The Left Atrium

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An experience

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old doctor in Nigeria, one of my
goals was to train as many Nigerians as
possible for medical work. One of my
students was a 15-year-old pastor’s
daughter who gained some basic med-
ical training at our mission hospital.
She went on to midwifery training in
the early 1970s, and then returned to
work in the mission.

My family returned to Canada in
1976, where I entered psychiatry. When we returned to Nigeria for a visit
eight years later, this young woman,
whom I will call Ruth, came to consult
me. Her complaints were obvious to
any physician: shortness of breath, an-
kle edema, coughing when lying down,
low energy. She asked me to examine
her; when I did so, I recognized a clas-
cial mitral regurgitation.

She asked if medication would help.
I told her that unless she had an oppor-
tunity to go to North America for valve
replacement, nothing could be done. I
advised her about general care, taking
antimalarials to keep her hemoglobin
up, vitamins and regular exercise.

When I visited Nigeria again in
1995, Ruth was one of the first to greet
me. She was very eager for me to listen
to her heart.

She described how she had gone back
to nurses’ training but had become in-
creasingly short of breath. She spent one
day in classes and the next two in bed to
reduce the edema. She had become dis-
couraged and depressed, to the point
where she, a practising Christian and a
pastor’s daughter, went to consult the lo-
cal witch doctor. He said that he would
be glad to help her if she brought a goat
and two chickens for sacrifice. Once back
at home, she began to feel guilty about
resorting to magic, and so did not return
with the goat and chickens.

The difficulty of furthering her educa-
tion was becoming very stressful. She be-
came more and more discouraged, to the
point where she began to express a pas-
sive wish to be dead. During this time a
friend and classmate invited her to attend
a healing service. Ruth was not familiar
with such things; she had grown up in a
conservative evangelical church, whereas
this healing service was charismatic.

Ruth had no expectation of a mira-
acle. Her concept of healing had more to
do with the natural healing ability of
the body. She would occasionally pray
that God would allow the natural
 course of an illness to lead to recovery
rather than taking a fatal turn. Her
most expectant prayers were that God
would give the doctor wisdom or the
surgeon skill to help heal someone else.

The service, as she later described it,
was held in the open air, outside the
church, which was too small to contain
everyone who came for healing. After the
general service the minister called people
to the altar, according to their disease or
sickness. People fell to the ground, as if
unconscious, and were carried into the
church. Ruth waited, but her own illness

died. The service continued; a little bell
was rung. The censer was swung from
side to side, filling the room with the
mytical aroma of incense. After about
half an hour the service came to an end.
With the last “Amen” the priest came
over to me and shook my hand.

“Sorry, Doctor, we didn’t mean to
hold you up.”

“No, no, that’s fine, of course.”

A tearful niece came toward me as
everyone stood up and cleared the way.

“She has a terrible cold, Doctor. I’m
afraid this is the last of her.”

She led me to the alcove, where to
my surprise ‘Tante was sitting in her
bed and looking the same as ever. No
closed eyes, or sweating or fevered
brow, just the same little Tante in the
same little bed as always.

I looked as grim as I could and went
through the usual performance, which
the niece watched as though I were
about to give her words of terrible im-
port. But everything was as always. No
fever, no racing pulse, blood pressure as
before, hemoglobin the same, little frag-
ile Tante with no change whatsoever.
Behind the niece, relatives crowded
sadly and a little girl whimpered.

Here was a special situation. I pre-
sumed that the niece had woken up the
priest and the family with the expecta-
tion that the last rites were needed. I
couldn’t let her down.

“I’m afraid she’s very sick,” said I, as
gravely as I could manage and breathed
a long, sad sigh. Of course I felt a little
guilty, but what was I to do?

“I’m going to give her an injection,”
I intoned. I reached into my black bag
and brought out a little kit with a sy-
ringe and ampoules, cleaned Tante’s
skinny little shoulder and gave her a
symbolic amount of penicillin. I
counted out some tablets, suggested a
half tablet every four hours and looked
the niece in the eye sympathetically.

“I’m afraid she is very ill,” I said. “I’ll
do my best, but Tante is not very strong
and you will have to be prepared.”

“Oh, Doctor. Thank you very much,
that’s all we can do — our best — and
pray for her.”

I nodded my head gravely.

The niece cried and thanked me
over and over again.

“Call me in the morning and let me
know how she is.”

“Oh yes, Doctor, of course, Doctor.”

And I left the sad house and the
warm kerosene glow, drove out onto
the muddy path and started down the
gravel road toward home.

The next morning the niece called me.

“Doctor, Doctor, we are so grateful.
Tante has recovered, she’s fine this
morning. It’s a miracle.”

“Oh wonderful! Let me know if you
need me again.”

I could feel a little tremor as Hip-
pocrates turned in his grave.

Alan J. Lupin
Honorary Professor
Department of Surgery
University of British Columbia
Vancouver
was not mentioned. She couldn’t restrain herself for fear that the service would end before she was called. So she forced herself to the front of the crowd. And there she fell down, as she described it, “under the power of the Holy Spirit.” This was something she had never experienced before and did not understand. She returned home, confused, but feeling that in some way “something had happened.” She felt a little better, but not markedly so. In the next days she felt more improvement. She began to wonder what might have transpired in the healing service; and so she came to consult me, bringing her stethoscope to the only doctor who had listened to her heart before this strange event.

Miracles and meaning

In April 1987 hematologist and medical historian Jacalyn Duffin was asked to provide an expert medical opinion on a set of bone marrow samples that later proved to concern the prolonged second remission of acute myelogenous leukemia in the case of LN, a Roman Catholic who had prayed for divine intercession to Mère Marie-Marguerite d’Youville, the founder of the Grey Nuns of Montreal. LN’s medical records and Dr. Duffin’s testimony were among the evidence presented to the Vatican in the cause of the canonization of Marguerite d’Youville. In an article published in December 1997 in Saturday Night magazine, Dr. Duffin reflected on the strange case of LN and the making of Canada’s first saint.

Throughout this adventure, I kept thinking that miracles were harder and harder to come by in this age of technology, scepticism, and speed. Surely, the Church was vexed by the relative subordination of theology in the saintly decision-making process to a committee of medical professionals whose very language was constructed to reduce experience to molecules and probabilities. Now, I am far less certain.

A miracle is something that exceeds our expectations, that defies the “rules” — be they medical or spiritual — constructed by humans to identify, label, and comprehend our experiences. LN continues in miraculously good health seven years after our journey to Rome, but had she been healed of fever and bruising 200 years ago, no-one would have seen a miracle. Leukaemia had not yet been recognized and the medical rules for diagnosing it had not been developed — nor had its dismal survival rates been defined.

Historians know that diseases are only metaphysical entities. In a sense they are merely theories about illness, which tend to favour objective, passive explanations at the expense of the subjective and active stories of people. In fact, the “invention” of a disease, along with other inventions like microscopes and blood smears, opens up a whole new realm of previously unimaginable possibilities for miracles. ... On my lengthy journey to St. Peter’s Basilica I may not have been converted to formal religion, but I was brought to acknowledge a truth — a truth that I had previously managed to avoid. A miracle simply falls outside the honesty made and well-established boundaries of what two radically different sets of human rules teach us to expect. Since there is no limit to the diversity of our existence, miracles can happen every day.

Jacakyn Duffin
Queen’s University
Kingston, Ont.

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