

The First Sip

When I let myself into the house at 4:00 am, I normally do not expect to find anyone left awake in the house. I unlatch the door as quietly as possible, tiptoe in dragging my bags behind me, and kick off my wet shoes. A single lamp dimly lights the kitchen, so on my way to my bedroom I almost miss the other body in the room, hunched over his corner of the table.

“Hey dad, you’re still up?”

“Hm? Oh...you’re back late, huh...”

The words come out slowly, as if forcing their way through a sieve. I turn the light up to get a closer look at him. He could have just fallen asleep at the table, working on his lecture for the next day, but he could also be in life-threatening danger, and I have to make sure. As I start talking to him, I remember my first time.

It was in 5th grade, and I had walked home from soccer practice with the light outside just starting to fade. I was arriving home late, and I eagerly started peeling off my sweaty socks and shin guards in anticipation of a hot shower. As I hopped into the kitchen for some water, still tugging at the guard on one foot, I saw my father poring over some notes in his seat at the kitchen table.

“Sorry dad, practice ran a little late.”

“...Hm? Oh hey, you had practice today?” The voice sounded normal, but the delay at first was just a bit too long, as if he had required an extra moment to recognize me. Then again, perhaps I was imagining things.

“Yeah, didn’t I tell you? It’s every Tuesday too from now on.” I stuck my face into the refrigerator. “Is there any food left from last night?”

“...You had practice today?”

I frowned at him, pulling my head up above the refrigerator door. “Are you okay dad?”

“Yeah yeah, I’m fine, don’t worry about me,” he said in a suddenly lucid voice with an edge of annoyance.

Maybe I had been mistaken, but I could not ignore the feeling that everything was not all right. I shut the refrigerator and walked over to him.

“Are you sure? Have you checked your blood sugar recently?”

“Of course, I checked it...just...” he trailed off, and I knew he had not.

“You should probably check it again, I think it’s low.”

“Why? I’m fine,” he said, annoyed again, but not looking up, not meeting my eyes. He picked up his notes, looked them over, then put them back down with a frown as if they were not what he had planned to pick up.

I had seen this sort of behavior before, and I had watched my mother deal with it, but the only step that I knew for sure was to get him to test his blood sugar. Otherwise, if it was high instead of low, I might hurt him by feeding him. I would have to push him a little.

“Dad, it would make me feel a lot better if you would test your blood sugar.” I received a blank look in return.

With a sudden icy chill, I realized that he was becoming less responsive with every passing minute. I would have to do something quickly. I tried calling my mother, but the busy signal on the other end seemed to mock my inability to deal with the situation. My sister was out of town, and I had no way to get in touch with her. As I watched my father pick up and put down his notes for the fourth time, a sense of powerful responsibility settled in. My mother would be home in less than an hour, but there was no way I was going to just leave him alone and wait for her.

Now determined to get him better, I dug through his bag to find his blood tester, pulled it out, and set it up. “Here,” I said, “just test your blood, okay?” Again the blank look. He glanced down at the blood tester and reached out for the needle, but then suddenly seemed to change his mind and started putting the tester away instead. When I stopped him, he looked up at me blankly again. Next I tried doing the blood test myself, but the simple act of pricking his fingertip, which looks so easy when he does it himself, proved nearly impossible. In final desperation, I decided to appeal to his work, his passion.

“Dad, if you don’t check your blood, you’re going to miss teaching your class tomorrow. Come on, your students will be disappointed.”

“My...class?” It was the first verbal response I had gotten from him in some minutes.

“Yeah, it’s tomorrow morning, and if you stay like this all night then you’ll never make it.”

I watched as his eyes slowly came to focus on the blood tester. I stayed silent, not knowing what part of my words had brought on the reaction. I watched as he slowly but efficiently went through his blood-testing ritual, expertly pricking a finger and releasing a single drop of blood onto the conducting strip. The machine counted down from three, then produced a number, 20, much lower than the ‘normal’ cutoff at 70. I poured him a glass of orange juice and watched as he drank it, haltingly. He quickly settled into his normal routine for recovering from low blood sugar, and half an hour later we were conversing normally.

Always the scientist and professor, my father interviewed me in detail about his own behavior after he had recovered sufficiently. I found out how close a call this had been: a tester reading of 15 would have indicated a risk of unconsciousness, while 10 or lower would have put him at risk of going into a coma. Had I gone to a friend’s house instead of home, or gone straight to the shower instead of to the kitchen, or even just ignored the subtle initial warning signs, I could have returned to the kitchen to find my father on the floor. While we never explicitly discussed the sudden change in my responsibilities as a son, I found that he spoke to me more freely about his diabetes, and was more often willing to travel alone with me, trusting that I would be capable of handling his emergency care should it become necessary.

Now, seven years later, evaluating my father’s mental state in the dimly lit kitchen, I reflect briefly on how far I have come as a caretaker. I can quickly, through conversation, recognize that his blood sugar is low, though not anywhere near the

dangerous levels of that first incident. Still, however, without food or drink it could continue to fall.

Once again, I pull a glass from the cabinet and fill it with orange juice, placing it in front of him and telling him “you have to drink this so you can go to sleep”. The phrasing, it turns out, is the key to waking him up – to get him to do take action, I have to link it to some pre-existing plan in his mind, which in this case is his plan to go to sleep. Novelty will have the opposite effect, confusing him into unresponsiveness. My late arrival has already confused him, so I have to push a little bit more.

“Come on, you haven’t even brushed your teeth yet. It’s getting late.”

At this, he looks up at me, then at the juice, and reaches out and takes a few gulps. The hardest part is over, but for what may be the last time for a long while, I sit awake with him while he recovers. In a few weeks he will be helping me move into a dorm at MIT, and a few weeks after that his new wife will move into the house. For the last eight years I have felt responsible for taking care of him – even most doctors do not understand well the unusually brittle form of diabetes that he suffers from – so I cannot help feeling like I am abandoning him now. I know he took care of himself for a long time before I appeared, but as he gets older that will only become harder.

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