

授课文本

When an Aging Mom Becomes the Child

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“Mom, it’s Peggy.”

“Hello, Peggy, it’s good to see you.” My frail, 90-year-old mother does not rise from her position on the couch. She looks at me with clear blue eyes and smiles. She is weak, and rising from a sitting position is an ordeal, so she remains in place, sitting on a special pad to protect her thin body from the pressure of sitting. I kiss her on the cheek, so soft and papery.

She would not like to know what she looks like now, with missing teeth, scraggly hair and wearing a diaper. Her appearance had been so important. Because she couldn’t afford the clothes she loved, she learned to sew at a young age, and tailored beautiful outfits. Now she wears comfortable soft pants and tops that we have picked out for her. We buy colorful fleece jackets; she always loved color and knew exactly which ones she could wear to best advantage. Now she is not aware of what she is wearing, and her colors are mainly for us, her kids, and the people who care for her in the facility for people with advanced dementia. She is a favorite of the staff, so sweet and sharing, careful of the feelings of others.

It is a clear, crisp day in early September, a day typical for Minnesota: low humidity, brilliant blue sky. I talk about the loveliness of the day and encourage her to sit outside with me. She agrees, as she does to any of my suggestions. She is a different kind of mother to me now: no longer the boss, but the child.

We slowly walk across the central meeting room in this building where she has lived for the past three years. It’s divided into four “homes.” Like her, the seven other dementia patients who share her living area have loved ones who can no longer care for them.

From the time we were little, Mom warned us that she would never impose on us when she was old. In the depths of the Depression, she had been displaced from her bedroom by an elderly relative who lived with her family of four sisters, mother and father, and she never forgot it. Dad was forced to commit her here; he was her same age and in failing health, and he could no longer cope with her care.

While he was alive, they saw each other all the time. He would walk over from his assisted-living building next door. He is now gone for two years. Her real home, her husband of 65 years, her children, her profession, her hobbies and skills, even her green thumb — these have all faded from her life. She can't remember that she was a home ec. teacher, a mother of eight, with an adoring husband; that she could grow anything, could sew beautifully, always dressed impeccably and didn't care for entertaining.

I live a thousand miles away in Baltimore, and I visit her every three months. Spacing the visits like this means that I see definite changes in her memory with each visit. I am a physician and I can't help noticing that she is slipping each time I see her.

I cannot let her know in advance of my visits because she cannot use a telephone, and she has virtually no memory of recent events. Even if told of my visit by her caregivers, she would not retain the information.

So I just show up. She is never surprised to see me. The ability to be surprised seems not to have survived the ravages of her dementia. She accepts what comes to her. Despite this, she has never yet failed to recognize me, although recognition has been a little slow lately. First I see a puzzled expression on her face, as she searches her moth-eaten memory for my name, my identity. Then she smiles and greets me by name, introduces me all around with all three names, first, middle and nickname. Names she gave me. Relief floods over me each time.

I lead the way as we slowly step from the meeting room and walk through the glass doors to the outside. She haltingly pushes her walker in front of her as she negotiates the doorway. Brilliant sunshine assaults us as we step into the enclosed courtyard. There is a cupola in the center, with benches inside, and smooth, paved paths around the outer edge. Flowers have been planted all around the perimeter and in waist-high planters scattered here and there.

We walk together to a grouping of three rocking chairs in the shade of a birch tree, really a lovely spot. We have sat here before, many times. I grab a rocker, and she gingerly transfers from her walker into a chair. I ask a few questions, focusing on the weather and our immediate surroundings. She has lost nearly everything, except what is in the immediate here and now. She can become temporarily sad and confused if she cannot remember someone I talk about, so I don't mention my family. It is easier if we just talk about the beautiful day.

Then another patient, a woman in her 70s who is in excellent physical condition, thin and trim, speed-walks by, on her twice-daily constitutional. She drops down in the remaining rocker on the other side of my mother, asks her how she is and why she is not walking. I know her well; we see each other at each visit. But despite her physical well-being, she has severe dementia, too.

As she sits, I get up to walk a bit in the sun, and as I leave, I overhear the fellow patient ask who I am. I almost cry when I hear the answer.

“Some lady from church,” my mother says.

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