Many years ago I received an urgent Friday afternoon consult from the surgery service. “Incipient DTs,” the resident told me. “We’ve got this guy, status-post pancreatitis, post-op cholecystectomy, he’s going down the tube.” It turned out that the patient was an irascible middle-aged man named Chuck Benderton who a day or so after surgery had gotten agitated and started to swear at his doctors. So they concluded that he was slipping into an alcohol withdrawal syndrome and snowed him with Serax and thiamine.

Well, things went from bad to worse. In his lucid periods, Mr. Benderton insisted that he wasn’t an alcoholic, he didn’t drink, and he was in severe pain and goddamn scared, and he wanted to know what the hell was going on. He threw his box of tissues across the room. A medical student told me that his resident had indicated on rounds that Mr. Benderton presented a typical picture of alcohol withdrawal, “Notice especially the way he denies drinking.”

I sat down beside the patient, who was restrained in his chair. Mr. Benderton had long, greasy hair, a big red nose, tattoos on both arms, and a foul mouth you could light a fire with. At first he appeared delirious and paranoid, pretty much as advertised. But then a surprising thing happened. When I brought him a carton of apple juice, he brightened up and started to talk sense. Eventually I ascertained that he was suffering from a postoperative drug reaction, rather than alcohol withdrawal. We straightened things out, and the patient recovered without further incident.

Subsequently, I became Chuck Benderton’s internist and learned a lot more about him. He was a 56-year-old heavy smoker from Braddock, a mill town on the Monongahela River. When Chuck was a kid, he had survived a bout of poliomyelitis, spending several months in an iron lung at the old Communicable Disease Hospital near the football stadium, and since then he had spent his evenings listening to police calls on the radio. Chuck was the kind of guy you run into at the corner tobacco shop, whose ship is always about to come in, but never does.

Mr. Benderton suffered from hypertension, chronic obstructive pulmonary disease, and a festering case of anger. Every time I saw him in the office, he ruminated about how badly he had been treated by his surgeons. “I haven’t had a drink in years,” he’d grouse. “They thought I was a drunk because I have a big nose and ain’t been educated at Harvard.” (He had rosacea.) “Those slick bastards, they just wouldn’t listen to me!” Though I allowed him plenty of time to let off steam, the result wasn’t very therapeutic. His anger kept bubbling up from a deep source.

One night I sat down and wrote a poem about Mr. Benderton. The poem wasn’t exactly “about” him; more accurately, it was an attempt to get under his skin and speak as if I were him. I can’t explain my strong need to give him voice. In a sense his feelings were contagious because by imagining myself in his place, I began to experience his anger. This wasn’t very difficult, because like most people I had plenty of reference material, a reserve of emotional memories of being misunderstood and condescended to. So there I was, trying to connect with Chuck Benderton by triangulating his story and our subsequent encounters with a storehouse of angry emotions that in my own life had generally been left unspoken. Thus, “I’m Gonna Slap Those Doctors” turned into a diatribe arising from the speaker’s sense of vulnerability and alienation. In the poem, if not in reality, the patient gained his voice and had the last word.

I’m Gonna Slap Those Doctors

Because the rosy condition makes my nose bumpy and big, and I give them the crap they deserve, they write me off as a boozer and snow me with drugs. Like I’m gonna go wild and green bugs are gonna crawl on me and I’m gonna tear out their goddamn precious IV. I haven’t had a drink in a year but those slick bastards cross their arms and talk about sodium. They come with their noses crunched up like my room is purgatory and they’re the goddamn angels doing a bit


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of social work. Listen, I might not have much of a body left, but I've got good arms – the polio left me that – and the skin on my hands is about an inch thick. And when I used to drink I could hit with the best in Braddock. Listen, one more shot of the crap that makes my tongue stop and they'll have something on their hands they didn't know existed. They'll have time on their hands. They'll be spinning around drunk as skunks, heads screwed on backwards, and then Doctor Big Nose is gonna smell their breaths, wrinkle his forehead, and spin down the hall in his wheelchair on the way to the goddamn heavenly choir.

When I showed “I'm Gonna Slap Those Doctors” to Mr. Benderton, he literally bounced up and down in his wheelchair. Although touched, he managed to hide any hint of softness behind his gruff endorsement, “Damn right, doc!” The gift of this poem was probably the most therapeutic thing I ever did for Chuck Benderton. By helping to heal the memories that obsessed him, it created a bond between us. But the poem also reflected a meltdown of detached concern. Far from being detached, I revealed myself connected, even passionate about his plight. To Mr. Benderton's further delight, months later the poem appeared in *Annals of Internal Medicine*. For years he carried a crumpled copy of that page in his wallet and often quoted some of the lines by heart. Fair enough. They were his lines.

In the years since then, I've read “I'm Gonna Slap Those Doctors” to many lay audiences. Their response is usually positive, sometimes tumultuous. It's fascinating to watch people as my voice rises with, “And then Doctor Big Nose is gonna smell/their breaths, wrinkle his forehead, and spin/down the hall in his wheelchair/on the way to the goddamn heavenly choir.” Their faces light up in recognition. Sometimes they clap. The story of Mr. Benderton strikes a recognizable chord because almost everyone has his or her own story of a doctor who didn't listen, or who wasn't available, or who added to a patient's anxiety by saying the wrong thing, or who simply withdrew behind a barrier of detachment.

Such experiences are desperately in need of (to use Paul Simon's wonderful phrase), “a little shot of redemption,” which the poem gives them.

Writing about patients teaches me a lot about myself, but the messages can sometimes be misleading. I learned that lesson, too, from Chuck Benderton. The poem's success made me think that I had learned pretty much everything medically important about him. Unlike the surgical team, I had listened respectfully, responded appropriately, and so forth. But that wasn't where the story ended.

A few years after the hospital incident, Mr. Benderton mailed me a short story he had written. Entitled “The Date,” it was typed on tattered onionskin, double-spaced with wide margins. He had just come across the story, written many years earlier, when going through old boxes in his closet. He had told me several times that he once aspired to be a writer, but “it wasn't worth it... I don't have time for that crap, so I quit.” I didn't believe him. I assumed he was making it up, trying to impress me, just another example of his tendency toward bravado. After all, this was a guy from Braddock who never finished high school; whose vocabulary, though colorful, was limited.

But here was a story in the flesh. His note said, “Toss it when you're finished. I don't want it.” “The Date” tells of a man crippled in childhood by polio. Though wealthy, he has few friends because of “politics,” and so he spends a solitary life writing successful mystery stories under the pen name, Brice Kirkland. Yearning for companionship, he answers a personal ad in *American Dream* magazine, initiating a correspondence with Sally Lane, a beautiful young nurse—they exchange photographs—who lives in a town about 50 miles away. A series of letters pass back and forth between the prospective lovers, as they make arrangements to meet and spend a weekend together. In the protagonist's last letter, he bites the bullet and warns Sally not to be surprised when she sees him in a wheelchair. “I'm paraplegic,” he explains. In Sally's response, which ends the story, she tells him that something important has come up, so she'll have to cancel her visit. “I'm just so busy,” she writes. “I don't think it will work out.”

“The Date” was Chuck Benderton's own story. In our relationship I had gotten the anger right, but what about his loneliness? What about his yearning for companionship, his need to love and to be loved in return? Perhaps I had confused the simplicity of my poem with the complexity of the man himself. Perhaps the cues were right there in our many conversations, but I just hadn't listened.