazines lends support to their determination to closet themselves in their own homes for as long as they can ambulate from bed to bathroom.

They are flooded with overt, as well as subliminal, messages that emphasize ways to "stick it out" in the home associated with their past. "Let us help you stay in your home," "Sign up for Meals On Wheels," and "Our electronic pendant can always reach a trained operator for help"....In one form or another, the messages all boil down to: Hold out as long as you can still move around on your own!

KEEP MOVING, EVOLVING

Our late decades may well be a time for slowing down physically—cutting down on or giving up tennis, strenuous hiking, golfing, and exotic travels. We can relish the past but no longer need to struggle to continue living in it.

Instead, these later years can become a time for renewal of the excitement and adventure of learning, interacting with others, and becoming part of a new environment of people and ideas. In our 70s, 80s, and beyond—as a couple, a widow, or a widower—we can be an active part of a vital, stimulating, ever-enlarging family.

So much can still lie ahead. ■



The author practiced internal medicine for 38 years, while serving as assistant professor of medicine on the clinical University of California, Los Angeles faculty. He retired from practice in 1994. Send your feedback to medec@advanstar.com.