



Note: This article, originally printed in "Newsletter from the Sierra Madre" # 10, April, 1975, has become a classic of health care literature. The story tells the events leading up to the tragic death of a distressed village woman in Mexico. It shows the importance of cultural sensitivity and of taking the concerns of the ailing person seriously. This tragedy helped a lot of us involved with Project Piaxtla in Mexico to rethink our approach to primary health care, and to become not only better health workers but also more humble and compassionate human beings.

WHAT WE LEARNED FROM MARIA

David Werner

From Newsletter from the Sierra Madre # 10



"Men are cruel, but man is kind."
-Rabindranath Tagore-

Those of us whom solitude entices to peer into the night skies of our own being, and thereby into Being in general, are often dumfounded by the didactic irony of fate. It is as if 'blind' luck and 'pure' chance conspired with our human sensibilities to pursue paths as clear yet inexplicable as evolution. Perhaps we are just imagining things, reading into events whatever significance we project upon them, as with inkblots. Be as it may, the chips do fall at times with awesome significance, stopping us short. The sleepless Fates, which once presided over Greek plays, weaving

with the portentous shuttle of strophe and antistrophe the thread of the hero's Hubris until at last he snarled in the inextricable web of Nemesis -- even today ring within us a note of fearful recognition. Events in our daily lives time and again fall into momentous patterns, as if trying to teach us something we have long known, yet ignored; as if Fortune herself were half Poet and half Prankster, and our disquiet existence a tragic-comedy deftly designed to put us in our place.

“....And Lord, if too obdurate I,
Take thou, before that Spirit die,
A piercing pain, a killing sin,
And to my dead heart, run them in.”

-Robert Louis Stevenson-

Medically and technically, we did everything we could for Maria. But it wasn't enough. If we had reached out a little more with our hearts, if we had let our response to her agonizing pleas be a little more visceral, more human, still she might have died, but differently. As it happened, we became so involved, frustrated and at last fatigued by the complexities of her physical problem, that somehow the frightened woman trapped in that sick body was lost in the shuffle, even before her death. As one first notices the loud ticking of a clock only when it stops, so, of a sudden, we wakened to Maria. But a heart cannot be rewound like a clock, although -- heaven knows! -- we tried. And in the warm stillness that followed, we in turn wakened to ourselves, and shuddered.

If Maria had been the victim and we the villains (would it had been as simple as that!) there would be little justification in telling her story. But we, the medics and doctors who attended her, were also, in a sense, victims, half-blinded and swept along by that glittering army which, through years of study and discipline, we have recruited to serve us. If we acted unwisely, reader, forbear. If we were unkind, remember that we endorse kindness wholeheartedly, that each of us had come to this little Mexican clinic voluntarily, with the will to help others. If we were self-complacent and you could condemn us, recall, at least, that you may be in the same boat.

This, then, is the account of how a group of humanitarian medics and doctors, propelled by the intensity of events, trapped in the maze of technological and medical acumen and discouraged by their own ineffectiveness, were marched along by their cumulative strengths and weakness, step by irrevocably step, until -- truer to their decisions than to life -- they sat to one side and watched their patient struggle to her end.

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In retrospect, the stage seemed ominously set for this unhappy play of events (or was it our minds were set?). Even the fact that we called our patient Maria echoes our key flaw. She had been baptized ‘Maria Socorro’, and to her friends she was Socorro. For all our medical skills, we somehow missed the name she went by. An excusable error, yet the irony remains: ‘Socorro!’ is the Spanish cry of ‘Help!’

In this account I shall continue to call her Maria. It is too late to correct our mistake.

Maria, as you may recall from the last newsletter, was the young wife of Marino, one of the two brothers killed at a dance in Guillapa on Christmas Eve a year ago. It was she who, crowded in the back of our power wagon with the corpses, authorities and wide-eyed children, had lifted the edge of the blanket and gaped at the stiffened gaze of her husband until someone ordered her to cover him up again. On reaching Ajoya, Maria had collapsed, moaning and stroking her chest, and had needed to be carried, along with the bodies, through the quick throng of curious, pushing villagers.

At the time, I had not thought there was anything physically wrong with Maria, and perhaps there was not, for her collapse had every sign of grief and hysteria. Many other women, likewise, verged on hysteria, a few from genuine grief, but most from sheer contagion. There is something in a Mexican village which thrives on tragedy and comes alive with Death.

Following Marino's death, Maria and her children had taken asylum with her aging father, Juan, at his isolated rancho called 'El Amargoso' (The Bitterness), 12 miles upriver from Ajoya. A long time passed before we heard from her again.

On the morning of September 15, three little boys burst into the Ajoya Clinic like startled ravens, shouting that someone was being carried into town on a stretcher. Moments later, a small knot of sweating, tired campesinos maneuvered through the doorway a cumbersome homemade litter. On it lay a handsome, very pale, young woman with dark wild eyes. It was Maria. The men had carried her through the stormy night from El Amargoso, following the precarious 'high trail', so as to avoid the treacherous fords of the river.

Old Juan, her father, had come too, and stepped forward to greet us. Wrinkled and resilient as a peach pit, he had perennially sparkling eyes and huge friendly hands. He begged us to do what we could for his daughter who, he explained, had begun to hemorrhage from her "obscure parts" the day before, and had lost "at least two liters" of blood.

Maria was anxious and petulant. It took a lot of coaxing and explaining before she reluctantly submitted to a pelvic exam. The results, however, were unremarkable; no apparent evidence of pregnancy, infection, abortion or tumor. She was, however, very anemic, we supposed from blood loss, and was going into congestive heart failure.

We kept Maria under observation for two days. She lost no more blood, but neither did her clinical picture or her anxiety improve. We felt she needed transfusions as well as a thorough gynecological exam, and recommended taking her to Mazatlán. Old Juan was reluctant, partly because of cost and partly for his native fear of cities and hospitals, but Maria was willing and at last so was he. Risking the weather and bad roads, Martín, our chief village medic, drove them to Mazatlán in the new clinic Jeep, and placed Maria in the care of a first-rate physician, one who has provided treatment or surgery for many of our patients, often at minimal charge.

Barely had Martín made it back from Mazatlán, when a furious 'chubasco' (thunder and wind storm) struck the Sierra Madre. During most of the summer the monsoons had been mild, leaving river and roads more or less passable. Now at the end of 'las aguas' the Weather poured it on with full force, as if bent on meeting a seasonal quota. Roads turned into rivers, the river into a sea. Corn and squash grew overnight, the jungle burgeoned. The clinic roof leaked.

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Day after day the rain gushed from a wild, churning sky. On the afternoon of September 23 a waterlogged wayfarer, arriving on foot from the world outside, reported that a couple of Gringos destined for our clinic were stranded in San Ignacio. They had tried to hire portage to Ajoya in a four-wheel-drive jungle buggy, only to get stuck in the first arroyo crossing this side of San Ignacio.

The Gringos, we supposed, would be Mike and Lynne, a young pediatrician and his lab tech wife, who were planning to help for a month at our clinic. (Mike had first taken interest in the project when, last Spring, he had helped care for a severely burned baby boy whom our Ajoya team had flown to a San Francisco Burn Unit.) Roberto offered to fetch the stranded couple with the clinic mules. These took some finding, however, and he was still saddling up the mules when Mike and Lynne, sore but radiant, plodded into Ajoya on borrowed mules.

"How bloomin' far is it, anyhow, from San Ignacio to here?" asked Mike, gingerly dismounting. "Seventeen miles," I answered. "Seem longer?"

The Texas-bred pediatrician shook his head slowly and grinned. "Reckon it's about the longest, bounciest damn 17 miles I ever swam!"

We laughed and welcomed them in.

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The Patron Saint of Ajoja is San Gerónimo. The Día de San Gerónimo was now only a few days away, and the young men of the village had begun to wonder if the rain, would subside in time to truck in the cerveza (beer) for the grand fiesta. As for myself, I crossed my fingers for a deluge. But on the 27th, the weather calmed. On the morning of the 29th, three ex-army 'commandos' loaded to the gunnells with beer lumbered into the village plaza. Tents and tables went up. The dance would go on! For two nights.

After dusk the 'ruta' arrived, for the first time since the chubasco. This is a backwoods 'bus', actually, a 4-wheel drive flat-bed truck with wooden benches and a solid canopy. That evening it carried so many passengers that they spilled over and were hanging onto the roof and sides. One of these passengers was Miguel Angel, our first village dentist.

He had played hooky from the 'preparatoria' (a sort of junior college) in Culiacán in order to attend the fiesta. I was frankly delighted to see him.

"You wouldn't believe it!" exclaimed Miguel Angel. "The road is that bad....! And Toño, what a great goat! He made everybody get out and wade across the fords and up all the hills, so the truck wouldn't get stuck. Half the time it got stuck anyway and we all had to push. Hijuela! And the priest -- you know, the one from San Ignacio who gets drunk at every fiesta -- was along too. Moteo and I had to carry him piggyback across the fords. Hijole, my back aches! But instead of thanking us, he'd just get mad and scold. Finally, Moteo got fed up and 'accidentally' dropped him in midstream..." Miguel Angel gave a low whistle, "Ever hear a priest curse?"

Everyone laughed uproariously. Miguel Angel, a born entertainer, grinned appreciatively. Then suddenly a shadow crossed his childlike countenance and he turned to me. "Know something, David, Toño is a true beast. When I say he made everybody get out and walk, I mean everybody. Well there was this real sick woman on the ruta. She had a terrible cough and trouble breathing. Toño made her get out like the rest of us, and the more she had to walk, the worse she got. On the steep hills she'd hack and gasp something awful, like somebody drowning. Even back in the truck she couldn't get her breath. I tell you, David, she looked like she was about to drop over. And still at every hill the brute made her walk. A fool would have shown more compassion!"

"Who was she?" I asked, guessing.

"Marino's woman, the one who collapsed in the Power Wagon last Christmas I think her name's Socorro."

"Maria", I corrected him. "Doesn't sound like she's much better."

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I half expected to see her at the clinic that evening, but she didn't come. That night, despite intermittent showers, the festivities continued nearly until dawn. In the plaza three different musical combos competed with each other and the thunder. Trumpets blared, clarinets squeaked, drums thudded, lightning flashed and the villagers -- those who could afford to and many who could not -- drank and danced. Staccato joy shots punctuated the merry chaos. As the night wore on, there were the usual scuffles. The only significant injuries, however, were those inflicted by the Municipal Police; they had Come from San Ignacio 'to maintain law and order', got drunk and --among other indiscretions -- gunwhipped a campesino who had given them, they said, lip. We stitched up the poor fellow's face at the clinic and he hurried back to the dance. All in all, the fiesta was a booming success.

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Next morning our first patient was Maria. Weak, wide-eyed, gasping for breath, she arrived supported by her father and her 7-year-old son, Benjamín. As they came into the clinic, Maria began

coughing and sank, exhausted, on a bench. Although the tropical morning heat was only just beginning, her face glistened with sweat.

“Air!” she gasped between coughs. “Benjamín! Give me air!”

Her small son took off his tattered sombrero and solemnly flapped it in her face. The boy shared his mother’s broad, attractive features, yet his puerile countenance was as imperviously calm as hers was wildly agitated. Into my mind sprung the dark memory of this same waif jammed with his siblings and cousins in our Power Wagon beside their father’s body that fateful Christmas morning. Small wonder he looked strangely grown-up for his age.

“Faster, can’t you!” Maria’s gasping voice had the frustrated urgency of the captain of a floundering vessel shouting to his men on the pumps. Benjamin fanned faster.

While Martín helped Maria into the examining room, I questioned old Juan. No, he had not brought a physician’s report from Mazatlán. All he could tell me was that his daughter has been given 2 1/2 liters of blood and a “scraping of the mother” (D & C). With this, she had seemed to get a bit stronger, but her feeling of ‘drowning’ had failed to improve. After ten days she had been released from the hospital, still very ill.

“So I reckoned I’d bring her back to you fellows in Ajoya,” said old Juan. “The trip was kind of rough on her, though. I’d have brought her here to the clinic last night except that she was that bent on watching the fiesta. You see, the silly girl claimed it would be her last and she was not about to miss it. She didn’t either. Damned if she didn’t even down a couple of cervezas! Fool child! Everybody knows cerveza’s the demon for a person with ‘susto’. I warned her it’d do her harm. But she said..... Hesitating, he looked bewilderedly at his wild-eyed daughter.

“Said what?” I encouraged.

The old man frowned. “She said it meant ‘mother’ to her.... But that’s her way. Sullen. Stubborn as an ass. Too proud to hear what’s good for her. She’s always been that way, even as a tot. But now she’s worse, since her ‘susto’.”

“Snare?” I said. (‘Susto’ is a mysterious folk malady, a state of self-consuming, irrational anxiety usually precipitated by a terrifying experience and often considered to be the doings of the Devil.) “Do you mean since Marino was killed?”

“That was the start of it”, said old Juan, “But the crowning touch was just after that, when her father-in-law stole her six cows and the beans.”

“You mean Nasario robbed Maria?!” I exclaimed. I have known Nasario only as a kind and generous old man; I could not imagine him otherwise. Yet I’ve knocked around enough to know that every person, like every story, has more than two sides.

“But why?” I demanded. (Perhaps I shouldn’t have asked, for I was anxious to examine Maria, yet I wanted to hear out her father, and it was important to him that I do so.)

Old Juan’s gentle eyes clouded with anger. “Because the old python knew he could get away with it,” he said. “You see, Marino when he was alive had never bothered to get his own branding iron; he’d always used his father’s. So when he was killed, Nasario just up and took the cows, simple as that. What could my daughter do? The cows had the coward’s brand.”

“Nasario did that!” I puzzled.

“That’s not all!” Old Juan spat angrily on the clinic floor. “He sent his son, Celso, like a lone coati to rob her whole winter’s supply of beans, said they’d been planted on his land, the fox.” The old man’s eyes narrowed. “Do you follow, Don David? They broke her like a sprig of cane. Within eight days the poor girl lost everything; husband, cows, beans! What else is there? All they left her was a handful of hungry children.”

The old man laughed wryly, “And a crotchety old father on his last legs.” He spat defiantly. “But

God hear me, while I live, I eat!" The old man put a huge hand on his grandson's slight shoulder, "And Benjamin here's going on eight. Couple of years and he'll man his own cornfield and plant his own beans. Right, son?"

The boy tilted up his quiet face and answered his grandfather with a fleeting half-smile that would have bolted Leonardo to his easel.

Maria's case, we knew, would be tough. I was grateful we had Dr. Mike with us, and asked his help. He consented gladly, but when, on examining her, we found Maria had a dangerously fast pulse and a possible pulmonary embolism (blood clot in the lungs) he began quite wisely, to shy from the responsibility.

"I'm only a pediatrician", he protested. "And besides, she should be in a hospital, not a backwoods clinic. Can't we get her to Mazatlán?"

"We already got her there", I explained to him. "They discharged her from the hospital two days ago. That's why she's back with us."

Dr. Mike's jaw dropped. "You've got to be kidding. What sort of hospital is that?"

"Busy", I said. "Understaffed. It's sometimes simpler just to dismiss an indigent patient with an extra difficult or demanding problem. Happens all the time."

"That's incredible!" said Dr. Mike. "That's barbaric!"

"For an awful lot of folks", I said, "that's life."

"Air!" panted Maria. "Where's Benjamin?"

"In the hall", said Martin, "I'll ask him to come in."

Dr. Mike took a deep breath. "O.K.", he said, "I guess I'm game. Let's keep her here. We'll do everything in our power for her." He looked doubtfully at Maria. "But I sure wish a specialist in internal medicine would drop by about now."

"In a week one will", I said. "Literally! On October 8 a medical/dental team from California should be flying down by private plane. The pilot's an internist, and really sharp.

"Tremendous!" exclaimed Dr. Mike with restored optimism. "Let's get on with it then. Martin, can you and Roberto get an X-ray of her chest. David, does that old E.K.G. machine work? Good. We'll see if we can't get this young lady breathing a little easier." He gave Maria an encouraging smile. She looked away and started coughing. "Think I'll ask Lynne and Ramona if they can do an acid test on her sputum", mused Dr. Mike, "Maybe she's got T.B."

Back in the hall, I spoke again with old Juan. He must have sensed my concern. "Tell me straight, Don David", he said "because well ... if she doesn't have a chance, I'd just as soon tote her back to El Amargoso straight away."

I grasped the old man's dark, sinewy arm. "She's a strong woman, Don Juan", I said. "You know we'll do all we can."

"I know", he said with a frowning smile. "Yet something tells me..." Instead of finishing his phrase he looked at me squarely and asked, "Can you Gringos cure susto?"

I thought of all the things I might or might not say, and repeated simply, "We'll do all we can."

We set up a cot for Maria in a small room open to the patio. As is our custom, her father and son also moved in to help care for her. We provided them with a narrow burn bed and a miniature gurney, which was the best we could do.

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I won't go into all the medical details of Maria's case, lest the reader get bogged down in them -and lose track of the human side. Let it suffice to say that from first to last we were baffled by Maria's

clinical picture. We took X-rays, endless electrocardiograms, analyzed and reanalyzed her blood, urine, excrement and sputum, and kept track of her vital signs and fluid intake/output. Yet the more we learned, the less we really knew. One day we suspected pulmonary embolism, the next 'wet' beriberi, the next thyrotoxicosis, the next rheumatic fever, etc. Time and again we mesmerized ourselves into believing we were on the right track. On the third day for example, when we thought Maria's breathing seemed easier in response to digitalis, Dr. Mike exclaimed cheerfully, "I think we did the right thing to keep Maria. She's gonna get better!" That evening, however, Maria took another turn for the worse, and we recognized in her ephemeral improvement the mirage of our own wishful thinking.

Sick as she was, Maria retained a strong sense of pride. She had the traditional campesina modesty, which made examinations and tests unnerving both for her and for us. Most of all she hated being wired up, open bloused, to the E.K.G. machine. Every time we wanted an E.K.G., Dr. Mike and Martin had to spend 10 to 15 minutes cajoling her to lie quietly and keep from covering her breasts. She would start coughing and beseech us to wait until she caught her breath, which she never did. Although she always made us carry her to the porch for the E.K.G.s, protesting that she was too short-winded to walk, once the tests were over, she would jump up and run back to her cot.

During these tests, Maria's dread of asphyxiation always seemed to get worse. Fear is, of course, the tinderbox of fury. One morning when Maria was wired up for an E.K.G., the mother of a sick child made the mistake of peeping in through the doorway.

"Chinga to madre!" exploded Maria. Aghast, the mother withdrew. We marveled that someone with so much trouble breathing could muster such an ear-shattering curse.

It was hard for us to tell how much of Maria's distress was physical, and how much was due to her fear. She had the eyes, the breath, the heartbeat -- and at times the bared teeth -- of a cornered animal fighting against the odds for its life. Her cough, although unproductive of phlegm, had something exaggerated about it, even vocal, as if Maria, while too proud to beg for help directly, was pleading succor through coughing.

Frustrated by the fact that Benjamin fanning her helped so little to ease her distress Maria thanked her small son largely with abuse. One afternoon I heard her gasp, after a fit of coughing, "More air! Come closer, damn it!" Benjamin, who was already almost flicking the sweat drops from her brow, accidentally grazed her with his sombrero.

"Can't you ... be careful ... you son of a slut!" she gasped.

Without a word, and with the same immutable look of concern, the boy kept flapping his tattered sombrero.

Perhaps, I mused, he is so used to her scolding him he takes it for granted. Or, perhaps, with a child's instinctive wisdom, he takes her cruelty as a proof of love.... Whatever the case, Benjamin needed no defending. Yet my heart went out to him often, as did the hearts of the others in the clinic. With his quiet compassion, the small boy led us all. Would he had led us further!

Maria's respiratory distress seemed to get worse not only when we wanted to move or examine her, but whenever her father or Benjamin left her side or were trying to get a little much needed sleep. Her worst and loudest paroxysms of coughing occurred between 1:00 and 3:00 A.M. Benjamin would dutifully get up and fan her. Martin, Ray (an American paramedic) or I -- often all three -- would also rise, give her appropriate medication, and try to calm her. I found it did a lot of good -- more, in fact, than the medicine -- to sit quietly beside her, speaking softly and reassuringly, encouraging her to relax. First she would be resentful and taciturn, but little by little her breathing would grow easier and sometimes she, too, would begin to talk of her children, Marino and things past. Never of things to come.

One night at the second crowing of the cocks (about 3 A.M.) I was aroused by Maria's vociferous coughing. Between coughs I heard her frantically call, "Benjamin wake up Hurry!"

I quickly pulled on my boots and waded across the dark patio toward her room.

“Benjamin! ... Wake up!” she gasped, her agitation mounting. “Don't you care if I die?”

I found I was the only one who had wakened, (No matter how tired, I sleep lightly.) Maria had kept us all running too many days and nights. Old Juan's big chest heaved rhythmically on the burn bed. Ray's musical snore came drifting from the adjacent room. Benjamín, still sandaled and clad, lay in a fetal question mark upon the small gurney, his tattered sombrero clutched in his small hand, sound asleep.

“Benjamín!” gasped Maria with increased terror, “For the love of God... give me ... air!”

I carefully lifted the sombrero from the small relaxed hand and began fanning Maria. “Let him sleep”, I said softly. “He needs it. Try to be calm, for his sake.”

Maria shook her head in frustrated fury, and staring into the darkness gasped, “More air!” The Flickering of the kerosene lamp accentuated the terror in her wide, sunken eyes. She looked like a woman possessed. I kept fanning.

“He needs ... I need ... air ... sleep ... can't go on!”

“Maria”, I begged her, “Try to relax. Your body needs less air when it's relaxed. Try to be calm.”

“You don't understand”, gasped Maria. “It's their fault ... Air! ... The beans!” She made an angry gesture, as if trying to push back the darkness.

“Take it easy, Maria”, I said in a reassuring voice. I thought: she's right, I don't understand. “The beans?” I ventured.

“Give me air!” she demanded. I fanned harder. Benjamín stirred in his sleep. I looked down at him and yawned longingly. Somewhere a toad was singing. The night was cooler now, before dawn, yet Maria's distraught face was sculpted with golden rivulets of sweat. After a long silent spell, she began to speak, spacing her words between air-hungry gasps.

“Morning ... they buried Marino ... afternoon I went back ... our hut... Guillapa getting dark ... alone ... More air! ... going inside ... jumped out of the shadows something ... male ... straight at me Air! ... waving his hands ... I thought it was ... his ghost looked just like ... the darkness...ran past me ... Air! ... out the door ... Give me air! ... in the light it was ... Celso...

Marino's brother the devil ... Nasario ... sent to rob ... the beans!” She began to cough again, and fishing the sticky mucous out of her mouth with trembling fingers, wiped it on the bed sheet.

“What happened then?” I asked.

“I don't know”, she panted. “My heart ... pounded ... like crazy ... my legs ... More air! ... I fell ... Since then ... Give me air!” I kept on fanning her. She gave a light sigh and shut her eyes.

“Maria”, I said cautiously. “What do you think your illness is?”

She opened her eyes and stared at me as if I were a child. “Susto”, she snapped. “What else?”

With a pained grunt she turned onto her side with her back toward me. Her breathing, however, seemed to grow a little easier and a few minutes later she apparently fell asleep. I took up the kerosene lamp and examined her carefully. Even in sleep, I noticed her breath was strained and rapid, her face anxious. Cautiously, I took her pulse. It was 150 per minute. Perplexed and wary, I stumbled out into the dark patio and looked skyward.

Not a star.

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One of our ongoing battles with Maria was trying to keep track of her fluid intake and output. Time and again we asked her not to empty her bed pan, but whenever we weren't looking she made Benjamín sneak it out, for she had diarrhea and was embarrassed to let us see it. Equally difficult, was trying to keep tab on how much Maria drank. Because we suspected pulmonary edema (water

on the lungs) contributed to her respiratory distress, we felt it imperative to restrict her fluids. Her thirst was insatiable and she was forever having Benjamín sneak her water from the communal urn. Dr. Mike tried patiently to reason with Maria, explaining to her that drinking less would mean easier breathing. Maria nodded that she understood and would cooperate, but the moment the pediatrician turned to leave she gasped very audibly, “Benjamín, bring me water!”

Dr. Mike stiffened as if slapped, then returned to her bedside and sat down. He looked into her pale, perspiring face and said gently, “Maria, do you want to die?”

Her dark eyes narrowed, and in a tone whetted with ire, she snapped, “Yes!”...

Next we tried to reason with Benjamín. This put the child in a serious double bind: whom to obey. It was, of course, easier to deceive us than disobey his mother. Maria’s breathing continued to get worse and we were at our wits’ end. At last, Martin took Benjamín to one side and had a boy to boy talk with him. They arrived at a peace treaty whereby Benjamín, could continue to ‘sneak’ water to his mother, but would first ‘sneak’ the glass to Martin so that he could limit and measure its contents. Each time the boy brought him the glass, Martin showered him with praise for taking such good care of his mother. Needless to say, the treaty held. Little by little, Maria’s breathing began to improve. And so, temporarily, did her state of mind ... and ours.

Her heart, however, kept beating at frantic double time, and by the end of the first week, we were more baffled than ever. We could scarcely wait for the arrival of the flying doctors.

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On the afternoon of October 8th, at long last, a small Cessna buzzed over the village, dipping its wings in a greeting. Ramona, our apprentice lab tech, ran into the patio and looked up. “It’s them!” she shouted jubilantly. “The Gringo doctors! They’ve come!”

Dr. Mike, Martin and I looked at each other with shared joy and relief. “Thank Heavens!”

Miguel Angel, the younger dentic, had left in advance with the Jeep for San Ignacio to meet the plane. The road was still an obstacle course, although the rains had calmed; it was well after dark by the time the visiting crew arrived. There were two doctors, a dentist, an oral hygienist, a journalist and her husband, a photographer.

The pilot and leader of the group was John, a radiologist, with a long background in internal medicine. Over the past several years Dr. John has been an invaluable help to our village project. He obtained most of our X-ray equipment for us and trained us in its use. He has helped us get patients into a number of hospitals in the Bay Area. He has also assisted in the education of our village apprentices, both personally and financially. And he has flown to our area many times with visiting medical/dental teams. Having worked with him in many situations, I have gained the highest regard for Dr. John both as a doctor and a friend. He is abrupt on the surface and warm underneath.

The other doctor, an intense young surgeon named Robby, was new to our project. We found he had a vast amount of medical know-how at his fingertips, and was a gifted instructor. Taking to heart our motto that “The first task of the visiting doctor is to teach” Dr. Robby held classes and bent over backward to our young volunteers and village apprentices. The dentist and oral hygienist likewise did a splendid job in instructing our apprentice ‘dentic’.

Welcoming in the visiting team, we took them onto the back porch where the air was cooler. Everyone was seated on chairs, gurneys, boxes or the floor. From her open room on the far side of the patio, we could hear Maria’s distraught coughing.

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“Sounds like you’ve got a pretty sick patient back there”, said the journalist, lighting her notebook with a small flashlight.

“That’s Maria, whom I told you about”, said Martin.

Wanting to waste no time, I turned to Dr. Mike. “Why don’t you explain Maria’s case to the other doctors.”

Dr. Mike, as eager as I to share our responsibility for Maria, began to describe her case with all the systematic detail of a ‘grand rounds’. As he talked, Maria’s cough grew louder and more urgent. The journalist whispered something to Martin, and a moment later the two of them softly made their way across the dark patio toward Maria’s room.

The new doctors listened intently to Dr. Mike: the history, the signs and symptoms, the lab reports, and our attempts at diagnosis. When Dr. Mike mentioned pulmonary edema, Dr. John interrupted sharply.

“Her? Pulmonary edema?” His voice had a note of slightly scornful incredulity. “Anybody who can put on a cough like that couldn’t possibly have pulmonary edema. You can’t blow a horn without wind.”

Dr. Mike laughed sheepishly, and said, “It’s mighty good you’re here. We needed somebody with more experience...”

I, too, felt foolish, but relieved. Already, without even having seen the patient, Dr. John had shed new light on her case. In simply hearing her cough, he had been able to put his finger on something we had half known all along, but never come to grips with; irrespective of how sick she might or might not be, to some extent at least, Maria was putting us on. To be sure, her physical problem was serious enough, but perhaps we could cope with it better if we didn’t let ourselves get entangled in her melodramatics.

And so it was that Dr. John’s first of f -the-cuff judgement of Maria was the germ of a shift in our attitude toward the woman and her illness. From that evening on, we grew more stern with Maria, for we felt that if we catered to her hysterical fears, we would only intensify them. When we had to examine or test Maria, we no longer coaxed her as much or played up to her illness. We no longer waited as patiently for her to catch her breath (which she never did) before taking an X-ray or E.K.G. Dallying, we agreed, would only encourage her theatrics. We must be gentle, but firm.

However, it wasn’t always easy to be both. Sometimes, our firmness became more harsh than gentle. I vividly remember how one night, very late, when everyone in the clinic was trying unsuccessfully to sleep and Maria’s cough sounded deliberately loud, I went to her bedside and said firmly, “You know, Maria, if you didn’t cough so loud, maybe some of the people around here could get a little sleep. Just because you can’t sleep, doesn’t mean nobody else should, now does it.” In the muted glow of the kerosene lamp Maria turned her sweated drawn face toward mine and looked at me briefly with fatigued, haunted eyes. I had never before spoken to her like that. She turned her head away, gave me a couple of muffled coughs, and gasped, “Air, Benjamín!” At once I wanted to take back what I had said, to beg her pardon, to explain that I was cross because Instead, I gave her her medicine and stumbled off through the darkness and the mud.

* * *

In spite of our temporary increase in staff at the Ajoya Clinic, we were more swamped with work than ever. Apart from the enormous amount of time we spent on Maria, we found that our patient load had increased by leaps and bounds. People from San Ignacio and surrounding villages had seen the plane land and were coming to consult the ‘flying doctors’. Some were patients who knew Dr. John from his previous visits and had confidence in him. Among these were a mother and son from San Ignacio. Five years ago, the mother, Agustina, had to come to the Ajoya Clinic complaining of a breast lump which had proved to be cancer. Her suspicions verified, she had gone to pieces, terrified by the fear of leaving her children orphans. Deeply touched, Dr. John had gone to great effort to arrange surgery for her in California, as well as to see that she was comfortable during her visit. Two years later, when her eight-year-old son, José Antonio, developed a bone tumor in his arm, Dr. John had helped make similar arrangements for the boy. Both operations had proved successful.

Now mother and son had returned for check-ups and to greet their old friend.

Apart from our increased patient load, another thing that slowed us down -- and justifiably -- was the visiting team's unstinting commitment to teaching. Doctor John feels strongly that visiting doctors' time is best devoted to training the paramedics who provide the continuity of care, and he had primed his team to this idea in advance. The team did most of its instructing through serving as clinical consultants. In addition, as I have mentioned, Robby conducted a number of excellent classes and seminars.

However, the visiting doctors were unable to devote as much time to teaching as we had planned, largely because of the time and energy they devoted to Maria. Concerning her condition, the number of opinions had increased with the number of doctors. This, of course, meant more tests and more electrocardiograms. For the E.K.G.s, we decided Maria should walk to the porch rather than be carried.

Though she would invariably complain that such walking was too exhausting for her, we felt it was better to be firm.

* * *

At long last we made a major breakthrough, Drs. Robby and John had noticed, by comparing the cardiograms over the last several days, that Maria's heart rate was always a constant 150 per minute, no more and no less. They speculated that this could be due to 'paroxysmal atrial tachycardia' (or PAT, a sort of electrical 'short circuit' of the heart in which an unregulated point of discharge stimulates a very rapid but constant rate of contraction). In order to confirm this suspicion, and at the same time, if possible, interrupt the PAT and return Maria's heart beat to normal, Dr. John injected a vasopressive agent (Aramine) into a vein of her forearm. The rest of us crowded around the E.K.G machine to witness the results. They were dramatic. Within the space of two heart beats (less than a second) her second heart rate dropped from 150 to 60 beats per minute. Maria uttered a gasp of terror and turned grey. On the E.K.G. machine her heartbeat leveled at 80 beats per minute for about two seconds, than flipped back to 150.

"It's a PAT!" cried Robby jubilantly. "What'd I tell you!" He pointed at the squiggly line. "See that sudden drop!"

Maria, trembling and clutching her chest, gave little grunting sighs with each strained breath. Benjamín, a faint frown on his innocent face, fanned his mother furiously with his tattered sombrero.

Dr. Mike, who had doubted that Maria had PAT, was less elated. "I guess you guys are right", he said. "But she flipped right back into the paroxysmal beat. What have we gained?"

"That often happens", explained Dr. John. "We'll put her on Quinidine. If she doesn't come out of the PAT in a couple of days with that alone, we'll give her another shot of Aramine and she should convert and stay converted."

All of us felt encouraged. We had, we supposed, at last tracked down the cause of Maria's distress, and knew how to treat it. For the next two days, impatient for the Quinidine to take effect, we anxiously monitored her heart beat on the E.K.G.

By the end of the second day, however, there was still no response. Maria's heart kept on pumping desperately at double time. That evening the thunder growled and it began to rain again.

About ten o'clock that night, a boy arrived on horseback from Carrisal (a small village on the way to San Ignacio) to tell us that a Jeep Wagoncer full of Gringos was bogged down in the mud near 'la cruz' (a wooden cross by the side of the road which marks the site where many years ago a young woman had been dragged to death by a mule). I was very tired, but my eagerness for a change of

scene got the better of me, and I said I would go to the rescue with our Jeep. Dr. Mike, although as weary as I, also jumped at the chance. After an hour or so of slithering up the badly washed out track, we came to the mired vehicle. Parking on somewhat more solid ground, we hooked up the winch of our Jeep to the Wagoneer, and wound it in like a floundering catfish. It was after 1:00 A.M. by the time we made it back to the clinic.

The arriving group of Americans was a lab tech (Ann), her husband, a mechanic (Bill) a young friend of theirs, and a new paramedic (Memo). (In case the reader is astounded by the number of Americans we had here at one time, so were we! We never plan to have so many at once, but sometimes it happens. Actually, the two groups overlapped for only three days.)

The next morning Maria was still the same -- rapid breathing, perspiration, fear of suffocation, pulse of 150/minute. We told her we wanted to get another E.K.G. As ever, she protested that she was too out of breath and begged 'to wait a minute'. Yet this was the day we were to 'convert her heart' (bring it back to normal rate) and we were too eager to show her much patience. Dr. Robby and old Juan helped her, protesting, to her feet and 'walked her' to the porch. When she was hooked up to the leads, we crowded once again around the E.K.G. machine, eyes riveted on the rapidly jumping needle, while Dr. John prepared to inject her. Maria, recalling with terror the shock of the last such injection, pleaded that we not give it again, but Dr. John assured her it would not harm her, and was necessary if she was to get well. Unconvinced, Maria tried to restrain his hand, and her father in a sharp tone ordered her to behave. At last she submitted, calling with a weak voice, "Air, Benjamín!" The call was now less of a petition than a rite. The small, unfailing boy leaned forward and vigorously flapped his tattered sombrero. Dr. John injected the medicine.

Nothing happened.

Again, we were baffled. Three days before, her heart beat had "converted" -- though temporarily - with Aramine alone. Now, with Quinidine in her system, it was supposed to have converted yet more readily, and to have stayed converted. Instead, no change. The needle on the E.K.G. machine jittered rhythmically at 150/minute, as before.

"Maybe that means it's not PAT after all", suggested Dr. Mike.

"It has to be PAT", insisted Robby, pointing to the stack of electrocardiograms.

Dr. John, concerned but still unflustered by Maria's failure to 'convert', speculated, "We still might be able to block the PAT with Prostimine. Do we have any?" We had. We injected Maria with the appropriate dose and impatiently watched the E.K.G. machine. No response. "It often takes a while", noted Dr. John, still not discouraged. And sure enough, at about 10 minutes, Maria's heart rate began to drop. After half an hour, it had dropped to 120 per minute.

Everyone was ecstatic. Everyone, that is, except Maria, who continued to gasp for breath and call to Benjamín for 'air'. Still, to us she looked better. Her blood pressure, which had been low, was back to normal, her pulse was at long last stronger and slower. Obviously, she was better!

"How do you feel, Maria?" asked Dr. Mike with an encouraging smile.

"Bad." said Maria.

"But you do feel a little better, don't you?" he persisted.

She coughed and turned her head away. "Benjamín!" she gasped, "Give me air!"

Benjamín, who had trapped a fly on his bare arm by clapping his small hand over it, now held it carefully by the wing and was dreamily watching it twist and buzz.

"Give me air!" cried Maria with renewed anguish. "Or I'll die!"

The boy released the hapless fly, which spun in a drunken spiral to the floor, and snatching up his tattered sombrero, returned to fanning his mother. Old Juan, who stood planted beside his daughter like a wistful cypress, took hold of her long, thin, hand and gently massaged it in his own big ones.

"My poor, lost daughter!" muttered the old man wearily. "But if it's God's will to take her, so be it."

Dr. Mike gave him an exasperated look, opened his mouth as if he were going to say, "Damn it,

can't you see she's getting better!", thought better of it, humped his wide shoulders and walked away.

"David", said the journalist, who had spent most of the morning typing in the back room, "If you could spare me just a few minutes of your time..."

* * *

Later that same morning, the three doctors approached me with their recommendation:

"We have talked it over and decided that we've done just about all we can do medically for Maria here in this clinic. There is obviously a strong psychological element to her illness which has grown dependent upon and is aggravated by all the medical attention she has been getting here. If she is to get better, she should be elsewhere.

"Furthermore", they continued, "We doctors came here with the understanding that we were to give priority to the training of paramedics and village apprentices. And just look at us! Ever since we arrived, the major efforts of this entire health center have been poured into one extraordinarily complex case: Maria!"

"In short, we feel that the advantages of moving Maria to a private house far outweigh the disadvantages. For the good of Maria as well as the clinic ... Agreed?"

Their points, I thought, were well taken. "When", I asked, "do you suggest we move her out?"

"The sooner the better. Now, if possible."

"Right now. This very morning."

"But we just started the Prostimine this morning. Her heart rate is still dropping. Oughtn't we to keep an eye on her for a few more days?"

"If she stays at a house here in town we can check on her as often as we need to."

I nodded.

"Then you'll tell her father?"

"Yes", I said. "It'll take him a while to arrange a place to stay. I'll ask him to be ready by this afternoon. He should bring a couple of men to carry the stretcher."

"Why a stretcher? As you know, that just reinforces her dependency. Better she walk..."

"Pardon me again", said the journalist, who had been trying patiently to get a word in edgewise. "Do you mind if I quote from your introduction to the Ajoya Manual, this part right here." She pointed to the very beginning, which reads:

The overall value of our medical efforts in a village health program, is at best debatable. The value of ... human kindness is unquestionable. Let this, then, be our first goal...

"Sure", I said to the journalist, "Quote it if you like."

"And wonder if you'd mind looking over what I've written so far..."

"As soon as I talk with old Juan", I told her.

* * *

Old Juan accepted the news mutely. Yet when I told him we thought Maria would improve more quickly in a private home, his eyes grew moist and he put a friendly hand on my shoulder. I could tell he thought I was lying in order to spare him, and was grateful to me. He was sure we considered his daughter's case fatal, and were sending her out of the clinic to die. I tried to tell him otherwise, but it was hopeless.

* * *

I can't remember everything that happened during the next few hours, except that I was kept so busy that I missed lunch.

About 3:00 P.M. I was returning to the clinic from an errand. Hearing loud voices from the porch, I went there. Dr. Mike, Dr. Robby and old Juan were standing beside the examining couch on which they had propped Maria into a sitting position. The time had apparently come for her discharge. I remained in the doorway.

"That's a girl, Maria", said Dr. Robby. "You can make it if you take it easy. It's just a short way down the street."

"No! ... Please! ... I can't do it! ... Air!" gasped Maria, "I need air!"

Like an injured bird, a tattered sombrero slipped out from between the two doctors and fluttered at Maria's perspiring face.

Next Dr. Mike spoke. His voice was gentle, but stern. "Now pull yourself together, Maria. You're getting better, you know that. Let us help you up." He pulled gently on her arm.

"No! No! ... Please don't ... make me ... No! ... Not ... just now!" whimpered Maria. "Air!"

Dr. Mike took a deep exasperated breath and turning to Robby, said in English, "Every bloomin' time we want to move her or treat her, she suddenly gets worse." In his frustration, he turned back to the patient and said in Spanish, "What is it with you, anyway, Maria?"

"I'm dying", Maria panted. The tattered sombrero flapped harder.

"David!" Maria cried out suddenly. She must have spotted me in the doorway. This was the first time she had ever called me by my first name, and it struck me as odd. I moved forward. "What is it, Maria?"

"I can't ... get enough ... air!"

There was nothing new about that. I moved closer and looked at her more carefully. The same terror and exhaustion were in her eyes. But something struck me as different, though I was hard pressed to know just what.

"It hurts ... me here", grunted Maria, putting her hands to her chest.

I put a stethoscope over her heart. At first all I thought I heard was a faint fluttery sound, like a small moth trapped in a kerosene lamp. But almost at once I picked up the rhythmic 'lud dub' of a regular, fast heart. I looked up and saw that Dr. John had joined the group.

"What's the problem?" he said.

"Have a listen", I said. "I think at first I heard a flutter."

He listened, frowning, then shook his head. "Same as ever -- a steady fast heartbeat. A lot slower than it was at its worst, thank heavens."

"She said she's dying", explained Robby. "Complains of increased chest pain."

"When did this begin?" asked Dr. John.

"When we said it was time for her to go, of course", said Dr. Mike.

"Just what I thought", said Dr. John. "Well", he added abruptly, "We made a decision this morning. Are we going to keep it or not?"

I looked at Maria again, more closely. "Doesn't she look more cyanotic than she was? I ventured. Everyone examined her.

"Looks about the same as she always has", said Dr. Mike skeptically.

“But look at her lips and nailbeds”, I insisted. I could have sworn they were bluer.

“It's probably just the afternoon light. It's terrible in here”, suggested Robby.

“Let's play it safe”, decided Dr. John, “And do another E.K.G. just to be sure.”

For the last time, we wired her up to the magic leads. This time I did not stand around the machine with the others, but squatted by the edge of the examining couch, carefully watching Maria. She looked at me, then suddenly reached out and caught hold of my hand, like a drowning person lurching at a bit of floating jetsam.

“No, Maria! Don't move!” snapped Dr. John. I quickly withdrew my hand, knowing that the contact between Maria and myself would upset the values of the machine.

“Great!” cried Robby, bending over the hieroglyphic verdict scribbled across the long scroll. She's even better than the last time. Her heart's slowed down to -- let me see -- 112!”

“No sign of any new problems?”

“Not a sign of any here!”

“Well then”, said Dr. Mike, “Let's hurry up and get her out of here.”

“Air!” gasped Maria.

I took a deep breath. “What do you fellows say we keep her here another day or so?” I suggested hesitantly.

They turned and looked down at me as if I were a child. “Trouble with you, David, you're too soft. You let Maria's dramatics turn your head.”

'It's just what she wants. She's got all of us wrapped around her little finger.'

Dr. John cleared his throat, and the younger doctors grew silent. “I thought we reached a decision his morning, all together, that Maria was to leave this afternoon. It was established that this would be best for Maria and best for the clinic. Maria now says she feels worse. This is just as we might have predicted, considering her past performance every time she's been asked to move or to cooperate with us. Unless we can put our finger on something specific which demonstrates that she is in fact in worse condition, I vote we abide by our earlier decision and move her out at once.”

“I agree.”

“I agree.”

“David!” called Maria in a weak voice. “I need...”

“What do you say?” asked Dr. John emphatically.

I looked down at my empty hands. I didn't have a reason. I had a feeling. But you can't wire an E.K.G. machine to a feeling. I thought of giving up and saying, “All right, take her away.” But there was something inexplicable inside me, like the voice of a child freshly wakened...

“I can't give you any good reasons”, I said awkwardly. “I just have a strong feeling that Maria is on the edge of a crisis.”

“David!” called Maria again, in the same haunted voice. I gestured to her that I was busy.

The doctors stared at me in silence. Finally Dr. John said, “We must respect your judgement. However, if Maria is to stay here, I think that for her good as well as ours we should change our system of caring for her. We've been suffocating her with attention. She doesn't need three doctors, five medics and four nursemaids. I think we should appoint one person only to care for her, apart from her father and the boy.”

Dr. Mike shook his head. “I agree with you 100%, but darned if its gonna be me.”

“Well then who shall it be?” asked Dr. John, looking from one to the other of us and mostly, I thought, at me. I thought of the mountain of other work I had to do, and said nothing.

"I'll be glad to do it", said a voice from behind us. We turned to look at Martin, who had come onto the porch a few minutes before, and had been silently listening.

Everyone was relieved. "Good!" said Dr. John. "But remember, Martin, it's essential that we wean Maria from the excessive attention she's getting. You'll want to follow a strict regimen with her. Take her vital signs at regular intervals, see she gets her medicines, and that's about it."

"But whatever you do", added Dr. Robby, "Don't fuss over her and make much of her complaints. It only precipitates her coughing and hysterics and generally makes things worse."

"David!" called Maria. "Help me!"

"I know that", agreed Martin, and to show us that he did, added, "We've spoiled her enough."

"Then why don't you start now by walking her back to her ward", suggested the doctors. "It's high time we got on with something else."

"Air!" gasped Maria.

"Walking her?" asked Martin dubiously.

"Certainly. And remember, you've got to be firm. Don't let her talk you out of it."

"Help me", cried Maria in a weak voice.

We all nodded our agreement, even old Juan, though we had been speaking in English and he could not have understood.

"I can't ... breath ... any longer", gasped Maria. "Benjamín..."

Benjamín, standing alone now beside his mother at the head of the couch, fanned faithfully with his tattered sombrero.

"Weren't you planning to conduct a class this afternoon?" asked Dr. John, turning to Robby.

"I'd thought of presenting something on extreme medical emergencies", said the young surgeon.

"I tell you...", whimpered Maria between gasps, "I ... am ... dying."

Dr. John turned to me for confirmation. "What do you say we get the class started at once? Martin can get Maria back to her room, and the fewer of us who hang around kibitzing, the better."

"Marvelous." adjoined Ann, the lab tech whom we had rescued out of the mud the night before. "On with the class."

"Sounds fine to me", I said.

The rain had stopped and the sky was dappled with high harmless clouds. The day was waning, so we decided to hold class in the patio, where the afternoon light was better. Carrying out benches and chairs, we put them in a circle. Twelve or so of us assembled -- Mexicans and Americans, doctors, medics, and lab techs. We all sat down except Robby. As he began the class, over his shoulder, in the shadows of the porch, I could see the dark shapes of Martin and old Juan trying to lift Maria to her feet. As they did so, their voices became louder and harsher. My mind strayed from the lecture.

First, Martin's voice, "Come on, Maria. We can't wait forever."

Then old Juan, his voice trembling with anger, "I said get to your feet, girl. Now do it."

"In a life threatening situation", proceeded Robby, "it is imperative that one be able to recognized at a glance..."

"I can't go on another step..." Maria stood, supported by Martín and her father, at the top of the stairs leading down from the porch into the patio. Her breath was a succession of rapid, exhausted grunts.

Martín and her father half carried Maria down the steps and began to guide her, stumbling, across the patio. Benjamin, his tattered sombrero in his hand, remained at the top of the steps, small and

alone, watching uncomprehendingly.

When the strange triad reached the center of the patio, just ten feet from our study circle, Maria was caught by a paroxysm of coughing. The next moment she slumped to her knees in the mud.

The lecturer continued, "The first thing you must be sure to do is check..."

"Come on, Maria", shouted Martin. "Up with you."

"Stand up, child", commanded her father.

They hoisted her to her feet, only to have her sink again to her knees.

At this moment Ramona, arriving later for the class, hurried into the patio. She stopped in her tracks at what she saw, and cried, "My God, Martin, what are you trying to do to her? Poor Socorro! Can't you see she has shit all over herself!"

My eyes lowered to the yellow muck on Maria's legs. This, for sure, was no act. I jumped to my feet and ran toward her. The others followed.

Her breathing at first was irregular; short series of rapid, strident gasps, separated by long ominous silences, as if she were holding her breath. To our relief, the intervals gradually grew shorter, until her breathing was again more or less as it had been before. Weakly, she lifted her head, looked searchingly about and gasped. "Air." Her father took off his sombrero and fanned her despondently.

Maria's gown and legs were smeared with yellow diarrhea. The newly arrived lab tech hurriedly brought a damp rag, and dropping to her knees, scrubbed off a bit of excrement which had soiled Martin's pants cuff.

Suddenly our callowness hit me like a club. Here was Maria, whom I had known as a proud and beautiful woman, reduced to kneeling in her own excrement while a pack of gaping onlookers milled about her, like flies around offal. I recalled how, only a few days before, she had made Benjamín empty the contents of her bedpan, embarrassed should we see it.

"Hey", I urged, "Why don't all of us menfolk get out of the way, and let the womenfolk help clean her up." I began walking to the porch.

"Talk about a male chauvinist pig", chided the new lab tech.

I pivoted and blurted out, "If I thought it would be less humiliating for Maria, I would clean her up with my own shirt. Can't we just for once think of her." My anger was out of proportion, and left the poor lab tech bewildered.

We menfolk had just reached the porch when one of the women cried, "My God! I think she's stopped breathing."

Swiftly, the medical team jumped into action. Dr. Robby ran up with a plank and he and Dr. Mike rolled Maria onto it. Dr. John began heart massage while Robby, holding her nose, blew into her lungs after each five compressions of the chest. "Adrenalin!" cried Dr. John, "and a three inch 20 gauge needle!" When they were brought (the latter took some tracking down), Dr. John counted down the right number of ribs and thrust in the long needle. It bent. "Another three inch needle", he demanded. This proved harder to find. Our volunteers tore open boxes looking for one, for it is something we rarely use. "Hurry up with that needle!" shouted Dr. John. Not finding the needle in the operating room, I ran back through the patio, across the porch and into the dispensary, where I remembered having seen a spinal anesthesia kit in one of the drawers. Locating it, I ripped it open, snatched up the needle, and ran back. In the doorway to the porch I nearly collided with Benjamín, who stood clutching the wooden door frame, sobbing hysterically.

As I ran down the steps, I thought to myself, "Another child would have been simply baffled by the immediacy and confusion of death, but not Benjamín, he knows the scent." And across my mind flashed once again the image of his small form bounding along in the back of the Power Wagon beside the stiffened body of his father last Christmas morning.

As Dr. John thrust the needle into Maria's silent heart, I placed my hand on her damp forehead and

whispered, so low that only she might hear me. "Come back, Maria. Please come back." But she was gone.

Each of us, I am sure, knew it (the dogs inside our hearts had begun to howl); yet none of us had the courage to face up to it. The loss was too great, the implications too threatening. So it was that our team continued to work on the body, thumping at its silent heart and breathing into its vacant cage, for a full ten minutes after its pupils had dilated and its skin had turned to wax. Throughout our pointless heroics, Maria's blank, unwavering eyes fixed challenging upon us, as if to say, YOU WHO KNOW SO MUCH AND ARE SO SURE, WHO NOW IS THE PRETENDER?

Benjamín, who had nothing to hide from -- nor behind -- howled from the doorway as uncontrollably as a kicked puppy. Finally ... we, too, admitted defeat. We carried Maria's body onto the porch, where a couple of elderly village women dressed in black, who had materialized on the spot as mysteriously as genies, began to bathe and change her. They dressed her in a white gown which Ramona brought from her home across the street. Meanwhile, Benjamín continued to sob inconsolably. I stood back. Already, there were too many well-meaning and disillusioned adults trying to force their way across the no man's land into that lonely naked world of the orphaned child. Benjamín buried his face into the unyielding door frame and shook off the hands that sought to comfort him. Old Juan, standing as silent and rent as a lightning-struck oak, looked mutely down at his big hands. Dr. John, who would have felt awkward trying to comfort the boy, said to me, "Oughtn't we to ask her father if we can do something..."

Interrupting, I blurted stupidly, "We ought to ask his forgiveness!"

I turned and stumbled into the darkroom, shutting the door behind me. There I wept as I have not since my childhood. My weeping, I know, was selfish. It wasn't so much Maria's death that wracked me -- her death was perhaps inevitable -- it was the way she died. In her hour and moment of greatest need, we had done it so stupidly! So complacently, so blindly! How could we have let it happen? How could I have let it happen? Well, it was done.

And the blood on our hands was no longer mortal; it was universal. No, I wasn't weeping for Maria, or even for Benjamín. I was weeping for the death of something inside of me, something I had believed in: the death of Kindness, the death of Love....

Slowly, as I crouched in the darkness, a new light began to glimmer from the ashes of despair. With a start, I realized that Kindness and Love had not died; rather, they had been rekindled by Maria's death; they were in the throes of rebirth. What had died had been something false and petty and obdurate within us, something which needed to die, to be wrenched from our breasts so that Love and Kindness could find more room in our lives. Unwillingly and unwittingly, Maria had been the martyr to the cause of our knowing ourselves. To this end, her untimely death could not have been better timed. I shook my head in baffled and respectful amazement.

Strained voices reached my ear from outside the darkroom, and I went out. Martin was sitting on the edge of the examining couch, his moist face pressed into his hands. Dr. Robby and Dr. Mike were standing beside him. Robby said, "Come on now, Martin, it's not your fault."

"But I was shouting at her, dragging her, like an animal", choked Martin.

"You were doing what you thought was right", insisted Robby.

Martin shook his head. "No, I wasn't. I knew that wasn't right. It's never right to be cruel. I can't understand what came over me."

"Maybe it's truer to say", said Dr. Mike, turning to address Robby, "that Martin did what we thought was right. After all, we set the example."

Robby nodded slowly. "That's true, Martin. It was our decision to be so strict with her. And to make her walk. Don't blame yourself."

"I know, I know", said Martin. "But even so, I should have known better."

“We all should have known better”, said Robby.

“Don't reckon it's ever too late to learn”, said Dr. Mike.

Martin stared at his slender hands, and whispered, “Poor Benjamín.”

We carried Maria's body up the street to the house where, earlier that same afternoon, we had intended to dispatch her on foot. She was laid out on a burlap cot, decked with bougainvillea and dahlias, and the noisy wake began. I convinced old Juan to let us take care of Benjamín for the meantime, as I could see no advantage of having him sit through the long night with a covey of wailing women; of tears, he had already shed his share. The journalist took the boy to the house of Martin's family, but unable to suppress his hysterical sobbing by the end of two hours, brought him back to the clinic.

It was Martin who was finally able to bridge the gap to the suffering boy. He simply took Benjamín by the hand and led him to a cot in the back room, where he lay down beside the boy and let him weep, not sympathizing, but just there. When the child was at last empty of tears, they both got up and went over to the typewriter. Benjamín had never touched such a strange and many-buttoned thing, and his child's curiosity was sparked. Martin taught him how to peck out his own name and, within a quarter hour, the boy was laughing. It may have been hard on the typewriter, but it did wonders for Benjamín and for Martin. Although the typewriter was mine, I did not protest. It was high time a machine came second to our feelings.

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Maria's death had a profound effect on all of us. It stopped us in our tracks, forcing us to stand back and take a sharp look at ourselves, what we are about and where we are going. It pricked the bubble of our self-assurance and left us all, I think, a little more humble. In the couple of remaining days before the visiting team flew home, we had many soul-searching discussions.

Dr. Robby, in one of these discussions, shook his head and said something like this: “It's hard to believe we could have been so blind. So callous. And on purpose! ... that's the frightening part of it. We held at bay our natural urge to give Maria the compassionate support she begged for and we could have so easily given, because we were so set in our opinions about what was best for her and the clinic. At the end we were actually paying more attention to our decisions than to Maria!”

Robby frowned self-consciously, “You know, I used to take pride that in my brief career as a doctor I had never, to the best of my knowledge, committed any technical errors. Now, all of a sudden, I realize the biggest errors a doctor can make aren't technical, but personal. It's so easy in modern medicine, with its endless maze of techniques, technology and technicalities, to lose sight of the patient altogether. We tend to get hung up in the details of illness ... The science of medicine endangers the art. Believe me, from now on I'm going to listen a little more closely to what the patient is trying to tell me, and show a little more genuine feeling.” Dr. Robby knocked on the edge of the table on which he was sitting. “At least, I hope so.”

The morning after Maria's death, Dr. Mike approached me where I stood alone, to tell me how badly he felt about the way things had been handled at the end. “I know we can't undo what's done”, he said. “But I just wanted to tell you, David, that I think all three of us M.D.s are going to be one heck of a lot better doctors for what happened to Maria. I know I will be.” He extended his hand. “Well, I just wanted to say thanks.”

“Thanks for what?” I asked him, taking his hand.

“I guess thanks for letting Lynne and myself come down. I'm not sure if you guys wouldn't have done better without us, but it's given me a whole new outlook on medicine, and where I'm at...”

Dr. John, being older and wiser than the rest of us, kept most of his ideas to himself, yet I could tell the event of Maria's death affected him deeply, perhaps more deeply than any of us. Preferring actions to words, he quietly took up a collection to pay for the simple wood coffin which was

prepared for Maria. This meant a lot to old Juan, for it showed him that we shared some of his feeling. One post-Maria comment by Dr. John has stuck with me: "When a patient says, "I'm dying", assume he's right."

Martin was unable to talk dispassionately of Maria's death for several days, but one morning, after the doctors had flown home, he said to me, "I've been thinking, David, if we'd been alone here in the clinic, I mean with our usual group of medics and apprentices only. Maria might have died, but not like she did. Because we're not doctors, I guess we're not so sure of what we're doing. You know what I mean? We're forced to rely a little more on our feelings. We would have had to listen more to Maria and what she said her needs were, because we wouldn't have had quite so much trust in our own judgement. I know we aren't as highly skilled, and probably we wouldn't have practiced as good medicine. But for Maria, even the best medicine didn't work. Maybe kindness would have...."

"One thing I learned", continued Martin, "is that doctors are just people like the rest of us. And you know something else I've learned?..."

"What?" I asked.

"That I should do what I feel in my heart is right. I knew I shouldn't have treated Maria like that."

"I knew I shouldn't either", I said. "Martin, I think we learned the same thing. How did you put it?"

"To do what I feel in my heart is right."

* * *

As for Benjamín, he must have learned something too, although I hesitate to think what. I suppose he learned that the behavior of adults is incomprehensible. But then he knew that already. In his philosophic way, he seems to be as understanding of our hardhearted treatment of his mother, as he was of his mother's unfair treatment of himself.

One thing that Benjamín has learned since his mother's death is that adults, at least in retrospect, can be kind. Martin has taken him to live with his own family and is like a father to him, although more gentle. Charlotte, the journalist, periodically sends him clothing, as well as funds to help with his living and educational expenses. Dr. Robby has made possible a cow, so that the youngster can have milk to drink. Short of a mother and father, what more can a small boy ask?

Old Juan would have answered, "Beans."

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Note: The above story, "What we learned from Maria," was the main article from *"Newsletter from the Sierra Madre" # 10, April, 1975*. The articles in the first half of the seminal newsletter can be found in the paper, "Primary Health Care and the Temptation of Excellence."