
NON-FICTION | SPRING 2015

The Dragonslayer

By Andrea Hansell

Jim stood for a long time by the red wall of the Raphael Room at the Gardner Museum, looking at Crivelli's St. George and the Dragon. In this painting the young George, exhausted but victorious, sits on his terrified, rearing horse and gazes down in wonder at the scaly monster impaled on his broken lance. We bought a postcard of St. George at the museum gift shop and hung it in the kitchen of our furnished rental apartment in Back Bay. I wrote across the bottom, St. Jim slays amyloidosis.

Amyloidosis, a rare and life-threatening blood disorder, was the reason we had traveled from our home in Maryland to Boston that winter of 2013. The most promising treatment for the disease, which had already damaged Jim's kidneys and was now threatening his heart, was a stem cell transplant at Boston Medical Center, a national center of excellence for amyloidosis treatment.

Despite the grimness of Jim's diagnosis, our first few weeks in Boston were relatively pleasant. Each morning we walked down Massachusetts Avenue to the hospital, where cheerful nurses infused chemotherapy drugs through the newly implanted port in Jim's chest. After being observed in the infusion area for a few hours, Jim would be discharged for the day. We'd get lunch at a little café near the hospital, then go out to explore our host city. The Gardner and Fine Arts Museums were frequent destinations. One day we walked along the Charles River and the Back Bay fens all the way to Fenway Park, where we told ourselves that later that spring, when Jim was recovering from the transplant, we diehard Washington Nationals fans might deign to attend a Red Sox game.

As the crocuses bloomed and magnolia buds swelled, we saw more and more posters sporting the bright blue unicorn logo of the upcoming Boston Marathon. There were route maps, requests for volunteers, and charity fundraising appeals from people running to raise money for causes ranging from cancer research to clean water. Jim examined the maps and said, "The home stretch goes up Boylston Street right near our apartment. Maybe we'll get to see part of the race."

Thinking of the triathlon he and our daughter had completed before he got sick, I said, "Maybe someday you'll be well enough to run the Boston Marathon yourself."

"I'm planning on it," Jim said.

Soon the heavy chemotherapy regimen took its toll. Jim, his face puffy behind the protective facemask he now had to wear, had to be driven the short distance back and forth to the hospital, and he had no energy for riverside strolls or museum visits. He napped all afternoon while I scrubbed the apartment with Clorox wipes as I'd been instructed, sorted his medication capsules into huge plastic grids marked for every hour of the day, and composed optimistic email updates for family and friends eager for news. In the evening I microwaved pre-packaged hygienic foods while Jim played his guitar and watched the sun set from our west

facing windows. After dinner we Skyped with our children, Julie in graduate school in Indiana, and Adam in college in Ohio. Then we curled up together on the couch to watch old episodes of “Downton Abbey” and chew Starburst candies, whose tartness seemed to ease Jim’s nausea.

Eventually we had the hard talks, the ones about life insurance and funeral plans. Jim wrote heartfelt “in case I don’t make it” letters to the kids. He recorded himself singing “Wild Horses,” the song he had wooed me with when we were first dating, and loaded the recording on my laptop. Despite these preparations, we thought he *was* going to make it. We believed we wouldn’t need the letters or the life insurance. The Boston marathon runners were all going to cross the finish line, and St. Jim was going to slay the dragon.

In April the new stem cells were implanted. We celebrated with a cake with a big round zero candle for the birth of Jim’s new immune system. Five days later, he began to cough and run a fever. At this point his old immune system had been entirely killed off by the chemotherapy. He had no white blood cells left with which to fight infection, and the new stem cells had not yet matured enough to produce new ones. Jim was quickly hospitalized on the inpatient unit at Boston Medical Center, and intravenous antibiotics were started. I went back to the apartment and got his iPad, his pajamas, the book he was reading, and the Starburst candies. Then I curled up with a blanket on the lounge chair next to his hospital bed. “I love you,” Jim said, before we both drifted to sleep that night. “Thanks for everything you’re doing.” Then he added, “I really don’t feel that bad. I think I’m about to turn the corner.”

I woke to a roomful of people yelling.

“He’s crashing!”

“Get the paddles!”

Someone yanked me out of my warm blanket nest and told me to leave the room. I stood shivering in the hallway in the early morning light and watched a team of medical staff wheel Jim on a gurney to the ICU, an oxygen mask over his greyed face. A resident explained quickly as they passed me that Jim had tested positive for H1N1, or swine flu, and he was in septic shock and “very unstable.” A kindly hospital chaplain came and took my hand. He told me to call anyone who might want to come say good-bye to Jim.

Over the weekend, Jim’s lungs and kidneys failed, and he was put on a ventilator and on dialysis. His room in the ICU was full of complex machinery, and his nurses stood at big control panels, working with amazing skill and focus to safely land the damaged plane that was Jim. Our children arrived from their schools, and Jim’s elderly father and all of our siblings came. Family members took turns sitting with Jim, holding his hand, talking and singing to him, hoping perhaps he could hear us. If Jim had to die we wanted to do right by him, to usher him out of the world peacefully, wrapped in the cocoon of our family’s love.

Monday morning April 15th was a low point for me. My brother Jeff and I had stayed overnight in the ICU while others went to their hotels to sleep. Jim’s course had been rocky throughout the night. Every time I dozed off in the uncomfortable ICU waiting room chairs, someone woke me to sign a consent form for yet another invasive and risky procedure. Exhausted and anxious, I had heart palpitations and diarrhea and couldn’t stop crying. A kind ICU resident gave me some anti-anxiety medicine, which for a few hours laid a thin but comforting protective barrier over my exposed nerve endings. When Jim’s sister Linda walked into the ICU waiting room early in the morning, I was sitting on the stained carpet eating some stale Swedish fish candies I had found in my purse, and licking the last crumbs of anti-anxiety medication from the little plastic container the pills had come in. Jeff suggested that Linda stay

with Jim for the morning. He would walk me back to the apartment and insist I get some sleep.

We were halfway down Massachusetts Avenue when my cell phone rang. It was the assistant in our accountant's office back home, sounding harried and annoyed. She told me that she had been trying Jim's cell phone all weekend because Jim had not turned in our tax documents. I explained that Jim was very ill, unconscious and on a ventilator. The assistant said that I needed to file an extension on our taxes and send it to the IRS today.

"Can this wait?" I asked.

"No," she said. "The IRS doesn't care about people's personal circumstances on tax day. I'm going to email you the forms to fill out. Just mail them with a check in time to get today's postmark."

"But I don't have a printer," I wailed. People on the sidewalk turned and looked at me.

Jeff did a Google search for FedEx Office and found one on Boylston Street where we could go print out and mail the forms. We headed in that direction, but found our way blocked by metal barricades draped with blue unicorn banners. "I forgot about the marathon," I said. "It's today. We won't be able to get near Boylston Street."

Jeff located another FedEx a mile away on Huntington, and we walked there and took care of the forms. Jeff then suggested I supplement my stale Swedish fish with some real breakfast, and I let him shepherd me into a coffee shop packed with marathon spectators. Though I wasn't hungry, I felt braced by the smell of eggs and coffee and the palpable excitement of people waiting to watch their loved ones triumph.

My cell phone rang again while I was sipping my coffee. This time the number showed up as Boston Medical Center. My heart raced and I fought nausea as I waited for the bad news I'd been dreading. But the news was hopeful. Jim, the resident on duty told me, using the words Jim himself had used a few nights earlier, had turned a corner. His fever had broken and he didn't need as much extra oxygen. Best of all, his new stem cells were beginning to produce white blood cells. He had a white count again, a low one, but a white count nevertheless. He was beginning to fight back against the flu.

Jeff and I hugged each other and went out into the sunshine. We walked back to the apartment, passing magnolia trees whose deep pink blossoms had opened since yesterday, and more unicorn-draped barricades, now lined with noisy crowds. A cheer went up around us, and in the distance I saw the lead runners make the final turn onto Boylston Street, their colorful sneakers pounding, their panting heads held high. "Oh, Jim," I thought, "Here's a good omen for you!" The runners had traveled a long, exhausting course, they'd struggled up the infamous Heartbreak Hill, and now they were coming in to cross the finish line under blooming magnolias. Everything was going to be all right.

Back at the apartment, I told the kids the good news about Jim's turn for the better. Adam wanted to walk right over to the hospital to see Jim, but Julie asked if she could stay with me and go back to sleep for a while. She'd been up crying most of the night, watching old Disney movies for comfort. I opened the bedroom window to let in the fresh spring air, and the two of us crawled into my bed. I stroked her hair as I fought coffee and adrenaline to find the relaxation of sleep.

Several hours later we were awakened by a loud boom that rattled the windows and the lamp on the bedside table. Thirty seconds later, a second blast roared into our still ringing ears and shook the bed. I knew these weren't cars backfiring, or firecrackers, or any of the other

explanations I grasped for. I put my arms around Julie as though she was a small child and I could protect her.

There were no further explosions. Through the open window we heard screaming, then sirens, then the whirring of helicopters overhead. I left the bed and searched for Boston news on my laptop. All I could find were pictures of Ethiopian runner Lelisa Desisa winning the men's marathon hours earlier.

My cell phone rang. It was Adam calling from the hospital to see if we were OK. He had just heard there had been a bombing at the Boston Marathon finish line right near the apartment. Emergency responders were closing streets and bringing casualties to Boston Medical Center and other hospitals. The staff had told him that if I wanted to come to the hospital to be with Jim, I should probably come now.

As Julie and I walked down Massachusetts Avenue, we were struck by how quiet everyone was. The sirens were loud, but the people we passed were silent, their faces stunned and tear-streaked. A policeman at a roadblock asked us where we were going. I told him my husband was in the ICU at Boston Medical. Thinking Jim had been hurt in the bombing, he said, "God bless you," and let us walk on.

There was a long security check line at the hospital. The security guard who patted us down told us we were lucky we had come now, because they would soon be surrounding the hospital with SWAT teams and preventing anyone from coming in or going out. The perpetrators of the bombing might be among the wounded coming in, or they might be loose in the city neighborhoods nearby.

Upstairs, the cramped ICU waiting room was packed with patients' families and staff members watching the horrifying news on the small wall-mounted TV. Attending doctors stood shoulder to shoulder with custodians and medical students. A Sri Lankan family whose relative was in the room next to Jim's unrolled prayer mats in the corner and prayed to Allah. A young nurse came in crying, and a man I recognized as the chaplain hugged her. "I was down in the ER," she wept. "I've never seen anything like it. There are people without legs. There's blood everywhere. It's like something from a war movie."

Julie and I went to sit by Jim's ICU bed. His color looked better. They had been able to lighten his sedation a bit, and we thought he squeezed our hands when we told him that we loved him and he was going to get better. I looked at him, my husband of twenty-five years fighting for his life, and I thought that as tragic as his illness was, it was just something that happened, a mutation of blood cells, nothing you could blame anyone for. But this bombing, those legless runners arriving on stretchers two floors below us, had been caused by human beings intent on destroying life.

Evening came. The hospital televisions showed the same terrible pictures of victims lying in pools of blood. One news story mentioned that postal trucks would not be able to get the city's tax returns out and postmarked on time. Frantic friends and relatives tried to call us as they heard about the bombing, but it was hard to get cell phone service with everyone in Boston trying to call out. I posted on Facebook that we were safe and asked friends to spread the word.

In Jim's room, the ventilator and the dialysis machine hummed their monotonous tunes, and his heart monitor ticked rhythmically. Occasionally an alarm would beep, startling me each time, and the nurse would calmly adjust a knob or change an IV bag while I waited for my pounding pulse to slow. I sat in the chair at Jim's bedside and tried to do needlepoint to stay calm. How could I ask for more anxiety medication when the whole city needed it?

The night nurse came in late for her shift saying the streets were still chaotic. The Medical ICU was short-staffed because they had sent all available staff down to the Surgical ICU where the bombing victims were. Since there was no one available to relieve the nurse for a food break, the kids and I brought her a sandwich from the cafeteria. “This man has such a kind family,” she said, patting Jim’s arm. “He deserves to get better.” But I was learning that “deserve” is not a useful word.

The streets outside quieted, and I sent Julie and Adam home to sleep. I stabbed my needle into the holes in the white needlepoint canvas, wondering why it had never occurred to me that individual life events continue on in the midst of general catastrophes. Women gave birth in Poland as the Nazi occupiers marched in. Japanese children celebrated birthdays on the day Hiroshima was destroyed. Patients in New York hospitals had brain surgery as the planes hit the Twin Towers. These personal experiences are indelibly framed by the larger events, but make no marks themselves on the collective narrative.

Overnight Jim lost the small gains he had made during the day. It appeared he now had pneumonia. By Tuesday morning the doctors were saying again he wasn’t going to make it. Adam announced abruptly that he was going out to give blood. The Boston Medical staff had told him they had enough blood, but Massachusetts General, several miles away, was urgently in need of blood donations. Adam, who didn’t know the city, wandered around asking policemen for directions, explaining that his father was dying in Boston Medical Center, and since he couldn’t help his dad, he wanted to donate blood to the bombing victims. A news crew from Montreal interviewed him for Canadian TV as he made his way to Mass General. The blood donors lined up there were inspiring, each with a story to tell of why they had traveled through the blockaded city to give blood. Adam was glad he had gone. I hugged him, thinking he had grown years older in just a few days, and wishing he hadn’t had to.

Jim didn’t die that day, or the next day. Several times, against all odds, it seemed his condition was improving and we would have a short respite of hope. Then he’d go back to his downward trajectory of clogged lungs and dropping blood pressure. When people held candlelight vigils in city parks for the dead and wounded from the marathon bombing, I mentally borrowed just a little of the candlelight for Jim.

On Thursday evening the crowds gathered again by the TV in the ICU waiting room. The FBI had identified two suspects, the young Tsarnaev brothers. The sweet-faced dark-haired younger one looked eerily like Adam. When the kids left for the apartment that night, the security guard on duty advised Adam not to wear a hoodie or baseball cap and to carry his ID with him at all times.

Overnight, I drifted between Jim’s room, where the numbers on his beeping monitors grew steadily worse, and the ICU waiting room, where I slept fitfully on the hard chairs listening to newscasts that sounded like TV crime dramas. The bombing suspects had killed a campus policeman at MIT, carjacked another man, engaged in a gun battle with police. The older brother had been killed, but the younger brother was still at large. Early in the morning it was announced that the entire city of Boston was to shelter in place until the surviving bomber was located and caught. Military helicopters hovered over the empty streets of the silent city. The overnight hospital staff could not go home. The attending doctor could not come in, nor could any of my family members. Jim’s father and siblings were trapped at their hotel. Our kids were stuck in the apartment. If Jim died today, they would not be here with him. Jim was beginning to bleed from the eyes, and the exhausted nurse, long past the end of her shift,

wiped the bloody tears gently with Kleenex, then wrapped his eyes with gauze so I wouldn't have to see them. I couldn't help but feel that he was crying for Boston, crying for all of us.

Jim's strong heart continued to beat on as Black Hawk helicopters thrummed overhead and police sirens wailed. At some point I went down to the cafeteria to get the nurse some coffee. The food had not been restocked, and custodians and cafeteria workers slept at the tables with their heads on their arms. In the evening, the wounded Dzhokhar Tsarnaev was found hiding in a boat in someone's backyard and was captured. Among the hospital staff, who had now been on duty almost twenty-four hours, there was a sense of numb relief. New staff arrived to take their places, and my family members arrived to relieve me.

I went back to the apartment and took a shower. As I stood under the warm spray with my eyes closed, I had a clear sense of Jim's spirit rising up and floating above me like an errant balloon, moving further and further away. I reached my naked arms up through the water, but I couldn't catch the string. I knew then that Jim's part of our joint story was ending. For the rest of my life, I would have to carry our story alone.

Jim's body died the next morning. Our children each held one of his swollen yellow hands, and I stroked his head where his dark curly hair was just beginning to fall out from the chemotherapy. Everyone was there, his father, his siblings, my brothers, and a few other friends and family members who had arrived during the week. Jim's heart beat erratically for a while, and then it didn't beat again. Outside, the people of Boston were waking up to their first normal day in a week.

My memories of Jim's death remain inextricably linked with the larger tragedy of the Boston Marathon bombing. I learned firsthand that week that monstrous dragons can kill the most valiant of men, and leaping unicorns are sometimes maimed by evildoers. But I am an optimist by nature, as was Jim. So I have closely followed the hopeful stories of the Boston Marathon survivors who got out of their hospital beds, strapped on prosthetic legs, and learned to walk again.

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