A Small House by **the Ocean**

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Mr. Chen, 75 years old, lives alone. In spite of his troublesome diabetes, he always greets doctors and nurses with a bright smile. It is hard to believe in Taiwan, where public transport is prevalent, the man has to get up at 5 am, ride a bicycle to the bus stop and take the 6:10 am bus to Hualien downtown, only to transfer to yet another city bus to the hospital in order to meet the 11 am appointment. If he is slightly late, he has to wait till afternoon to see a doctor. This kind of arduous commute from Changbin, Taitung to Hualien is a weekly routine for him.

Mr. Chen's blood sugar could no longer be controlled anymore by high dose of insulin or other regimen, or any other combinations of medication, which was the sole reason behind his frequent commuting. He often joked remorsefully: "I am getting old, and this illness cannot be cured." Although he resembles the smiley grandpa in the animation "Chibi Maruko Chan", the smile was absent.

Knowing his difficulty of commuting, we tried very hard to control his illness, but without success. After discussion and review, it seems that factors affecting diabetes are food, exercise, and medication. Of these, two thirds of the responsibility is on the patient. Since it is difficult to explain to the patient, we decided to go to his house and take a look at his actual living condition.

Tzu Chi volunteers often visit patients at their homes. When patients cannot come to us, we go to their homes.

Home visit is a way to serve patients' need; at the same time it offers the opportunity for people who are healthy and financially sound to help others. Since I am an instructor of interns, I often tell the students that patients live their lives differently, which makes them vulnerable to different diseases. Experience may sometimes be more effective than lecturing, so I decided to take them with me to the home visit.

I informed Mr. Chen's family that we were coming to see him. They were pleased and wanted to find out why his diabetes was so difficult to control. His family gave us directions to his house: "Take Highway No.11 and pass 'that bridge', the house is on the left down the industrial road." It seems to find the address might be impossible because it is not even on GPS.

One day before the trip, I told the students about the home visit, to which they expressed their enthusiasm. After teaching them many times about the effect of daily habit to the disease, I finally get a chance to let them see in person.

We left the hospital at 7 am and went to Highway 11 South. Beside myself, there were four 7th year medical students, one resident doctor and one social worker. I arranged several home visits in the schedule, so by the time we arrived in Changbin, it was already 3 pm.

Mr. Chen's house was on the other side of the bridge, located on the hill and facing the ocean. The scenery was spectacular, but it was a remote place far away from the village. No wonder he had to take several hours to go to the doctor.

A tall student almost banged his head against the doorframe since it was so low, but it was because of the limited height, the door shielded the house from the bitter ocean breeze. The house was crude, with no T.V. in sight. Mr. Chen, seated on the wooden chair, was waiting for us since the day before. He took out his glucose monitor in order to compare with ours. The result was quite different.

In the beginning, we thought that his incorrect monitor made his diabetes difficult to control. We were relieved and told him about the importance of a healthy diet. It was close to noontime, and we wanted to see if he keeps the low salt and low fat diet. We entered his kitchen.

In the kitchen, there was a refrigerator, a couple of pots and pans, and a simple set of table and chairs. I asked him: "Mr. Chen, what do you eat for lunch?" He opened the refrigerator and pointed to the squash and a bowl of rice. He said, with few thousand dollars of annual pension, there were not much left after utility bills and transportation fees to and from hospital. Noticing our worried expression, he said: "It is fine. My teeth are not good anymore. I cannot eat hard meat or other vegetables." All kinds of feelings filling up in our hearts, we could only ask him about his relatives and friends. He has a son who proposed to take care of him in the city, but he is not used to the apartment living, so he rejected the offer.

Mr. Chen chose to live in the house by the sea and lead a life of unfettered freedom, but we were worried about his health that needs constant care and close monitoring. Furthermore, under this poor living condition, it is hard to abide by the diabetic diet.

Everyone remained silent after we left Mr. Chen's house. All the sudden, an intern said: "Why don't we buy some food for Mr. Chen!" Thus, we turned around and headed for the nearest town, Chengkong. We found the largest supermarket in town and bought a cartful of groceries. We went back to Mr. Chen's house and stocked up his refrigerator with the groceries. After leaving his house, everyone's heart was filled with thankfulness.

White Robe's Reflection

The above story happened in 2010. Mr. Chen continued his follow up in Hualien Tzu Chi Hospital. However, he failed his appointments for half a year now. We tried calling yet no one answered. We thought he probably went to live with his son, or maybe he had passed away. This episode became our unforgettable memory.

There are many facets to disease control, which are normally beyond the ability of simple drugs or medical personnel. Living conditions, under certain circumstances, may weigh more than others. Like diabetes, diet and exercise play important roles. Abiding by "low sugar, low fat and low salt" diet may significantly delay the occurrence of complications. However, if one cannot even maintain a basic living condition, it is difficult to follow the above rules.

On the other hand, teaching humanities to young medical students with actual site visit is way better than classroom lecture. Even if one reads countless textbook cases, it still takes years of medical practice before one can truly empathize the impact of diseases to patients' lives. If one can grasp this knowledge earlier, it can alter the perspective of how one study in the future.

I do not know if, after the home visit, those students will be more compassionate to their patients, but I believe in their memory, there is a little house on the seaside that filled with passionate, affectionate embraces and love.



As an instructor for interns, Dr. Ming-Chen Hsieh not only teaches medical knowledge and techniques, but also hopes to inspire their passion to practice medicine.