

Essay/Personal Reflection

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It was nearing 11 pm when I got home, exhausted from a day on my internal medicine sub-internship that had begun 17 hours earlier. My team's shift wasn't even technically over yet, but my supervising resident had dismissed me, extending me a kindness if for no other reason than I get enough rest to be back and functional in the hospital at six the next morning.

Despite this brief reprieve, the feeling that overwhelmed me as I slouched into my room was one of guilt. Guilt that I had left while the residents were still at the hospital; some of them would likely be there for hours more. Guilt at remembering how, in my final hours at the hospital, I had construed each new concern from a patient as a quasi-personal assault on my well-being. *Stop bothering me, I'm just trying to get home.* More than once, I had thought, *is this what burnout feels like?* So there was guilt, too, for daring to suspect I was experiencing a taste of burnout while still only a medical student.

I flopped down onto my couch and looked around, catching sight of the small shelf near my desk, a simple wooden plank atop which sat three objects: a fig, a tennis ball, and a small cigar box guitar.

Each object had arrived in my possession, either directly or indirectly, out of a patient's gesture of generosity or gratitude. It's uncommon to receive mementos from patients, and yet occasionally, it does happen. These objects have become more than what they are at face value – they are concrete reminders of the lasting impact I could have on patients, despite my relatively brief encounters with them. And suddenly, involuntarily, seeing these objects conjured up images of the patients from where they came.

The fig

I'd planted the fig tree almost 2 years ago in the little community garden behind my university student residence. When I went to see it in early-August, there were already a few figs, ripe and ready to be picked. It was still a young tree, bearing fruit exceptionally early, thanks to the balmy California weather, and the figs I picked were pleasantly warmed from the sun.

The patient who had given me the tree had been a patient I'd helped care for on the oncology service. His name was James and, over several weeks of his hospitalization I would come to learn, through afternoon hours spent with him, that he had been a professor of the classics. This excited me as I had studied the classics in college. Well, just Latin. Greek perpetually felt beyond my reach (to James' disappointment). Nonetheless, it was always nice to have an idiosyncratic, personal connection like that with a patient.

Because I was a medical student, I was not constrained to hurried interactions in the patient room made brief by my need to examine 10 other patients down the hallway. I could take my time to enjoy deep conversations, and James and I had many of them; he had a trove of knowledge about Roman literature and mythology (much of which was based on the superior Greek stuff, he liked to remind me), and our talks were a welcome respite as he went through cancer treatment.

But James's cancer wasn't going to go away. What he could hope for was to get well enough to go home, where he would still have to continue his palliative chemotherapy treatments. And occasionally, when this happened, I would make unofficial house visits on the weekends long after I had moved on to other clerkships. On what would turn out to be my last visit with him, James ambled out to his garden and pointed at a fig tree he had repotted a few weeks prior.

"I didn't believe I'd get the opportunity again to talk about the classics. It's what brings me the most joy, I think," he said as he gestured for me to take the terracotta pot. "Thank you. That's for you." I smiled, recognizing the significance of figs in the Greco-Roman world as a symbol of life and prosperity.

I planted the tree in the garden later that day. James died not long after that, but I think about him, and fondly recall the many discussions we had, whenever I pass the fig tree on my way home.

The tennis ball

Drew was an athlete, an avid tennis player. I met him when he was in recovery after a complicated spine surgery. Though confined to his bed, he'd have a tennis ball with him each time I went into

his room, and he'd handle it as often as he could – passing it back and forth between his hands, tossing it a few feet up in the air before catching it.

“When I get well enough, we're going to play tennis,” he would tell me, usually before throwing the ball to me. Sometimes, during my visits, Drew would be taciturn, seemingly contented with our impromptu games of catch. I'd be seated in the chair, pushed a bit further than normal from the bed. It was as if, in the going back and forth – the ball from him to me, me to him – he could transport himself to the tennis court, the place where he wished he could be.

Drew's medical team warned that that it would be a very long time before he'd recover enough to play tennis again, and even longer, if ever, before he could perform at his prior level. When he was finally well enough to be discharged, Drew gave me the ball that we had played with.

“Don't lose that ball,” Drew said. “Expect a call from me soon. We're going to play.”

I thanked him and gave a sheepish admission that my abilities in tennis left much to be desired. He chuckled, “well then, according to the doctors, we should be a great match.”

And I did hold onto the ball; I put it up on the shelf and there it remained until much later, a year after I planted the fig tree, when I got a call. Drew had found my information through the hospital and tracked me down: did I still have the ball, was I ready to play tennis?

I was happy to hear his voice, and thrilled that we were finally, actually going to play the game that had never left Drew's mind whenever I saw him in recovery. As promised, I was truly terrible at tennis, but Drew didn't care. He emanated joy out on the court. It was a remarkable thing to see, this man who, the last time I'd seen him, had been weak and required assistance just to get out of the hospital bed.

“I'm glad we finally got to play,” he said. “That was the main thing that kept me motivated, both during my hospitalization and rehab since then.” He grinned and handed me the ball back. “That's yours.”

The tennis ball on my shelf would soon be joined by another item.

The cigar box guitar

Next to the tennis ball is a cigar box guitar, made by Jerome, a patient who faced heart, and later, kidney failure. Jerome and I

both played guitar, and he also made his own cigar box guitars. These guitars, he patiently explained to me once, emerged during the mid-1800s and became popular in the Mississippi Delta, where their history is entwined with the development of the earliest blues music. That they were made from simple components – a cigar box, broom handle, and wires – meant music could be played and enjoyed by anyone, not just those with the means to afford a “real” guitar.

Jerome was in and out of the hospital frequently. Even though, after the first month of our acquaintance, I was no longer on the service that allowed me to participate directly in his care, I'd still stop by his room whenever I found out he had been admitted. Sometime between his second and third hospitalizations, he made me my very own cigar box guitar, and in subsequent instances when I visited I'd be sure to bring the guitar. Always ready with his, we'd improvise together around blues and jazz riffs. It was pure delight, and anyone who passed by his room when we were playing would pause for a moment, maybe more, out of an initial puzzlement that would morph into joy once they peered into the room. Jerome was an excellent musician; you could see the way he lost himself in the music, carried elsewhere, away from the hospital and the body that was failing gradually. He'd be emanating a renewed energy by the end of it. After each of our jam sessions, he would date the back of the guitar.

Jerome died a few months ago. Though there would be no more dates added to the list of four on the back of my guitar, in his spidery handwriting, I still play the instrument. And like the tennis ball and the figs from the tree, when I pick up the guitar, I feel an overwhelming gratitude toward the moments I shared with James, Drew, and Jerome. Their health might not have always turned out the way they had hoped, but these objects were a reaffirmation that the care we healthcare workers provide – however that may manifest – is never futile, and that opportunities abound.

Back in my living room, I glanced at my mementos one final time before dimming the lights and preparing for bed. Tomorrow was another day of opportunities.

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