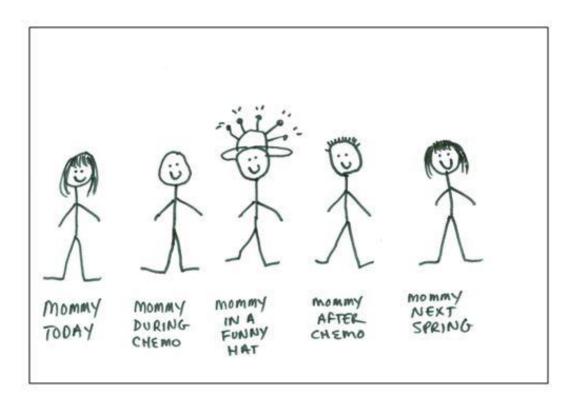
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'Chemo' Shouldn't Be Part of His Vocabulary

By Philip Lerman

The news was a relief: The little spots on my wife Rachel's mammogram were probably nothing, but the doctor had ordered a biopsy just to be safe. Sure enough, it came back benign. So when the doctor called again the next week, I didn't think anything of it.

Until Rachel got off the phone. "They mixed up the reports," she said, with a look on her face I'd never seen before, the twisted smile of a woman betrayed by a terrible cosmic joke. "The good biopsy was from four years ago. They just faxed over the right report."

She took a deep breath. "He used the word 'cancer.' "

Through the reassuring hugs and the brave lies we told each other over the next few hours, as we scrambled to our computers to catch up on 20 years of articles on breast cancer that we'd both always ignored, one question waited:

How am I going to tell Max?

Max, who'd just turned 7, had lost his grandpa to cancer in the past year (and by sad coincidence, his dog, as well). So telling him that Mommy had cancer was sure to raise horrible questions. I had no clue how to answer them. Telling Max's older sister, in college, was excruciating -- but this was absolutely impossible.

My mother also received a diagnosis of cancer when I was 7. My family's solution was denial: No one ever told me she was sick, let alone used the word cancer. One afternoon, my mother was taken away to the hospital. I asked my father why she was going in an ambulance. "It's just cheaper than a taxi," he said, which sounded perfectly plausible to me. I went off down the sidewalk to play ball. And I never saw my mother again.

I could not even begin to deal with the fact that, once again, we were walking near that dark abyss. Rachel will survive this, I told myself; there is no question. Nevertheless, I was aware that, somehow, I had to let Max know what was up.

It was easy, at first. The doctors told us we'd caught the cancer early, and they used the terms that all cancer patients quickly learn and hang their hopes on: The tumor is less than a centimeter. That's good. The cancer has in all likelihood not reached the lymph nodes under the arm. That's huge. We're probably looking at a lumpectomy, not a mastectomy, followed by radiation. No chemotherapy. That's enormous.

Buoyed by reports from other survivors of this early-stage breast cancer, we stayed brave and cheerful around Max: Mommy's having an operation, and it will make her sore for a few weeks, but then she'll be fine, we told him.

But it would not stay that easy. Because after the operation, Rachel's surgeon sat down with me in the waiting room and laid it out straight. "It's much worse than I thought," she said, explaining that the lesion was more than three centimeters. "I had to take out 21 nodes. Ten showed involvement. That means Stage Three cancer at least. You're probably looking at intensive chemotherapy. We'll have to do a scan to see if it has metastasized anywhere else in her body. I'm sorry."

I did what any other husband and father would do in that badly lit room filled with posters of cheerful cancer survivors. I looked out the window and cried, the one and only cry I would allow myself though the whole process. And then I went off to reassure my wife and figure out what I would tell my son.

In the days after the operation, Max was happy and helpful. But as chemo day neared, I knew I had to break through my fear. I started over our nightly bowl of ice cream.

"Do you know why Mommy had to have an operation?" I asked.

"No, why?" Max said, not paying too much attention, having just crested that perfect moment when the ice cream soup begins to form.

"They had to take out a tumor. Isn't that a funny word? TOO-mur?"

He laughed. "TOO-mur. What's a tumor?"

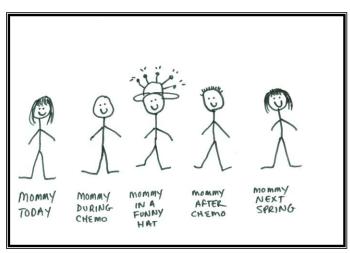
"It's like a teeny tiny bit of cancer," I said, as nonchalantly as I could. "And they got it all out. The whole thing. Want some more ice cream?"

That was it. I'd dropped the nuclear bomb, and I waited for reports of devastation.

They never came. The next night, I took it another little step, explaining that Mommy had to have some really, really strong medicine called "chemo" that would make her very tired, but it would make sure no tumors ever came back.

My plan, over the coming weeks, was to be honest, say what I needed to say and then move on. If Max engaged, we'd talk a bit; if he didn't, I'd drop it. I never had the Big Talk; just a lot of little ones.

At one point early on, we decided we'd better prepare Max for his mother's impending hair loss. Rachel handled this one. She drew a series of stick pictures on an index card, showing how Mommy would look at various times -- with her hair, and with no hair, and a hat, and so on. This didn't go so



well; Max seemed really uncomfortable ("Mommy, I only want to see your bald head one time, and then no more, okay?"). We decided to "accidentally" leave the card on the breakfast table, so in the next few mornings, Max could notice it and raise the subject himself.

One morning, he stunned us.

"Daddy?" he said, looking down at the card. "How come the chemo can't tell the difference between cancer cells and Mommy's hair?"

Rachel and I looked at each other. How amazing. He had actually been listening. We talked about how chemo is pretty dumb not to know the difference between cancer and hair, but at least it's smart enough to do the job and to make sure the cancer never, ever, ever comes back. We even made up a chant:

"Yay, chemo! Glad you're in the hood!

You may be pretty dumb, but you work real good!

Gooooooo chemo!"

We are not trivializing this. We are just trying to make cancer be, for Max, what it has become for us: an enormous pain in the butt. But, God willing, it is not the end of the world. Our world.

Even as they were going on, the conversations with Max felt alien to me. In writing about parenting, I've heard from a lot of people who say parents today shield their children too much -- from disappointment, from pain, from reality. They may not be entirely incorrect. I don't agree with their gripe that over-protective, overly attentive parents (like me) are doing their children real harm. But their message does contain a helpful lesson: You cannot always protect your child from reality, but you can give him the tools to cope with it.

It's not the worst lesson in the world. I just wish I didn't have to learn it this way.

We try, most of the time, not to consider the enormous implications of what's going on. Instead, we deal with the day-to-dayness of it all: which days Rachel feels good and which she doesn't; which days water is going to taste like metal, or she can only stomach carrot soup; which days she's supposed to take which medicine -- the Decadron, the Emend, the Zofran, the Ativan, the Prilosec; and so on.

And so it has become for Max: a matter of daily details, not unfathomable fears.

Rachel saves her energy for playing games with him in the afternoon and reading "Harry Potter" every night. He knows Mommy will be done with all the medicine by his birthday, and the two of them are already planning the party. He remains part of it all, which is probably the most reassuring thing to him, because it doesn't feel like there's any big secret: We never speak in hushed tones; we don't wait for him to leave the room when we plan our doctor visits or answer questions from friends about how bad the symptoms have been. If we're not hiding something, then there must be nothing to hide. At least, that's what I hope he thinks.

And these days, Max's favorite thing to do is to pull off Mommy's scarf or hat, and kiss her on her big bald head.

Which is, of course, the best medicine of all.

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