HEALING ARTS

Materia Medica

Case Report: An Unusual Presentation of an Incomplete Sentence

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He wanted to finish seeing the patient. He wanted to keep typing as he listened, but the middle of the sentence either disappeared or never appeared in the first place. He closed one eye, then the other. He knew enough to do that. But the sentence would start okay, and end okay, then nothing in the middle. He made sure his glasses were on straight. He took them off and wiped them with his tie. He tried tilting his head as if looking around the corner of the sentence to catch the middle off guard. That worked about as well as looking behind the mirror. He kept talking to the patient, open-ended questions mostly, and then listening. This particular patient always had a lot to say and usually at this point in the visit would ask for *something a little stronger, something to get through the night with*. While trying to listen he couldn't help asking himself *how long is the window of intervention for a new stroke?* Not long enough, looking at his schedule that afternoon. Or trying to look. Whatever was going on, it was not conducive to good listening. Since the problem was not in either eye it had to be somewhere in the brain, which was not a pleasant thought, not that he was thinking too clearly. Thinking about his thinking, he noticed he could still be mindful, or at least half mindful. He thought about asking the nurse for an aspirin. That might buy some time.

The posterior circulation occurred to him, but who wants to go there? But who isn't curious enough to go there? He'd been trained to localize lesions, and one of the first things he learned in med school was how to use the word *lesion* in a complete sentence. Of course, that would have been a sentence with a middle as well as a beginning and an end. While the patient was disrobing (another word he started using in med school) he paged his neuro-op pal who confirmed it was just a migraine. Good. Who has time for a tumor? Or a bleed inside whatever had up to then been silent?

But why migraine—his first—and why then? Something else to blame the EMR for. It was the proximate cause of new glasses just for the computer screen. If not eye strain, maybe clinic schedule strain: 20 min for a follow-up? Sure, if you leave out pain and suffering. By the time each word in each sentence stayed precisely where he put it, he was half-way through another patient and hardly running late.

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