

Small Steps: from Doctor to Dearie

By Jack Lindy

1. My Cane (Jack)

My new cane was becoming an accepted part of me. It is made of strong, black metal and stands on a flat base with a shepherd's crook handle. It has four sturdy feet covered with rubber socks. It is good for reaching the extension cord under the piano. And also serves as a great make-believe weapon to meet my grandson Aaron's many imaginary swords. Oh, and of course, it helps enormously with balance. I think I'll call it Leon. I was proudly navigating my way down the corridor of my cardiologist's office (Dr. Earnest) when his medical assistant observing the scene from the back, said "don't rush, dearie, we'll go at your pace." Here I was speeding down the hall with my new cane and here was this twenty-something seeing my pathetic efforts and calling me "dearie."

Does this mean I have entered the "dearie" span of my life, the molting phase, when all past identities of dignity have dropped like the skin of a reptile? Have I already entered the next chapter — when people no longer think of me as "Doc", dad, professor., Captain, even Jack. Rather only one name captures my identity — "Dearie".

I had promised myself I would chronicle the small steps to “dearie”. Would this be a new adventure, a series of challenges to be confronted one at a time, a source of new insights about myself and others, or would it be a disarming disaster leaving me bitter and despairing? Time to begin writing before it is too late.

2. Hugs and good-byes (Tom)

I suppose you might date the start of my slipping into dearie when, one week, in September, 2021, two doctors gave me bad news. The first was Dr. Cautious research cardiologist at Indiana University The second was Dr. Fervent, She is the oncologist at University of Cincinnati, who was treating my malignant melanoma which now has spread to my lungs.

At the end of our visit Dr. Cautious, in a most unpredictable way hugged me with tears in her eyes. My cardiac amyloidosis was progressing. Clearly she did not expect to see me in six months when my next research protocol visit was due. Then Dr. Fervent informed me that I would have to stop treatment for the metastatic melanoma as it was worsening my heart failure. Again, unexpectedly I found a lovely professional woman hugging me and in tears. Soon after, my cardiologist, Dr. Earnest, explained the severity of my shortness of breath meant I was now in the “final stage” of my heart disease. My wife and he spoke of hospice and palliative care. I tried to be a good team player supporting these options as they would soon become necessary. but maybe I’m good for a few decent months. This juncture was now the third time. Do I prepare for death or do I try to keep on living. Only this time I felt weary of this predicament. I thought of my wife and adult children who have been so attentive during the many years of my

decline. I told them they should get together and write a book. I already had a title for it: "vigil fatigue".

3. Word Loss (Jack)

It began with forgetting names, names of people and books and places and gadgets. Then I began to forget particular words as though vocabulary itself was slipping — not good for someone whose life revolved around words and their meaning. I intended to say to Joanne “I will work on our finances,” but what came out instead, was “ you know, that addition and subtraction stuff I do.”

She said, “I’ll meet you at that (pause) “going up place””

I said, “you mean the escalator?” Of course we were both wrong as the correct word was “staircase.” We laughed. Often we play a game of charades until we stumble on the right word. We try not to blame ourselves for forgetting or let the misstep interfere with the meaning of our communication. So many people beat up on themselves or their partners or the Almighty for forgetting.

As I experience these inevitable shortcomings, I often recall my older brother Phil’s aphorism. “Jack, there is no problem with aging that you can’t solve by lowering your expectations.”

But even with lowered expectations word loss can target an essential part of who you are. How I listen is central to my identity. I pride myself on “dog-earing” a stray comment as something we need to return to later. But when I forget that comment I am lost. I am no longer the careful listener I thought I was.

Even worse, I laugh, pretending word loss does not bother me; it does.

4 . Lindy Shuffle (Tom)

My brother Bob's Parkinson's Disease was advanced. He shuffled as he tried to walk.

"Take longer strides" nurse Ratchet said. "Stand straight upright with your pelvis forward and chin back," she instructed. "Your stooped posture makes you look and feel like an invalid."

Bob tried all these suggestions but he fell.

"What happened?" I asked.

Bob paused, "Well I was getting up from my chair minding my own business when the floor suddenly came up and hit me in the face."

Like my brother, little by little I am acquiring the Lindy shuffle. To me, it is all very reasonable. As balance becomes unreliable, I widen my gait, and reduce the length of each step. I reach out to touch the wall to steady myself. I need to look down to see where my feet strike the ground. The dark has become an enemy as I am no longer sure of where I am in space. While I do not have Parkinson's Disease, I seem to be following in my brother's footsteps. When will the floor come up and strike me in the face?

5. Balance (Tom)

The event came sooner than expected. I was comfortably seated in my recliner in the living room when my bladder informed me there was no time to lose before I got to the bathroom. I leaned forward over the chair, then, with my weight on my heels, I pushed myself up slowly. Form excellent.

But this time just as I became upright I coughed, not once, but multiple times. I needed to hold on to something to retain my balance. I reached for the arm rest of the large deep-cushioned chair in front of me. That was a mistake. I forgot that the chair swiveled. Suddenly, I felt weightless in air. My body remembered Mr. Charles' instructions. He was our fifth grade football coach. You recover a fumbled football by falling beyond the ball on your side. "Roll," he would say, meaning land on your shoulder and side, "then roll again" meaning grasp the football and cling it to your body as you continue to roll. My body followed its old instructions. The picture wasn't pretty but the crash was in good football form. Then suddenly my neck snapped backwards. My skull found and struck the walnut corner of the piano leg with a loud unpleasant thud. Where was my football helmet when I needed it? Soon my scalp was gushing blood. I did not lose consciousness; nothing was broken; there was only a bloody mess to clean up and a trip to Urgent Care for a suitable dressing.

The doctor there, an experienced surgeon, and I chatted. We reminisced about the many hours we spent practicing our suturing technique as medical students.

“We don’t use sutures on a wound like this any more,” he explained. “Now we have superglue.” Talk about feeling out of date!

Good football form notwithstanding, when you are 84, falling is no fun.

6. Blinders (Jack)

Joanne and I were seated for breakfast at Wild Eggs, an old favorite of ours, and the first place we have ventured to since COVID struck. Only a few tables were occupied. The waitress seemed to be taking her time before she took our order. She didn't wear a mask. I was starving, the waffle and grits and coffee already salivating in my mouth. She disappeared and twelve long minutes ensued. My agitation began. The ice water was gone; the borborigmy in my stomach clamored to be satiated. My next step would be to walk over to the manager and give her a piece of my mind. My muscles tensed as I was about to make a scene. I would have my coffee immediately OR ELSE!

Joanne read my mind. She placed her hand lovingly and firmly on my arm. The gesture said, Jack, settle down, this is not the end of the world. This is neither the time nor place for an unruly temper tantrum. I started to reject her overture, but then felt a warm comfort pass through me. The urgency passed.

Thirty seconds later the waitress returned with two freshly brewed pots of my favorite coffee.

Later, I was able to reflect on my near social gaff. My first explanation for such urgency to gratify my stomach's signals came from my doctor thinking. It was as if the capacity to delay gratification had disappeared. Neurologically, I picture this as a fraying of the myelin sheaths that surround my nerves. Normally they function like a resistor guarding an electrical impulse. They allow us to inhibit impulses that

civilization says should be avoided. But my situation, like the infant's distress at experiencing an empty stomach (the infant's nerves are yet to be covered in myelin), my body insists that my needs be satisfied NOW.

Joanne explained another source for my near temper tantrum. It is the capacity to step back and consider context. In this case it had not dawned on me that the waitress, rather than offer stale coffee, was waiting for a new pot of decaffeinated coffee to brew — hence, a good reason for the delay. It was as if I had blinders on.

Blinders keep horses' eyes fixed on the goal ahead. It seems a useful metaphor to capture the older adult's effort to adapt to his tendency to be easily distracted. Keeping one's eyes only on the target ahead, helps give direction at a time when the "noise" of nuance, paradox, ambivalence threatens to confuse. It also brings certainty without a wider view.

It seems to me a challenge of aging is to know when to put the blinders on, and when to take them off. Too much in either direction seems to lead to disaster.

7. Venerable Elder (Tom)

We elders are often turned to for words of wisdom..

I notice that under these circumstances older folk risk being either pithy or loquacious. The pithy group seems to come up with just the right aphorism to meet the occasion.

Other folk, given the opportunity of speaking as the venerable elder, cannot stop talking, although the listeners have heard the words forty times before. They often seem stuck at a point of rectifying a long past injury. Blissfully unaware of the absence of a listening audience, they simply drone on. Family, in this instance, struggle to find a way of re-directing attention elsewhere without injuring the feelings of the speaker.

Now that I fit the category of venerable elder, I find myself faced with such speaking opportunities. So far, I think I fall on the briefer side. I had to cut a one page toast at my son's marriage to five or six words when I suddenly found myself gasping for breath. On the spot I instructed the Greek guests to say "mazel tov" and the Jewish guests to say "syncharatiria", then waved my arms like an orchestra leader, so they did all the speaking. I sat down, exhausted. I think the toast was better than the longer version.

The medical contribution to my brevity of speech surprised me. It is heart failure. As I am sure you have noticed you can't speak if you

don't have the breath to carry out the task. And shortness of breath is a major symptom in heart failure.

But I suspect brevity of speech applies to more elderly people than just those with heart failure. I wonder if, for many of us, a favorite aphorism doesn't make a difficult problem simple. With blinders on and unable to widen our frame of reference, we might cover the loss of nuance, of complexity and paradox with a several word aphorism. At least we can remember that. I wonder, is it not the pithy one-liner, so revered by others, also a form of coping with the plagues of old age, word loss, impulsivity, and blinders rather than the wisdom we like to attribute to it.

Regarding the loquacious elder, I suspect their enjoying being the center of attention is not new. Faced with the invitation to speak, they enjoy the spotlight. Also, they have lost the capacity to read cues from their audience that they have spoken too long. They don't want to — and have forgotten how to — stop.

Passover is coming and I don't know yet what I will say, perhaps a midrash on Moses watching his people as they disappear into the promised land (a midrash is an invented story filling a gap in scriptural narrative) — but I know, I know, keep it short, Jack.

8. Touch (Jack)

Touch is such an important part of intimacy. There are the many moments of handholding, shoulder touching, gentle massages from our partner, that make us feel wanted and alive. From time to time, sex helps cement this connection, remind us of the passion that accompanies our unique attachment. But recent months make maneuvering for sex a problem. In bed my heart failure demands that my head must be above my heart, so we have dual mattresses with each side capable of rising like a hospital bed. I am currently at an angle of about 12 degrees, while Joanne's side is flat. I look towards her face and see the window. She looks towards me and sees my mattress. As fluid accumulates in my lung, I cannot lie on my side or stomach at all — well, I can't do it and breathe at the same time. Also, while sexual drive is still present, it is only a fraction of what it used to be. I don't know if the offender is disease, a side-effect of medication or aging (Doctors have said all three). But we continue to experiment, finding new ways to remind our bodies that we love each other.

9. Drift towards paranoia (Tom)

My grandma (G-G) lived with us when I was a child. We shared the same room. She was always very proper about modesty, so changed clothes with her back to me, protected by the half shut closet door. Nonetheless the angle of the full size mirror on the closet door gave me a full frontal view of her nudity. Not something my ten year old self found in any way enticing. GG was my friend and ally in family matters. But GG, unfortunately drifted towards paranoia. She misplaced jewelry, said she remembered exactly where she left it, couldn't find it, and accused others (not me) of taking it. She ruminated over a word or phrase my mother had used. "It is a hard time, now" mother said (referring primarily to her roles in the work world and as widow). But by evening, the phrase had morphed to mean only that mother no longer wanted GG in the house. Mom and I assured GG she was wrong. Nothing would alter her conviction. Soon after, she would pack her bags and be off to Tennessee.

I believe several different elements in the steps towards aging that we have already spoken of combine to make this a dangerous drift for many. Memory impairment, loss of a symbol of personal identity, a newly found (and false) sense of certainty, and discomfort at being cared for — all contribute.

I can't find my cane. I remember exactly where I left it. No one can alter my conviction. Someone must have moved it. I can't find my

wallet. I remember exactly where I put it. It has disappeared. It's not the money, rather it is a composite place that affirms I am who I am. Someone must have moved it. I am increasingly helpless: to prepare my food, to take out the trash, to fold the laundry. I feel guilty about these shortcomings, and feel I am a burden on Joanne — all the symptoms of a drift towards paranoia like GG. But, through a toss of the DNA dice, I tend to be an optimistic person. Sooner or later my cane reappears, my wallet turns up in some special place I put it to be safe. Joanne assures me my inability to help with chores is not a choice but a result of failing health. So these humps are thoughts and feelings that I can quickly dismiss. Yet I understand the drift towards paranoia, and feel empathy for those who get stuck in it, and those helpers who get blamed.

10. Dress Rehearsal (Jack)

So, this is where it will be. Spring Grove Cemetery. Many of the people here, will be the same, as we both spent our careers in the same psychiatric practice group.. I hug Judy, his widow. I hug Kathy and Gary and Jeff, his children. I approach the coffin. I touch it, slide my finger, almost lovingly, over the deep smooth dark wood. We were good friends for over fifty-five years. I remember our recent conversation after he recovered from a near death experience and woke up in the ICU at University Hospital.

“Bob,” I asked, given the special candor between us, “what was it like, the coming to after the coma?”

“Well, it was hard to put it all together, Jack. Everyone was running around. They looked like they were having a good time. I thought I was at a party. So I began singing, “Zippety do da zippety eh.”

As we were saying good-by he told me he was ready to die. I recall Bob’s gentle words, encouraging, self-effacing, humor. I recall his powerful forehead. And I remember that it was his low-key sense of humor that enabled me to turn the grime of my life into stories like these.

I realized I had been standing by Bob’s coffin for many minutes.

Silently and unexpectedly I asked him “what does it feels like inside the coffin?”

In the world of mystic communication between souls, I heard him say, "Jack, don't worry. It's comfortable in here."

11 Yankee Doodle (Tom)

“I miss Bob and his sense of humor,” I said to Joanne, slumping into my Eeyor self.

“I do too,” confided Joanne. “Why don’t you get back to your writing? You will feel better,” she suggested.

I paused, who wants to read When the Lindy shuffle becomes an upright crawl?, or Sleeping is the best part of the day? In the past, writing brought me pleasure, but now these topics do not sound funny or interesting.

“Maybe it is time to stop this memoir,” I announced..

“Nonsense,” she said. “You haven’t written anything about the great stuff you have been doing in the midst of all this: like your cantata, You don’t give yourself enough credit for what you have accomplished in all of this. That’s what the kids will remember, how you didn’t let this get you down. You know, it’s okay to brag a little.””

“It’s the Yankee Doodle complex,” I blurted out, vaguely aware that my response made no sense. Yankee Doodle was the diner at Yale College, friendly oasis where I snacked after a night spent in the stacks. I still wear a sweatshirt with the icon from the restaurant and the name of the city, New Haven. I do not wear any sweater with the name “Yale” on it.

I can trace two roots of this odd habit. The first was when I was about to go off to my first semester at college. My three older brothers (+7 to +11) gathered around me, "Jack, it's okay that you are going to Yale,, but if you come back a (stuck-up) "yalie", we'll beat the shit out of you." It was a family value. It was okay to excel, even expected, but it was prohibited to brag about it. I knew the family value, and promised I wouldn't become a "Yalie".

The second root was the zeitgeist at Yale itself. When asked where we went to school, we learned to say, "New Haven", not Yale, that was bragging. The task was to fit in, not to stand out. Our haircuts were identical; our clothes the same; even our shoes had the same shabby look to them. In fact, the word "shoe" came to be Yale talk for what the next decade would call "cool"

12. Jack's Cantata (Jack)

Joanne is right. There is enough room between the insults of aging, and illness to savor special moments that make life during this phase not only worthwhile, but even joyful. And one of those occurred at the Museum Center, October 24, 2021.

This is the story of an 82 year-old with the musical knowledge of a 15 year-old who was introduced to a young Portuguese composer (Goncalo Lourenco). With his teaching and arranging skills, I wrote and he arranged a chamber orchestra cantata as a memorial for those killed at the Tree of Life Synagogue in 2018. It was a composition that brought together my work with survivors of disaster, a dormant musical talent, and my identity as a Jew.

Each Wednesday morning Goncalo and I worked on 12-16 bars of music via Skype. I would write the music for piano in longhand; he would transcribe the music into Finale software, then point out where the music was B-O-R-I-N-G. At times he would challenge me, "Jack, why does the music suddenly S-T-O-P? I would revise the passage, and take on an additional 12-16 bars of music for my next "class". In time I acquired Finale software and taught myself to use it.

At some point we decided to arrange the piece for contemporary chamber orchestra, using the instruments the French composer Meussier had selected because they were the only ones available to him

in the concentration camp. Ted Nelson and the Concert:Nova chamber group agreed to perform the piece.

To make the music visceral I sought the advice of survivors of the worst episode of anti-Semitic action in U.S. history

That I, now age 84, was premiering an original musical composition, and that the chamber orchestra performing it would be the high quality musicians of Concert:Nova (all member of the Cincinnati Symphony), was nothing short of a miracle.

The moment I wish to describe was at the conclusion of the piece. The final movement, *Graveside*, is somber, the tonality a mix of Hebraic mourning chant and Scriavan atonality. The end of the piece is quiet almost ethereal. There was silence in the hall. I felt the audience momentarily joined with survivors of the Tree of Life Synagogue killings in their grief. Then the audience started applauding —enthusiastically. They insisted I acknowledge their praise. Seated in the second row, I was concentrating on all I would need to coordinate to turn to face the audience. This maneuver a year ago, would have been automatic. But now it was a series of arduous tasks: rise from my seat, gain balance, then, while holding the seat in front of me with my left hand, rotate my right foot like a slowly turning compass to face the crowd. Their enthusiasm nearly knocked me over. The audience was standing and cheering – hey, they were mostly family or friends.

Now over my left shoulder in my peripheral vision I noticed movement — members of the orchestra were applauding with their instruments. Briefly I glimpsed their faces. They meant it. For a brief moment they were recognizing me as one of them, a musician among

musicians. They were acknowledging my work. What a thrill. even if only for one evening. In my final years while I had been losing so many old roles, I had earned a new role as composer, an ambition deferred from childhood, one I thought this life was never going to see. The vapors from that moment filled my lungs with fresh oxygen for weeks.

13. My Booger and Me (Tom)

As mucosal exudate dries, it forms a solid substance on the inner wall of the nostril. When large segments of this substance break off we sneeze in order to clear the nostril. Adults use handkerchiefs or Kleenex. Children prefer fingers and call them — boogers.

How this relates to my most recent onslaught of radiation (a “quad shot” of four intense treatments in two consecutive days) is the gist of this story. I now sported a soft golf ball sized cancer in my cheek and recently felt powerful electric shocks pummel my face with pain. Radiation was going to help.

One of the things your oncologist chooses not to emphasize, when you have cancer in the head or neck, is that in order to zap you properly your head must be absolutely still, and therefore they make a plastic mask which will pin your head tightly to the examining table in just the right position. You can't move even if you wanted to.

Technicians do this by mashing your head to the table via four layers of plastic mesh. one pressing down more powerfully than the previous. Then they clamp down all layers to the radiation table.. You cannot move.

The central moment (or better, moments) in this story occurred during the final fitting of the mask, a procedure where they also move the giant radiation emitters into the necessary position they will need to occupy during the actual treatments. I should have realized that my

right nostril lacks cartilage and collapses easily. So, as the four layers of the mask pinned me more and more firmly to the table, I became aware that only one nostril was working. Five minutes into the procedure a booger broke off and flapped in the wind of my free nostril like a broken valve. If the booger closed the nostril, I could not breathe. If it remained in the open position I could stay alive. Never before have I concentrated so intensely on a booger! My life depended on it. The procedure went on — and on — and on. Machines whirred over my head, from this angle and that angle, while my booger dangled in the wind. Twenty minutes, the technician confided. But fortunately before that time I found a way to wiggle my nose, just a tiny bit. My otherwise trapped nostril opened. There was another way to breathe. Never again will I underestimate the importance of the booger.

14. She Didn't Call Me Dearie

I survived the quad shot, barely. It was Sunday, a beautiful day for an outing. Joanne was on it in a minute and soon we were driving to Augusta Kentucky. We stopped for lunch. My cane Leon and I moved very, very slowly. I should have taken the wheelchair. I thought during that long trek to cross the street. Who is this guy, always out of breath, taking baby steps? He is no longer a doctor. He no longer drives. He can't count on his memory. He can't manage his own finances; he doesn't trust his own judgment.

Who cares, the General Store is right over there and has the best catfish on the river. There is even an outdoor table for two.

Chipper, a high spirited 17 year old girl, in T shirt and shorts took our order. My newly developed lip drop made my speech unintelligible so Joanne put in my order. I usually banter with waitresses, especially attractive ones, but today, the task was simply to tuck the napkin in at my neck, get the food into my mouth, chew it sufficiently and swallow, without making a mess or wearing myself out.

Chipper came to see if we were finished.

"Anything else I can get for you?"

I stammered, "ice water, please."

Chipper flipped on her heels, and called out, "Comin' right up, Baby."

Baby, I wasn't expecting that. I am told "baby" is an endearing name in Kentucky. It wasn't Dearie, but it felt like that fantasied moment from the beginning of these essays., the one where I have molted into my new identity, and the nurse of my imagination would finally call me "Dearie".

In my best Eeyor voice I explained all this to Joanne on the ride home: how I was now a doddering 125 lb scarecrow who could no longer walk, no longer drive, no longer manage our finances. My mind no longer worked the way it used to. Like it or not I am the "Dearie" I imagined at the beginning of this chronicle.

She gently touched my arm.

But, darn it, I survived this decline with some equanimity. I deserve something for that. What was it? Then it came to me. — I expected one last diploma.

Of course Eeyor's assessment is not complete. I am no longer doctor nor professor, but I am more Dad than ever, and now Poppa to four new grandchildren I thought I would never see. I can no longer play the piano nor compose but I can enjoy listening. My mind reviewed the encounter with Chipper. The way she shifted weight on her hip, and the tone of "baby". There was something alive in the interchange.

True, I have come to the end of this story. But who knows what's next?

