

The Fighter

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In this true story, an Eritrean man's wife rapidly becomes unconscious, and he tenaciously pursues a diagnosis and procures treatment. His personal struggle, juxtaposed with reflection on Eritrea's 30-year fight for independence from Ethiopia, highlights the power of persistence in the face of some of the most adverse conditions in the world.

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Simret lay in the hospital bed—listless but not alone. Two flies darted in turn at her damp face, and her husband brushed them away with military precision. He had wrapped her in white linens “to keep the wind away” even though the window was closed and the air stifling. In this part of Africa, “wind” is synonymous with pneumonia; opening the window of a crowded bus is a strict violation of social etiquette.

I met Simret and her husband Berekhet while volunteering at a hospital in the tiny East African country of Eritrea. A former Italian colony, the United Nations federated Eritrea with Ethiopia after Italy's defeat in World War II. There ensued a 30-year guerilla war for independence, and in 1991, Eritrea claimed victory.

A Cuban physician ran the ward, and Simret was the only patient in her second-class hospital room, which would normally have been shared with another patient. She was neither poor enough to be relegated to the third class, with three cohabiting patients and public toilet, nor rich enough to afford the trappings of the first class.

I paused in the hallway and peered inside. The wire mesh of her cot sunk towards the concrete floor under the load of her plump body. Berekhet had taken a break from his fly-swatting station and was hunched forward on the wooden chair at her bedside, pressing his forehead to her hand, and whispering softly. When he sat up a moment later, I knocked and entered.

They had just returned from America, he explained, where they had been reunited with their daughter after many years. Their life in Eritrea had not been terrible, but in the name of opportunity their daughter had paid to be smuggled across the border into Sudan. She obtained a passport in Khartoum, and with the assistance of family living abroad made her way to the United States. She immediately went to work in a small factory, saving every cent for the day that she could fly her parents to visit. In broken English Berekhet described how nothing could

compare to the delight of seeing their daughter—alive and well—standing outside customs in the airport in America. Their joy had been made complete.

The month in America had passed quickly, and upon returning to Eritrea, Simret arranged with a local dentist to have dentures made. In preparation, she underwent successive days of tooth extraction from her upper palate. Ten days later, she developed a severe headache. Simret was 48 years old; although she had never had any medical problems, the war for independence had taught her to endure suffering. “Let's wait and see,” Berekhet suggested. “Perhaps it's the dental work.”

But Simret's headache only worsened. After more than a week elapsed, Berekhet took her to the hospital. The country's only CT scanner had broken months earlier, so the admitting physician ordered an MRI, and Berekhet promptly paid the \$80 fee. “The MRI is appointed for 12 days from now,” the scheduler declared. There was no room for negotiating the date; Simret had to wait. As time slipped by, she became increasingly confused. Within 48 hours she lost consciousness. Her physician transferred her for closer monitoring to the national referral hospital, where I was working.

Since independence, the Eritrean government has prioritized the development of an elaborate system of local, regional, and national hospitals. The national referral hospital serves as Eritrea's premier teaching hospital and shares its campus with the country's only medical school. The first class of students graduated in December 2009, and residency programs in pediatrics, general surgery, and obstetrics/gynecology are in full swing. Eritrea's three internists, small cadre of pediatricians and general practitioners, and growing number of residents frequently partner with physicians from allied countries to serve a population of 4 million.

Examining Simret, I made mental notes: *Diaphoretic and non-responsive. No spontaneous movements. Withdraws to deep pain only. Right pupil pinpoint and nonreactive. Left pupil minimally reactive to light. All reflexes of upper and lower extremities diminished (absent?); Babinski upgoing bilaterally. No clonus.*

“Please Dr. Lydia!” pleaded Berekhet. “The MRI is not scheduled for another week. What can I do?” His dark brown eyes were intense, hopeful.

I did not know what to do. My Cuban colleague suggested that Berekhet go over to the MRI center and speak with the radiologist: “Tell him it's an emergency, and ask him to schedule it sooner.” It was Tuesday afternoon, Simret's fifth day of total unresponsiveness.

The next morning, clinic was frantic. Patients were clamoring to be seen. Every time my nurse opened the exam room door to call the next patient, a dozen or so attempted to push their way into the room. Each case, it seemed, was urgent; none could wait. Twice in two hours there was a loud knock on the door with a man's voice asking for Dr. Lydia. Twice my nurse sent him

away. The third time he knocked, I asked the nurse to let him through so that I could identify him. In walked Berekhet.

"Please! I cannot find the Cuban doctor on the ward, and I talked to the radiologist and he needs a letter with a special stamp in order to schedule the MRI sooner." *What tenacity he has!* I thought as I scribbled the letter. "You can get the stamp in Room 10," the nurse offered.

Two hours later, Berekhet, accompanied by his three sons, brought the MRI results. How he had managed to transfer his ailing wife from the main hospital to the MRI center across town and procure the results so quickly I could not say. And all of this over the mandatory two-hour Eritrean lunch break. Berekhet was a fighter among fighters, a man who had born witness to his people's 30-year struggle for independence. The victory had been no small feat: Eritrea had won despite a lack of international support and a population one-twentieth the size of her rival's, while Ethiopia had enjoyed the financial and political backing of the former Soviet Union. Berekhet had no intention of giving up now when the stakes were so high.

My first impulse was to ask for the radiologist's report, but with a quick glance at the film I knew that I had no need for a professional read. Simret had a massive intracranial bleed with midline shift and total effacement of the sulci on the left side: the left half of her brain was completely compressed. I sat father and sons down in my tiny outpatient examining room, and talked them through the film. "Even with surgery, she may not improve very much," I cautioned. "As you know, it has been more than two weeks since her headaches began." Secretly, I feared that she might already have herniated her brainstem.

"We believe her life is in God's hands," Berekhet said. "Please do whatever you can to try to save her." He paused and looked away, and added in a softer voice: "I just don't know what I'll tell my daughter in America."

The country's only neurosurgeon, from China, was notoriously difficult to track down. If we could reach him, I doubted that he would come to the hospital on a Wednesday evening to drain a hemorrhage, especially for a woman whose problem had begun so many days earlier. However, as I left the hospital that night, an Eritrean colleague had successfully reached him, and he had promised to see Simret right away. Berekhet did not leave her side.

I feared that I would greet death on Thursday morning. I could not find Simret anywhere. She was not in the medical ward. "Check the ICU," the ward nurse suggested, but the ICU nurse had no idea who I was asking about. Scrambling from room to room, I nearly collided with a visiting Italian surgeon. I asked if he had heard of her case. "Oh yes—I operated on her last night with the neurosurgeon."

"How is she?" The words raced out of my mouth.

"Oh, she did very well. Very well. Probably a ruptured aneurysm. She's recovering in the PACU."

The PACU—the postanesthesia care unit—was exactly where I found Simret, with a jury-rigged drain protruding from her left scalp; a plastic glove attached to the end of the drain collected drops of blood. A mere 12 hours after surgery, she was awake, alert, moving her arms and legs, and even speaking some English. Berekhet stood at his post, stroking the matted hair that remained after her preoperative shave the night before. "My daughter in America will be very happy," he exclaimed, "very, very happy!"

In a country where the so-called ex-fighters of the struggle for independence are regarded as national heroes and even celebrities, their tales of tenacity pervade all aspects of daily life. But while the war is over, the struggle continues each day as countless Eritreans fight against poverty, drought, and disease—and overcome.

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