

# Help Less

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Through dusty streets and crowded lanes, I wield my way, with but a crumpled piece of paper for a guide. There are no street signs here, only bare, rusted poles to serve reminder of a time when the imposing brick houses of sahibs lined paved streets that bore the names of India's famous sons. The bricks have fallen. In their place sit thatched huts, vinyl tents, and the odd enclosure, its wall smoothed with mud.

Squinting in the haze-filtered sunlight, I unfold the piece of paper. "Turn right at the mosque, left at the blind beggar's spot, then right at the pink tent where the pregnant woman sits. Look to your left—it's the house with the red flag." In wonderment at the conviction of these seemingly dubious directions, I find myself before the pink tent in question. To my relief, the pregnant woman indeed peeps out of the flapping tent of vinyl, her gravid abdomen easily pushing aside the flimsy entrance to her abode. I smile at her distractedly and position myself to locate my ultimate destination. I gaze into the distance for a long while, only to be met by a jagged horizon of decrepit lodgings interrupted by grime-stained high-rises.

Although all the landmarks have been easy to find, the house with the red flag eludes me. I decide to walk left, hoping to come across the house, but the futility of my action quickly sinks in. Daylight is fading and I have a flight to catch later tonight. A few bystanders scrutinize the instructions, more out of courtesy than an ability to assist, as for the umpteenth time I rue the disorganization that challenges every aspect of life in Calcutta. The American nurse who determined that a physician must see the girl should have accompanied me to the slum. And where were the municipal officers whose charge it is to maintain street sanitation and signage? Why were the lodgings allowed to proliferate in such a haphazard manner? And if the girl needed a doctor so urgently, why wasn't she at the public hospital? I possess all the answers to my ranting. The nurse has been sitting since dawn with a woman on the street gravely ill with malaria. The municipal officers who are not entangled in a web of bureaucracy have more pressing duties than overseeing such indulgences as the naming of streets. And the girl, a slum-dweller, is not necessarily served better by a public hospital than by her own dedicated family. I will have to find her house and find it soon.

I make my way back to the pink tent whose front flaps in a soft breeze and reposition myself to scour the horizon again for the house with the red flag. I turn around to a gentle tap on my shoulder. The pregnant woman is looking at me with concern.

"Doctor?"

Yes, I nod eagerly, disappointed that she speaks in a tongue different from my own. I strain to remember the words in Bengali for a "sick girl." I come up with the words for "fever" and "child."

"*Jore chele?*" I plead. Dusk has fallen rapidly and the air is filled with the clamor of birds heading home.

"*Aah, hamare saath ao.*" She smiles, pleased with her own efforts at mustering a few words of my mother tongue, Hindi, as she takes my hand. Immeasurably relieved by the simplicity of the solution, I thank her for her assistance.

"I used to see her going to the market every day," she says in broken Hindi. I cannot help but notice the somber tone that dismisses the prospect of the girl's survival. My mind plays with the possibilities. The nurse provided me with scant details apart from the information that the girl is being treated for tuberculosis and has deteriorated rapidly. Knowing that I was leaving India today, the nurse had implored me to see whether there is anything I can do for the girl.

Several minutes and many winding streets later, the woman and I arrive at the house in question. I find the red flag, fallen on its side, soiled. A harbinger of things to come? The pregnant woman scurries off into the dark leaving me to knock cautiously on the door. I stand before a modest hut with low concrete walls and a small verandah, cramped with a wooden stool, a bleating goat, and some clothes hung out to dry. The rickety wooden door creaks open and a harrowed face peers into the open.

"Yes?"

"Hello. I am the doctor."

"Doctor, I am Mohammed, father of Salma. Come in please."

He speaks slowly in Hindi, gratitude reflected on his face. "Pleased to meet you, Mohammed sahib," I smile.

I step on to a neatly kept piece of sack-cloth to wipe my dirty shoes, emerging into a small enclosure where three women sit washing their clothes for the day. They glance up but do not utter a word. The presence of a stranger in the house can only signify a serious matter—they do not wish to intrude. Slipping off my shoes, I follow Mohammed into a single room.

A naked, worn lightbulb suspended from the cracked ceiling casts a dim shadow in the small, uncurtained room, its windowsill piled with goods. I note old newspapers, a well-used plastic jar of Vaseline, a glass container of Horlicks, and two steel plates large enough to accommodate a meal

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for the four members of the family who inhabit the room. One side of the square room contains built-in shelves, each with belongings threatening to spill on to the floor. Tattered but clean clothes, worn but polished shoes, a leather suitcase battered by time, a few books, the odd cassette of Hindi music, a thinning old mattress crunched up in its place until night falls. These are the net assets of the family.

Adjusting to the small space, my eyes turn to the double bed, its legs raised precariously on bricks to keep the rats away and prevent the mop water from eroding the termite-weakened wood. I look twice before confirming that a figure lies at the far end of the bed. I blink before moving closer to focus on her face. By the soft light I see the body of a young girl, lying on her back, legs curled uncomfortably underneath, breathing shallow breaths, tiredness etched on her pale face. I climb gingerly onto the bed to reach her. Tilting her head slightly, she raises her eyes to my face and whispers, "Good afternoon, *Didi*."

A fit of coughing racks her entire body. Between coughs, she flinches from the touch of my hand and sinks back into a dormancy I have only ever beheld in those imminently dying.

"It's okay," I murmur soothingly, letting my hand stay. Sunken eyes force their way open from within the gaunt face, its puckered, starving skin reminiscent of one several decades its senior. Her cheeks plunge sharply into deep hollows, trailing to lips devoid of shape, simply thin, parched lines incised upon a barren landscape. She recedes into the bed, her diminutive figure a mockery of what once was. I learn that she is 15 years old and weighs just 35 kilograms. Watching large tears trickling down her face from the pain, I feel unexpected fear strike my heart, as I comprehend the gravity of her situation.

"It will be okay," I murmur faithlessly.

Directly above her head hangs a plastic bag, which Mohammed gingerly unhooks from the wall to offer me. As I unfold dozens of sheets of medical notes he has stored, I talk to him about his life. He works in a shoe store that yields just enough income to shelter and feed the family but not for contingencies, especially ones that show little sign of ending. The family shares the lodging with two other families, each relegated to one room. As he talks, his wife stands respectfully to one side while their second daughter slips into the kitchen, comprising a kerosene-burning stove situated immediately outside the room. I move aside to allow her to extricate the two pots she needs from their place under the bed.

Mohammed has saved each detail of Salma's illness with precision, by month and by hospital. Fourteen months ago, Salma first developed a fever and cough that would not resolve after months of observation, then homeopathic medicine. After a delay of three months, the municipal doctor diagnosed tuberculosis, and Salma commenced taking multiple tablets. But just two weeks into the treatment, things began to go wrong. She developed nausea and vomiting and returned to see the doctor, who pressed her to continue with

the treatment. Unhappy, the family saw another doctor, who reduced the number of tablets Salma was required to take. However, she continued to be intolerant of the remaining tablets and soon began missing doses. What followed was increasing unwellness leading to more missed doses, then several more visits to a medley of doctors who proffered an equal number of suggestions. Each time a new drug was added empirically, Mohammed's capacity to buy it diminished, and optimism began to make way for frustration. With no one to oversee the appropriate treatment, no one to emphasize to the family the paramount importance of adherence to treatment, and no one to confirm that the bacterium was indeed sensitive to the prescribed formula, it was destined to be a recipe for disaster.

An opportunistic faith healer vied for and won the family's attention, leading to all treatment being ceased for three months. When Salma became too unwell to sit through the incantations of the faith healer, an alarmed Mohammed finally took her to a private hospital. There, sputum tests revealed her tuberculosis to be insensitive to the drugs she had been prescribed, and a new set of drugs was ordered. A three-day stay in the hospital was all that Mohammed could afford to pay for, so he brought Salma home, taking a second job to pay for the expensive drugs and nutrition prescribed by the doctors. That was two months ago.

But now it is too late. Salma lies bed-bound, too weak to talk, too frail to expectorate the venom that is suffocating her lungs, too spent to do more than lift a finger to direct me to the site of pain. Against the light I hold up serial plates of radiographs, the most abnormal films I have ever seen, all shadowed ominously with disease. Her bones, so exquisitely tender that she recoils against my touch: it can only mean they are infiltrated by the deadly organism. An aluminum pan at the edge of the bed contains scant drops of concentrated urine, a warning that her kidneys are fatigued. Her swollen abdomen and peripheries convey dire notice of a liver straining to match the steady catabolism of essential proteins.

Where else is there tuberculosis? I picture the relentless march of the affliction that respects no boundaries, that will leave no organ untainted and that will hold a life hostage to the end. Does Salma also have human immunodeficiency virus? How do I even bring myself to probe into her personal life while her family stands attentively by my side? The hapless expressions of Salma's parents overpower me with a sense of doom. I compel myself to think logically.

I cannot entreat them to admit her to a hospital. Although admission itself is free, the scarce human and material resources will propel the overwhelming burden and cost of care back onto the family, driving Mohammed into further debt. And even if I were to offer financial assistance, my past experience suggests that Salma will not be treated with the same devotion and tenderness that she receives at home. I decide that pressing for a hospital admission would be doing Salma a disservice.

Her respiratory distress is troubling to watch. Her breaths appear in shallow bouts as if inspiring deeply might deplete her of precious stamina. Her coughing fits free mucoid plugs she is too weak to expel, and they fall back into her upper airway, making unpleasant gurgling noises. They must be far more troubling for her to bear. I know of an oxygen supplier nearby, but providing her with an oxygen tank is fraught with danger. An open flame is barely meters away, with no option but to remain there if the rest of the family is to be fed. Salma's malnutrition is evident and disturbing. Her bones figure prominently through folds of brown skin, loose and lackluster after month upon month of assault. I toy with the notion of feeding her through a nasogastric tube, but her mother balks at the very idea.

"It is Eid soon, our holiest festival. Our guests would be shocked." I grimace at the attempt to preserve appearances but respect its need in this close-knit community. People will visit in droves, decorated in precious finery saved for this auspicious day. It is only natural for the family, starved of joyous occasions, to wish to project an image of normalcy in the house, with perhaps a passing admission that Salma is sick, coupled with the reassurance that next Eid, she will be there in all her finery to welcome the guests.

From the moment I set eyes on her I knew Salma was dying. And here I am now, sitting close to her, a girl so young, dying an untimely death of an eminently preventable illness. No matter how many times I witness such incidents, the unfairness never fails to assail me. Bereft of nutrition, respiratory support, and the correct drugs, she cannot claim even the dignity of dying without pain. The last two tablets of painkillers were used before I arrived.

In this room I feel cornered by the demons of disease baring their fangs at me, gleeful at my dismay. I realize that I have become a complete stranger to such glaring, grinding poverty, such obviously troubled deaths. I think wistfully,

even enviously of my hospital in Melbourne where at the touch of a telephone, I could have summoned the finest expertise to this little girl's aid and perhaps rescued her from the edge of the precipice she barely clings to. But here, trapped in a room of a nameless slum in an unknown alley, I am powerless against the tyranny of poverty and the stranglehold of disease.

"Water, *Ammi*," Salma whispers. Her mother rushes to her side with a glass. Two sips, aborted by coughing, pain, and surrender. Our deliberations have ended. The birds have fallen silent, and the scratching of cicadas fills the night air. The smell of the evening meal being prepared wafts through the room. It is time for me to leave. I reach into my bag and hand Mohammed the three packets of strong painkillers that I have remaining. I silently curse myself for having emptied my wallet before setting out alone into the slum.

"A good doctor is like a god. Thank you for taking the time," Mohammed intones, bending to touch my feet in gratitude. My lamentation at my impotence in the situation is drowned by another burst of coughing from the bed. A fleeting thought occurs to me that this entire family, living in close confines, is certain to develop tuberculosis if not treated with prophylaxis. But somehow, it seems inordinately cruel to voice the thought in the face of a dying child.

Before stepping off the bed, I kiss Salma lightly on her forehead. Her tired eyelids blink in appreciation.

"*Khuda Hafiz*." She finds the energy to bless me.

A storm of sadness engulfs me. So many half measures taken, all failed. Only 15 years old and forced to make peace with her destiny.

May God be with you too, Salma. There is nothing else I can do.

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