

ART IN MEDICINE

Writer's Block

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To the "patient's occupation" question on the registration form, Shelley J. Spencer answered "writer." He was 58 years old, and the reason he gave for drinking a fifth of sherry and smoking two packs of cigarettes a day was: "They stimulate creative juices, free up thoughts from the subconscious, thoughts worthy of a writer's consideration." But it was soon clear to me, and probably to Shelley too, that the years of wrestling with writer's block had taken a heavy toll, and the time remaining for him to write must now be calculated in months, or weeks.

Initially, I thought Shelley might be English. He spoke with clarity, wit, and with what I thought might be an Oxford accent. If he was an English writer, his clothes suggested that he was having a tough time of it. They were clean all right, but cheap and worn thin. His Hush Puppies were frayed at the seams, their soles beginning to loosen at the toes. Sitting in the wooden chair by the side of my cluttered desk, he appeared pudgy; his face was friendly, round, and red, and his hair—sparse, black, and lightly greased—was combed straight back from a high forehead. But the first sign shaping my diagnosis was the faint yellow tinge to his sclera; except for the history of sherry, I would have missed it. The second sign was his coughing up a teaspoon of blood-flecked sputum. Yet he remained relaxed, even jovial, in a "what will be, will be" sort of way, as he shared bits and pieces of his story.

Yes, he had been coughing for 2 months, especially at night. It was the specks of blood that concerned him. This never happened before. He hadn't lost weight. He didn't have fever or sweats. He'd never been sick before. "No, no, I'm not English. I was born in Philadelphia. But I was named after the poet." His father, mother, and older sister were dead. He never married. No, he hadn't gone to college, but had worked 25 years as a proofreader for a large publishing house in New York. Three years ago he moved to Seattle, a city he loved, to write his book.

The physical exam yielded further evidence—crackling breath sounds below the right clavicle, an enlarged liver with a soft, nontender edge—for what I feared: bronchogenic carcinoma and a fat-engorged liver. There were no enlarged lymph nodes or secondary signs of cirrhosis. He had bad teeth, fissures at the corners of his mouth, and the fingers of the left hand were brown with nicotine.

"What are you thinking, Doctor?"

"I'm not sure, Shelley. We'll need to get a chest x-ray and some blood tests. After the technician draws blood, you can dress and take this slip down to Radiology on the sixth floor."

"I'd like to know as soon as possible, Doctor."

"Well, if you have the time now, there's a cafeteria on the fourth floor where you can have a cup of coffee or a bite to eat. I'll see you back here in an hour and a half."

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"If this turns out to be a killer, you need to know I want to die on my getaway beach in Denmark."

The chest x-ray showed a mass lesion just above and anterior to the right hilar area, approximately 4.5 × 5 cm. The blood tests revealed damage to the liver, but a scan was negative for metastatic disease.

Within 3 weeks of his initial visit, Shelley had the upper lobe of his right lung removed. The pathology report was grim: moderately differentiated adenocarcinoma extending to, but not invading, the pleura. Six of eight perihilar lymph nodes contained metastatic adenocarcinoma. What to do?

Like so many cancers, there is a terrible sameness about the course metastatic adenocarcinomas run in their relentless trudge toward death. But the patients are amazingly different and interesting, at times barely believable, at times unbearably beautiful. For me, patients keep the practice of medicine fresh and exciting. Shelley has no family, he is writing a book, he says. Sherry and cigarettes help him write. He prefers dying on a beach in Denmark. Well, now was the time to advise him to get a one-way fare. But I didn't.

Instead, with each visit I inquired about his writing and reading. Had he been published? "I've had a few book reviews in *The New York Times*," he answered, "but not under my name. I wrote them for reviewers who had gotten smashed. A few poems and short stories. I keep a journal." Who was his favorite author? "Samuel Johnson." The eighteenth century writer? "Yes." Why Johnson? "His wisdom and compassion. Who else advised giving beggars money even though they spend it on drink? He thought, if you push a man down in the gutter, you must expect him to enjoy the pleasures of the gutter rather than have no pleasures at all." And with the answer to each inquiry, Shelley cast a smile that caught me in the throat.

Shelley never made it to Denmark, to that special beach. He did well for the first 4 months following surgery. He was able to stay in his modest and tastefully furnished apartment on Capital Hill. Friends, one each from New York, San Francisco, and Copenhagen, took turns staying with him. During this time, he tolerated one course of chemotherapy. Then the going got rough—chest pain, back pain, increased coughing, pneumonia. We brought him back into the hospital to study the situation. Shelley didn't want more chemotherapy, nor any radiation. Arrangements were made for Hospice, with the help of his friends, to provide for his care at home. Shelley lived another 2 months and kept a stiff upper lip until the end.

But what about the book, the book Shelley moved to Seattle to write? Several times during the course of his care I made discreet inquiries regarding the book. How was it coming? The subject? Shelley would only answer, "I'll show it to you in good time, Doctor." And he did. One morning during his last hospitalization, he proudly handed it to me. It was a beautiful book, hand-bound, a burgundy leather cover with the title, *Being in Seattle*, and "by Shelley J. Spencer" embossed in gold. Before I opened it, he looked up with his winsome smile and said, "You know, Doctor, 'being' means more than just being here." I assured him I understood. Still, I was astonished to find that the book consisted of about 500 rough, unnumbered, and empty pages.

Was the message in the title, or had he set the plowshare too deep? Or had Shelley succumbed to his battle with "writer's block"? Confused, I thanked him for showing me the book, then hurriedly took leave to finish morning rounds. Even years later, I am certain of only one thing: I have never once thought of Shelley J. Spencer as an imposter.