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Praise for health care heroes appears on factories near highways, covers billboards across the city, and rings at the sound of police siren concerts in the evening. The existence of doctors, nurses, orderlies, and other allied health care professionals is raised on a pedestal. Suddenly what they were doing yesterday merits attention and a wave of recognition flows toward them. I am surprised by my own role in this global saga. I am unexpectedly aware of my ordinary daily gestures; my regular hospital commute transformed into an epic parade. I am reminded of an old childhood photograph where I stand proudly, draped in a fairy dress, shoulder to shoulder with my brother. Halloween, a time of the year when we delight in imagining scary characters and evil creatures. Today the threat is real, and our costumes are far from amusing. I instantly realize I am a doctor through the eyes of thousands of strangers. I examine my hands. Whose are these? What will they accomplish today?

Sitting at home I avidly scroll through the newsfeed: a tsunami of information composed of new daily threats and absurd realities flood my mind. Every e-mail notification rings a bell in the silence of my empty apartment, threatening like an anvil of doom hovering above our heads. Something from the life we knew before has slipped away and cannot be found anymore. The March sky is grey, and the streets are soulless. As the harshness of winter recedes, nature enters its yearly revival revealing sidewalks littered with shameful garbage and morose plants. It is spring and everything is ugly.

All known aspects of our day-to-day lives are turned upside down. Yet, within my immediate surroundings not a single detail has changed. Netflix continues to be a cascade of shows fulfilling our curiosity, neatly contained in a square box, while life seems far removed from the one depicted on TV. I wake up every
The moment arrives when I must cross the threshold of the COVID-19 wards. After many weeks of anticipation, I am unspeakably afraid, yet relieved to finally face the scary characters and evil creatures. We are at war and I am called to serve; the health care heroes are its soldiers while the enemy is an invisible virus. How do we win a global pandemic? How does this all end? There is inherent aggression in this battle metaphor, one I cannot quite wrap my head around. My mind is cluttered with diverse images: of families losing their loved ones, those who lost their lives, and those left behind. While I recognize our need to dominate and conquer this enemy, I can not help but think of the drawback from fighting, which becomes inevitable exhaustion. Where do soldiers and casualties in war zones rest? Warriors combat and kill whereas doctors provide care and cure. I learn to float somewhere in between the former and the latter: the talon and the hand. In this war, I crave the human touch that binds us all together across life, death, and everything in between. Fortunate to be young and healthy as I begin my career, I carry an intact reserve of soft compassion for the patients I serve. I cultivate a space for these attributes someplace hidden in my heart along with my use of modern technical medicine tools. I am a young sailor boarding a ship traversing rough seas towards novel, dangerous territories with a picture of a fiancé tucked inside my coat pocket.

One Monday morning I feel nervous because I have been redeployed to an unfamiliar environment necessitating untried tasks. I slip a visor over my head, as I seek ease in the ritual of gearing up with personal protective equipment. I don different layers, each concealing an unfinished, raw piece of me that is not feeling ready yet. Fortunately, the familiarity of medical ward routines reminds me of the unremarkable nature of our day-to-day work. Pandemic aside, the electronic medical records annoy me. The nurses chat amongst themselves, complaining over their tedious schoolwork and examinations. One staff member babbles about her grandson learning to walk for the first time. Endless quiet nights are spent mindlessly watching football replays. Loneliness haunts me. Patients are secluded in their rooms; they become a diagnosis with documented problems. Their names become familiar; their characteristics are committed to memory. Who are they outside this enclosed setting? I am a bystander witnessing a long wait for their lungs to recover thanks to a constant flow of oxygen hissing in their room.

One night I admit a lady from the intensive care unit who just recovered consciousness after a protracted week of intubation. She frowns and tells me that she would not wish this disease on her worst enemy. She reminds me of my mother. She is a kind, tiny, Vietnamese woman with short black hair. She tells me about the Asian marketplace I used to go during my childhood anticipating eating delicious banh mi. She
embodies the furiousness of a fearless mother and the fragility of a woman who has been worn down by countless hardships. She has two adolescent children who work outside the house, one in a grocery store – he may have brought the virus home. She had been careful, diligently following all the public health recommendations. Now, her entire family is infected, and she ended up attached to a ventilator, a few breaths away from death.

I stand two meters apart from her dressed in scrubs and a blue cape, masked, hidden. I look like an awkward bird. She cries and declares God saved her. I look at her with my eyes, the only part of my body that remains visible. I simultaneously wonder about God, the virus, and the parameters on the cardiac monitor. I feel small, albeit immensely privileged. Before I make my way out of the room, worrying I might have spent too much time in there, she asks me to write a thank-you message on the board to all her caregivers during the critical part of her illness.

I realize something astonishing happened. Her story is probably very common. I am just another health care professional. But somehow, we all became wonders amongst many others – like a wave in the ocean, a flower in a field, a simple star in the night. It is a quiet insurrection, a successful claim for life in an ordinary hospital room. I am struck by the humble, undemanding beauty of this process.

At 5 a.m. the sun rises and shines into the on-call room. It illuminates the sky, promising a bright new day. It is magnificent and celebratory. I am grateful that all the patients in my care made it through the night and my worries vanish instantly with the dark. While groggy and stale from a nearly sleepless night, I feel energized from the excitement of the end of my shift. Ça a bien été. [Everything went OK]. From the 19th floor window, I watch hospital staff line up and enter the doors from the parking lot clutching coffee mugs. The contrast between the ghosts at night and the mundane workers of the day is quite amusing. No one would believe that the hospital houses a parallel fantastical world, where anything can happen, during the briefness of a night. We do not believe in fairy tales. The hospital is a serious place. I wonder if the staff I sign over to in the morning can smell a subtle jungle whiff on my scrubs.

When I return home fatigue rushes over me, even though the sun gently suggests that I continue with my day. I stand by my doorstep and question what a health care hero is. What makes the ordinary extraordinary? If a hero defines itself by its distinguishable virtuosity, what does an army of heroes make of the concept hero itself? I hear my partner stirring in the kitchen. I carefully remove all my clothes and toss my shoes away to avoid contamination. I sit and stare at my backpack. I wonder how many virus particles crawl on its surface. My backpack stays silent and seems to pretend life is normal. I toss a long overdue laundry load into the washer.

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