

Learning to Surf

BY RENÉE HARMON



I've only tried to surf once, and I dislocated my shoulder in the process. It was our first day of a family vacation in Costa Rica, and my sense of balance did not show up. The rest of my trip wasn't completely ruined, but this was a harbinger of what would be the one event that permanently threw all aspects of my life into the waves.

Balance has always been important to me, and I had managed to achieve that within my personal and work spheres. I met my husband, Harvey, while in college. We married after our first year of medical school, and, independent of each other, chose the same speciality. After residency, we created a practice together and started a family, sharing the responsibilities in both realms. When we started the practice, one of us would be at the office, and the other would be home with the babies. We alternated days so that we were both part-time physicians, and the children had the equivalent of a full-time parent. As our children grew, so did our practice, so that by the time they were in elementary school, the practice could support both of us being at the office until one of us left for the day for carpool. The ultimate plan was for both of us to be full-time at the office when the youngest turned sixteen years old. It was a perfectly balanced life plan.


It was during the family vacation to Costa Rica when I first suspected that something was wrong. Harvey seemed to have a hard time following our guide's instructions. We went ziplining high above the forest canopy, but he forgot to empty his pockets of his wallet, keys, and prescription sunglasses. One pitch-black night, our teenaged daughter ran ahead of us to our cabin, and I asked Harvey to follow to help her find her way. She returned, but Harvey got lost. Forty-five minutes later, the resort staff found him wandering the property, and he had to be driven back in a golf cart. Our last day abroad, I hinted that I was concerned about him and asked him a few questions. He would know what I was doing if I rolled out the Mini-Mental Status Examination questions, so I just asked him to remember birthdays. He could not do that or even calculate our children's birth years. I was stunned but remembered that he had been complaining about his memory for a couple of years.

That trip blew the cover off his problem for me, and I did what I usually do when I worry; I read and I researched. I had been practicing for eighteen years at that point, and I had honed my instincts pretty well. So I also listened to my gut, which was saying, "This seems like the early stages of Alzheimer disease." But he was so young; he was forty-nine years old. I knew of younger-onset Alzheimer disease but had never seen it because it is so rare. I began watching him with my probing physician's eyes, waiting to catch a fumbled word, a misplaced item, or a missed turn, hating myself for it.

Trying to keep my growing panic under control, I had struck a bargain with Harvey on our last day in Costa Rica. I wanted him to see a neurologist; he wanted to see if brain training games would help. We agreed he would work on some games, and if there was no improvement in his scores, he would see a neurologist. Only he forgot that bargain, and I had to cajole him into going. Four months after that vacation, Harvey was diagnosed with Mild Cognitive Impairment.

When I asked the neurologist how I would know if Harvey should stop practicing medicine, I was told that I should watch him very closely. When I asked Harvey if he felt he could continue working, he reassured me that he felt fully competent with routine encounters but would refer more complicated cases to specialists. He started asking me more questions, sometimes simple questions like, "Now, how do we treat poison ivy?" He told me that his medical assistant helped him at times by reminding him of medications, but she never said anything to me. A few staff members would occasionally offer a vague concern that Harvey did not seem to be himself. His clinical notes became shorter and less descriptive. I asked again if he felt he was still able to practice. He solemnly replied, "I'll count on you to tell me when I should retire."

But was it even fair to ask me to make that decision? I was seeing subtle memory lapses at home, but it was impossible for me to know what was going on in his examination rooms. I was certainly closest to the situation, but I was his wife and business partner. I realized that if I were only his partner, I would have no idea that there was a problem. So I went to the internet, searching for advice on how to deal with a physician that may not be fit to practice. I found information about physicians impaired by alcohol, drugs, or inappropriate behavior, but I could not find anything about Harvey's particular problem. Then I stumbled upon our state's medical board and their anonymous tip line. Could I really call and turn in my own husband? If I did, I would be sinking his career, upending his identity, and crashing our carefully balanced life plan. But if I did not call, and Harvey made a mistake, someone might be harmed. But implied in the command to do no harm is the obligation to let no harm come. They were our patients, and I had an obligation to them as well as to Harvey.




My chest churned as I dialed the number. Instead of the understanding colleague that I imagined would take my call, a lawyer answered the phone. I took a deep breath, then carefully, without revealing my name or Harvey's, explained our situation, hedging a bit by saying that I thought he could still practice, but I was not sure how I could know definitively. The lawyer was very kind and agreed that, as Harvey's wife and partner, I was in an untenable position; I would need a clarifying statement from his physician to make the determination.

So I hit the internet again, looking for another consultant, because the first contact had been less than helpful at providing the guidance I needed. I found a neuropsychologist who had a particular interest in mild cognitive impairment and younger-onset Alzheimer disease. I emailed him and asked if his evaluation could give me a definitive answer, but it took several weeks to get a response.

I had been doing all of this investigative work behind Harvey's back, because he refused to talk about it. To this day, I don't know if he was in denial or if he just could not process whatever was going on within himself. This just added to my sense that I was betraying my husband.

It was during this waiting period that I saw an irate patient who forced my hand. She had seen Harvey the week earlier for a relatively simple concern, and she was pacing the examination room when I entered. She sputtered that she was wholly dissatisfied with the care she had received, she had no confidence in Harvey, and he didn't seem to know what he was doing. After she calmed down a bit, the only specific example she cited was that he had asked her what prescription she thought would be best, then had to be reminded what they had decided on. All kinds of alarm bells went off.



The response from the neuropsychologist finally came, and we made an appointment. At the end of the full day of testing, Harvey was exhausted. The only thing he could tell me was that it was very hard and he thought he did poorly. It broke my heart when he said it made him feel stupid.

Now fifty years old, Harvey was told that he had Alzheimer's disease and should not practice medicine. The neuropsychologist also told us that we should call the state medical licensing board, and they would help craft a plan to transition him out of the practice. The next day, after seeing morning patients, I called the same lawyer. After explaining the testing results, I asked how to best phase Harvey out of the practice. He told me that there could be no transition period; the liability was too great. Harvey had to stop working immediately. I told Harvey, and then we called a staff meeting. Through tears, he informed the stunned, completely unsuspecting staff of his diagnosis. Then he went home. When I left the office that evening, Harvey's long white laboratory coat, his stethoscope in its pocket, was hanging on the back of our office door.

Not only did we not have a transition period, but like my dislocated shoulder in Costa Rica, our beautifully balanced life plan became unhinged, and we were cast into uncertain waters. All in a moment, I was given--no, I was thrust into--a new life plan, one that had me as full time solo physician, primary parent to two teenagers, and caregiver to my husband. I was going to have to learn quickly how to surf the waves.