

## **ELLIOT H. PHILIPSON, MD**

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## Listen to the sounds of life

ISTEN . . . Close your eyes and listen to the sounds around you! If you stopped what you were doing and closed your eyes, could you identify the others in the room or where you are?

I ask you this question because of my illness a year ago. At age 56 and almost never sick, I experienced an acute episode of diaphoresis. It wasn't hot outside, and I had no pain or shortness of breath. It was the first day of a short vacation to southern Arizona, and my older daughter asked me why I was so wet, while my younger daughter asked me why I was so white. With a growing feeling of gloom and doom, I asked my daughters to take me to the nearest emergency department. I didn't call 911, as I thought it must be something small and I didn't need an ambulance! But why was I white and wet—could I be hypotensive? "Don't stop for the red lights," I said to my daughter as I found myself wondering why I felt like I had taken a shower with my clothes on. "My arm doesn't hurt, I have no chest pain, and I'm breathing fine," I mumbled to myself as I walked into the emergency department. After answering the preliminary nursing questions, I collapsed.

For the next 2 weeks, I was unconscious. When I woke up, I managed to extubate myself and tear my vocal cords. I found myself without my voice, or at least the voice I was used to. I wasn't sure where I was except that I had a lot of tubes in places where I have often placed them in some of my very sick patients. I thought I heard the voices of my chairman and chief of staff who were in the hospital to rescue me. In reality, they were 2,000 miles away working in Ohio and I had never spoken to them. I fired all of my nurses, as they weren't helping me. My confusion was obvious. The pain wasn't too bad, but I had trouble moving my body since I hadn't moved

for so long. My neck didn't seem strong enough to hold up my head. Walking was very difficult and I could sleep only with medication. I learned that I had survived not only the cardiac lesion often called the "widow maker," a severely blocked left main coronary artery, but also emergency bypass surgery, cardiac arrest, and pulmonary embolism. Slowly, I recovered with the help of a great team of doctors and nurses and my family.

The next several months were ones of rehabilitation and recovery. Cardiac rehab was extremely helpful, and I thank all the staff who put up with all of my aches and guestions. After a few months, I returned to work and continued my recovery. My daily medications now number 10, up from only one medication previously. I don't know how patients, in particular older patients, can take more than one medicine a day! Yes, there are those plastic containers with the letters on the covers to keep the days straight and organized, but the prescriptions always seem to run out at different times. According to my health plan, I can only get enough for 30 days at any one time.

My cardiologist allowed traveling, but I was always worried that another episode would occur while I was out of town. So I didn't travel much and always had a cell phone on my hip. Well, it's now 1 year later, and I finally returned to southern Arizona where I had felt so compromised. I planned a reunion of sorts with all of the staff that took care of me. There was one nurse, Lisa, who had befriended my wife and daughters. Lisa had come to work every day, even when she was not scheduled to be in the hospital. She had continuously answered questions and provided skilled intensive care, as the complications seemed to increase daily. I planned to see my cardiologist and surgeon as well. At a local

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restaurant, I was reintroduced to Lisa. I didn't remember her face but I recognized her voice immediately. It was so familiar to me that I was startled and began to have some thoughts or memories about what had happened to me during those 2 weeks when we were fighting for my life. Her voice was completely familiar, and I felt I knew her well. When I met the cardiologist again, he was only an unrecognizable face, but his voice was unforgettable. I knew him even though I would never have recognized him by sight. My conversations with my emergency health care providers a year later were very revealing. Listening to their voices brought back many clear memories, but most of all, their voices reconfirmed my belief that I was lucky to be alive now!

Anyone who reads this journal knows that life is precious. We've spent many years of our lives training to improve the health and welfare of our patients. All of us have patients with serious illnesses and diseases that lead to death. My near-death experience was brought back to me by my sense of hearing. Listening to Lisa's voice gave me the opportunity to remember and give thanks for all the loving care that I received, even though I had no visual recollection of Lisa or any of my providers.

So I ask you to close your eyes and *listen* to the sounds around you. Use your sense of hearing to tell you who is near you and what is happening while you listen. Go for a walk, stop, and breathe deep. I just had my annual ticker-tape parade in the woods of Ohio as the billions of leaves created a barrage of beautiful sounds in the air and on the ground. Where are you and who is with you when the sounds trigger a visual image? Even in the hospital, there are many sounds to hear and voices that should be heard. I often hear colleagues and friends say that we should take the time to "smell the roses." Do we use all of our senses in our lives? Maybe we should all take the time to "listen to the voices" and be thankful for the sounds that we can hear and treasure.

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