



Just Beyond the Door

It's been decades since my body last felt the press of imminent danger through the thinness of a door. On one cold, moonless January night in a Minnesota town on the Canadian border, I entered the front door of a friend's empty dark house and heard what I thought might be the sounds of a hungry wolf roaming out back in the alley. As I hung up my thick wool coat, the howling and wailing grew louder and moved in closer. Once I followed the sounds to the rear of the house, I discovered this desperate creature had already begun clawing its way through the door standing between it and me.

By the time help arrived, I was exhausted from holding my body as counterweight against the thrusting force on the other side of the back door. The creature had easily broken through the door's outer wooden layer and was in a frenzy to finish the job. My friend's father, who arrived in time to help save the door from yet another ramming lunge of the raging animal, was silent at first, then said, "I should have installed a steel door." The other help arrived in the form of the local town cop. While the two of us inside were using our combined strength to keep the animal from snapping open the metal lock barely holding under the strain, a shot rang out outside. One well-aimed bullet from the cop's gun quieted the roaring mass of muscle outside the door. With his flashlight on high beam, the cop showed us the foaming mouth and crazed eyes of a very large, dead rabid dog.

Years later, on another cold dark January night in Minnesota, I find

myself holding my full weight against another kind of distemper just outside the door. But unlike that scary night so long ago, I know all too well that this time around the bullet aimed to kill the crazed creature has some major limitations. And what separates me from certain danger is even thinner than that imitation oak hollow door so many years ago.

Thirteen months ago today I was diagnosed with lung cancer. One month ago I gathered family and friends together for my First Annual Survival Celebration. It was a great ploy to get dozens of volunteers to make 200 birthing kits for clinics in Haiti, to collect dictionaries and atlases for Books for Africa, and to contribute funds for families in transitional housing to buy things like school pictures and bus and phone cards. With the average life expectancy for this kind of diagnosis set at one year, I decided surviving to be average was something well worth a party.

That I reached this average life expectancy still in good health and high spirits is in large part due to a newly approved wonder drug I've been taking faithfully at 4 p.m. every day since my first visit with the oncologist. All year I've gone to my routine exams and weighed in, had my blood tested, and waited to be told what I already know—that my cancer isn't curable, but my body is staying strong and healthy. I ask the oncologist about his recent trip to Italy, and he asks me how I am adjusting to no longer working as a full-time college teacher. At the last visit he asked, "Do you feel like I am wasting your time?"

"Not at all," I answered. "I enjoy chatting with you. Am I wasting your time?"

He smiled and said, "It's nice to see someone doing so well every once in awhile."

However, at the end of every visit, my oncologist never fails to look me in the eye and say again, "One day this drug you are taking will stop working." Still seated in the exam room chair I hear his words. I take in their significance and resolve to hold even firmer to every day of life for the gift it is. Then I go back to my life as I have been living it this past year. I return to my full schedule of lunches with friends, I go to the movies, I plan trips to visit my sons, and I think of myself as being mighty

lucky to be still mingling among the living.

But tonight I learned that the rabid dog of cancer may be even closer to my door than I was aware of. I just finished reading the January 2007 *Harvard Health Letter* article titled “Lung Cancer: Not Just for Smokers” which includes discussion about the newest “smart” drugs being used on this cancer, one of “top ten most lethal cancers in the country.” One of the drugs mentioned is the same one I take every day and which I have been counting on to keep me not only healthy but alive. Near the end of the article, I found this statement: “Virtually all patients who respond to these drugs (mine included) develop resistance within 14 months or so.” Apparently, patient resistance to these pioneer cancer therapy drugs has put the damper on their image and promise. That I am only one month away from yet another grave marker in the lung cancer study statistics makes me hear again what sound like the howls of a hungry wolf just beyond the door.

I have long been a student of the local newspaper obituaries. For years I clipped and copied obits to share with my students in classes I taught about women in American history. I’d ferret out large and small mentions of women who had died recently and were the first in their fields—first female president of the Minnesota Dental Association, first black woman (born in Mankato, Minnesota) to have a full-time job at a national newspaper, first woman to sue the state of Minnesota for sexual discrimination (winning her case and receiving a hefty amount of back pay in 1943). In the early 1990s, I added to my study what my friend Bill had started seeing every day in the obituaries—the written and unwritten clues that another gay man had died of AIDS.

Since my diagnosis, I survey the obituaries for information about cancer deaths. Ages catch my eye this time around. I used to be amazed—and encouraged—by just how many of my local comrades had lived through their 80s and into their 90s. I’d see younger ages and think to myself how fortunate it was that I had made it past 40 or 48 or 55. But now the ages in so many obituaries only serve to remind me that I am far from

being alone in what awaits to devour me on the other side of the door.

Every day the obit pages are full of people my age, people in their late 50s and early 60s, who “died peacefully at home surrounded by loving family and friends.” There are plenty of other diseases to die from while still at home and under sedation, but cancer is the one that is mentioned the most.

Every morning I finish scanning the obituaries grateful I am still reading the obituaries. And if there is one thing I have learned this past year, it is that until any of us is actually dead, life within our hearts and minds is relentless in its pulsing and pushing on. In fact, for the first time I see my own pulsing greed for living. I want more life: I want one more month, one more year, one more day to be here where I so love being. I want to write more essays, go more places, meet and talk with more people. I want to keep breathing and smelling and tasting until there is no air or lavender or honey left anywhere on the planet.

When British journalist and mother of one-year-old twins, Ruth Picardie got breast cancer, she was 32 years old. When she died a month after her twins’ second birthday, she left behind a wonderfully frank and open record of how she dealt with her cancer, how others were treating her, and what she saw as some of the many injustices of her own death. One major injustice Ruth saw had to do with her age.

Ruth Picardie’s youth reveals itself in this quote from the published collection of her last writings titled *Before I Say Goodbye*:

“After a fourth acquaintance tells you their aunt has breast cancer, you realize you don’t feel sorry for any postmenopausal woman who has the disease because fifty-something isn’t a bad crack at life, especially if your kids have grown up.”

Or as sung by Linda Ronstadt and Ann Savoy on the *Adieu False Heart* CD, “Let the cool winds blow till I am too old to die young.”

Ruth died too young to learn that, with the exception of some old and/or ill individuals, most people regardless of their age or physical

condition long for death to extend its deadline by a few weeks or years or decades. There might be someone's wedding coming up or a family reunion looked forward to all summer. Grandchildren get born, but then we want to hear them talk and watch them go off to college. A new friend has just moved into the neighborhood, and we want to live long enough to hear all the best stories of growing up in Jamaica or Union City, New Jersey, or on a cattle ranch in eastern Montana. The Academy Awards are coming next month, and we start planning on eating popcorn while watching our favorite film take the prize. We are still unsure about how best to spend our lives and want to live long enough to see how it all turns out.

Being greedy about life is a most basic human condition. But I never knew just how greedy I was until the door separating me from death cracked open. As often as I tell myself I have had a better chance than many by living this long and this well, I still don't want to die. Like a snake oil saleswoman talking out of both sides of her mouth, I remind myself that we all must die and I can die today satisfied I have had a good life. Then my other voice chimes in to tell me I have all the time in the world yet to laugh, love, and linger over afternoon tea while shooting the breeze with a friend on the telephone.

We all have had our brushes with death—a car accident, a serious illness, a meeting with violence, a heart attack, or a cancer scare. But until I got the real deal death threat—I, like most of us, pretty much operated under the assumption I'd be the exception to the rule and live forever—or at least until I got very old and figured it best to call it a day. But the simple truth is that I have already had more time to live than most people around the world and through the ages, less time than many others, and the same time as all the rest. Death has no regard for lunch schedules, three-year plans, or retirement dreams.

Ruth Picardie was right to feel she was missing out on a lot of life by dying young. I, for one, wouldn't have wanted to miss seeing my own children grow up and have children of their own. I certainly wouldn't have wanted to miss being in Vietnam for the twentieth anniversary of the end of the war. I'm glad I survived long enough to have my loved ones here

several weeks ago singing Christmas carols as I sight-read the piano accompaniment. And I am grateful I lived to go to the bookstore yesterday to add to my winter reading pile.

I certainly had no say about getting never-smokers lung cancer. Now I have no say about how long this wonder drug will work or if there will be new and smarter drugs available should I need them. But I can continue to fill my lunch plate with raw beets, carrots, and broccoli, stay off white sugar, drink plenty of water, swallow my 4 p.m. pill, exercise, and boil up my Chinese acupuncturist's herbal medicines. I will remember what the acupuncturist concluded the last time she studied my tongue and measured the life force in both my wrists: "You have less heat. Better inside than before." It turns out that less heat inside is good for whatever ails us. And in spite of menacing sounds just beyond the door, less heat might just be all I need to get to savor a little more of life.