

## Blindsided: A Palliative Care Chaplain Reflects on Humanness

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### Case Report

A new palliative care patient came into the ICU one day. All of the doctors were whispering about her. Miss G was a special case, they said. The patient was homeless, had no family, and had been a life-long crack addict. Police officers had discovered her under a bridge downtown where the homeless often sheltered and brought her to the hospital.

She was suffering from a devastating, fatal reaction to a chemical that contaminates much of the street crack currently sold in North America, Levamisole. Palliative care was ordered for pain management and end of life care planning, while the interdisciplinary team scrambled to research her condition. We didn't find much published, but what we did discover was horrifying.

### Discussion

Levamisole is an anti-worming agent used in cattle, sheep, pigs and humans as an anti-inflammatory and as a treatment for certain types of cancer. It's also used as a filler that stretches cocaine. Nearly 69% of the cocaine in the United States seized by the U.S. Drug Enforcement Administration contains it [1,2].

Dealers stretch their drugs with levamisole because it acts on the same brain receptors as cocaine. It's cheaper and one gets more bang for the buck. Unfortunately, studies suggest that levamisole causes an immune reaction that attacks blood vessels in the skin.

And, it prevents bone marrow from fighting infection [3]. Usually the adverse reaction is some dead skin on the earlobes, cheeks or nose. With good medical care, detoxing the body from the drug, and careful debridement, most patients can recover.

Sadly, the most vulnerable people in society – the homeless and the impoverished – are at the most risk. Many homeless people suffer from compromised immune systems, an inability to access (afford) health care and drug addiction. This perpetuates a vicious cycle. Our patient Miss G was a victim of this tragic carousel. As if Miss G's situation wasn't bad enough, her reaction to levamisole-laced cocaine was the worst anyone had ever seen. All of her skin, all of it began to die.

What should have been her head was a featureless, gelatinous blob. Gangrenous tissue had grown all over her face. It covered her eyes and she was blind. There was no nose, and just a slash of mouth left. Her arms resembled molded beef jerky. Her fingers had fused together into useless flippers. She couldn't feed herself. The rest of her body was paralyzed, and the dead skin was sloughing off in crusts which littered her blanket like dark grey snow.

Doctors discussed removing the mirrors in her room lest she might be able to catch even a blurry glimpse of herself. Sainly nurses took turns at her excruciatingly painful debridement. Then the nurses

would have to take a day off to deal with the trauma. It was a cruel, cruel way to die.

I had steeled myself for the visit beforehand. I gowned, masked and gloved up, then took a deep breath, and entered the room. I have seen a lot of terrible things in my years as a palliative care chaplain, but it took everything in me not to gasp and run at the sight of the monstrous image before me. Miss G did not resemble a human being as much as a grotesque mummy discovered in an ancient, dusty tomb.

What was I going to say? Platitudes like, "God is good?" "There's a reason for this?" "God's got a plan for you?" (One of my clergy friends refers to this as "stained-glass language." It's what you say when you're trying to make sense out of something senseless). There was simply no sense in this situation, and I wasn't sensing any grace, either, just abject despair from everyone caring for her. I lamely offered, "Miss G? I'm the chaplain. How are you feeling today?" She whispered, "Blessed."

"Blessed."

Blessed? What?

I honestly didn't know how to respond. At first, I was angry. Angry that she had done this to herself. Angry she was putting her poor nurses through hell. Angry that poverty and ignorance and addiction had driven Miss G to this. How could SHE not be angry, or even express it? There was not one shred of fear, anger, guilt or desperation in her voice. Only a calm resignation [3].

Perhaps the crack had addled her brain to the point she was incompetent. Perhaps she just wanted to say what she thought the chaplain wanted to hear so I'd leave her alone. But perhaps, it was ME, the chaplain, that didn't get it. Was she really so different from me? If I had not been born into a world of privilege, education and love, would I have been strong enough to conquer my own demons?

"Yes, I feel blessed," she repeated softly. "You all are taking good care of me. God's with me. I'm blessed." She held her flipper-hand out to me, and I took it gently in mine.

She was the one whose illness had covered her eyes like scales, yet I was blindsided by her declaration of faith. I had been knocked off my horse like the Apostle Paul on the road to Damascus and taken aback by this woman's simple love of God, the only thing she had left. Only when I took her withered hand in mine did the barrier of judgment break, allowing me to see her not as a monster, but as God's beloved child, one whom in His eyes, He had already empowered with strength and beauty.

### References

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