Abstract

This fiction stems from the truthful viewpoint of the physician-author on the extensive scope of the COVID-19 plague and how we have failed to consider certain vulnerable groups in the blind effort to serve the general population. The subtle yet overarching concept of water permeates the piece. It speaks metaphorically of the future and how our reactions are a dictate of our varied perceptions of it, most specially in this pandemic ambience. Timestamp: Year 2020.

Keywords

COVID-19, hemodialysis, patient, physician, water

"WATER HAS MANY FACES"

REY A. ISIDTO

IHERE IS SOMETHING acutely electric in the air just before the abrupt deluge of a summer rainstorm. You can feel it in your fingertips, delicate twigs laced with kinetic energy dancing from one fingertip to the other, crackling and popping like a bonfire. If you are really lucky, from a distance you will see the gray sheet of rain extending from the great expanse of the sky to strike the ground. It is an immense curtain of thick, suffocating condensation, greedily seeking to embrace the hot, parched ground, marching inexorably to swallow everything that falls under its wet shadow. You will smell it first—the petrichor, an earthy mixture of water and soil before the first fat droplets find you. The raindrops are remotely of any romantic design, instead, the downpours are angry and insistent, striking with as much force as its mass is multiplied by acceleration, biting with needled teeth like lancets.

Each day, I set the alarm for fifteen minutes before I plunge into the maddening ritual of patient consultations, in-hospital rounds and meetings at the hemodialysis center. The busyness is a whirlwind that whisks me away in a flurry of activity. Breathe in, breathe out; I would often instruct myself. After bouts of physician's burn-out, I've learned that this forced tranquility and seeming inactivity are as important as the dynamic parts of the day.

The clinic has large open glass windows and the curtains deftly swish to the side as I stand squarely in front, so near that my exhalations would temporarily muddy the glass. I see a pale, translucent reflection of myself looking into the busy street below. As a physical specimen I am nether remarkable nor aesthetic, but the strong, horn-rimmed spectacles managed to mask the inadequacies that jostled about my chest. The immaculate white physician's coat hides all the excesses that now presented themselves at 40 years old: the slight paunch, the drooping chest and the tightening of the sleeves whenever I move my arms. Donning the white garb endows me with a sense of purpose and unerring intention which often translates into an immeasurable je ne sais quoi obviously palpable in men of resolve. Regretfully, I take it off. I put it back in its hanger, tastefully hidden in the side of the cabinet. It has been a while since I wore my white clinical gown.

This quiet, unassuming day marks the year and a half since I started my early morning meditation. The COVID-19 pandemic started out as whispers in the rafters of doomsday believers. People cackled and guffawed at their wide-eyed alarm. But no one was prepared for the virulence and ease of infectivity the virus displayed. It was swift, and armed with surgical precision, the infected people fell. Only a limited number in Wuhan, China, the epicenter, initially succumbed to the mysterious pneumonia. Almost overnight however, the infected became a steady barrage into hospitals until overflow. Even the healthcare workers, no matter how noble their devotion to their profession, were not spared. Their rising numbers quickly joined the afflicted. The disease rapidly flared out and the decision was made to contain the city.

Despite these measures, COVID-19 insidiously snuck out, the virus being cultivated from a process as natural as breathing. It easily crossed geography, incubating in the lungs of airplane passengers who in the early stages, showed no symptoms. The Philippines had been spared of the SARS and the H1N1 and it was folly on our part to be lulled into indifference, confident that the harsh tropical climate would be enough to melt the incipient pool before it reaches our shores.

What started as a trickle in the first months of 2020 later became a swell of patients. The country was awash in fear and paralyzing panic. We tried to stave off the disease the best we could. Hospital preparations were made, and solutions were meted out to solve the problems in containment and ventilation.

The gears of the country ground to a discernible halt as the economy froze to a standstill. COVID-19 was a black tidal wave of apocalyptic proportions. As a nation, we struggled to stay afloat despite the economic crash, the frightening dearth of personal protective equipment (PPE), the paucity of effective medicine, and the growing mistrust of the general public as the government floundered about in their policies, with the nation's top nominated leaders brazenly circumventing the rules they've set.

I deliberately press the side of my face against the glass, appreciative of the cold, clean surface that pushed back. I have an odd reverence for sealed windows. It allows me to safely peer at the outside world while keeping me insulated from the elements. At one point, it smacks of a looking zoo, with either I on display, or the people outside walking in the streets as the unwitting specimen.

The radio had earlier announced the start of the typhoon season, and in a token of agreement, the sky darkened in a show of rumbling nimbus, gurgling with unspent lightning. With the downstroke of a conductor's baton, the sky ripped at the seams and let fly massive columns of rain and borborygmi of thunder. I shudder in response, standing back to hug myself in a reflexive gesture for assurance. I have an unshakeable fear of the rain. No, not the gentle droplets that ride on wings of zephyr, but the ones that bring with it the four horsemen of the Revelation. My respiration picked up its pace, and before I know it, I was ten years old again.

Every self-confessed farm boy knows how to ride a bike. It was organic law. So, there I was, astride my bicycle, a brave expedition in mind, seeking to explore my new neighborhood. Transferring from the city to the province was a treat for me, one that is born out of an infantile urge to run under the clarifying heat of the sun and to feel the cool grass on my cheeks. Before our transfer to our current abode, my family of three skipped from boarding house to boarding house in an attempt for normality. The constricting four walls of the rooms we rented were suffocating, and cabin fever was an affliction I was acutely aware of despite my age.

Fortunately, my parents were able to save for an 800-square meter lot in the nearby town of Pavia. It was in a rolling expanse of rice fields complete with borders of packed mud called *kahon*, recently converted and sold by the owner for residential purposes. The Iloilo City in the 1980s was not the concrete-and-towers metropolitan one might think, but the adjacent town of Pavia was the rural to Iloilo City's urban. It was *so* green. There was every shade of green imaginable, from the deep verdant emeralds of acacia and mango trees, to the delicate chartreuse of fledgling rice plants, echoing new life and naivete. All sorts of vegetation crammed and flourished from every nook and cranny. Even the dirt roads had a strip of grass and subdued cogon in the middle where the wheels of vehicles rarely intruded. It was fascinating.

The afternoon found me two blocks away, deliciously snaking through the narrow grassy foot walks between houses, impervious to the gathering thunderclouds overhead. I was delightedly stroking a thorny patch of makahiya, when the first few aqueous shrapnel hit me. Almost immediately, I found myself drowning in a veritable sea of rain with zero visibility, the sound of rushing water a deafening roar. I panicked; my throat constricted in fear. As an only child, Mama lectured me on the dangers of biking out too far. She saw danger in specific, innocuous places: leaving toenail clippings in the garden would allow fairies and other dark children to creep among the grass at night, intent on eating slivers of human flesh; running along school hallways with an outstretched hand brandishing an unopened umbrella would cause you to inevitably trip and impale yourself on the weapon. She cautioned against strange, angry men in dark jackets and even darker sunglasses shades she calls them, who would pounce upon unsuspecting children, trundling them in jute sacks, to be later disfigured and forced to beg and pilfer in the streets of some unfamiliar faraway city. I was a cautious, querulous child at ten, a few mental lashings away from obsessivecompulsive disorder.

She never spoke of the rage that fell from sky though, and for that, I was caught unawares. I stood rooted in the middle of the lane, white-

knuckling the handles of the bike, bawling my eyes out. Being out here in the open street did not meet the prerequisite for my irrational fear of closed, constricting spaces. But the way the rain promptly wiped out all vestiges of any discernible physical landmarks effectively translated the experience to an extension of my claustrophobia. It didn't help that the vigorous wind drove the water into every orifice in my face; wet strong fingers that pushed their way up my nose and mouth, making me gag and spit in the process.

"Migo!" A thick garbled voice loud enough to cut through the staccato of the rain roused me from my own waterworks. In front of me was a ramshackle structure that seemed to shoulder its way out of the ground. The disembodied voice belonged to a hand which jutted out of a window, wildly gesticulating a wooden ladle. A house materialized to reveal a jutting nipa roof, which fortunately extended beyond the borders of the property. The frontage was a mishmash of scavenged materials: a slab of sheet metal here, a few panes of corrugated roofing material there and holding the pieces together were several wooden signage of varied sizes and colors. Flanking the sides were a copse of *kamunsil* trees. Large, evil thorns sprouted from the trunk and radiated to the branches, discouraging potential thieves.

One of the corrugated panels jerked open and a plume of smoke escaped from the yawning gap. A head with a thick mop of jet-black hair popped out and beckoned me forward. Still a slave to my Pavlovian mindset, I pushed my bike gingerly through the opening, and despite my mother's panicky phantom voice in my ear, I stepped into a stranger's home in the middle of a storm.

"Ano, ina?" A sudden attack of curiosity gave way to my customary cautiousness. I was standing in the middle of what was an outdoor kitchen while rivulets of rainwater sluiced through my clothes to dampen the packed earth on which I stood. I directed my query to a youngster who was about my age. He was quite small, but his androgens slightly lengthened his arms and torso, but not his legs yet, giving him a slightly simian outline. He was briskly stirring the contents of a blackened cauldron set atop an open fire.

"Sauce," he replied, "hot sauce." as an answer to my query. His reply came out with a nasal twang reminiscent of French caricatures you see in Audrey Hepburn movies. "*Sous, hawt sous,*" he repeated, smiling at me shyly. He was standing bashfully behind a tall, imposing middle-aged woman who was methodically packing deep fried morsels—the oily and savory kind—into a large white container. She smiled warmly at me, her face crinkling at the eyes. Her leathery skin spoke of hours standing out in the sun, and the robust built of someone who engaged in hard manual labor.

The heavy aroma filled the entire kitchen and steeped into my dripping clothes to meld with the dermis of my skin. I started to salivate, and I unconsciously wiped the corner of my mouth. Tita Dina laughed, her entire bosom heaving as the sound welled up from deep inside her. It washed over me in a wave of comfort, and I sheepishly smiled in response. She handed me a stick of *lumpia* and pointed me over to her son.

This was where I met Rex. But I don't call him that; at his insistence I called him "Sous" an echo to how he slurped the word around with his thick tongue. Sous was—is fundamentally different. He remained small in stature and had doughy, soft limbs. His disproportionately tiny almond eyes were slanted upward in a feline manner as well as a thick tongue that would bulge from his mouth. These, as well as a short neck gave him a perpetually surprised mien. *Facies*, I would learn years later in medical school. A fundamental glitch in the primary genetic particles of his body, an extra copy of a chromosome, would cause all these changes. Down's syndrome took out the thinking part of him that would conceive of hatred, envy, and malice. It gave him something else, an immeasurable capacity for trust and a child-like innocence that permeated his entire being. It made him special.

Sous was the brother I never had. My entire childhood was linked to his own, and we spent every possible minute together. Because he lacked the precise coordination to balance on a bike, we decided to save for a sidecar which we could fasten on my own BMX. We spent our afternoons and a large part of my eleventh summer cajoling our neighbors to buy Tita Dina's meat and vegetable lumpia. I held up the containers on the crook of my thin, stick-like arms and Sous carried the condiments he imaginatively named "REGULAR SAUCE," "HOT SAUCE" in my dilapidated backpack. These were packaged into individual ice candy plastic wrappers to prevent spilling and contamination. My friend was a neat freak.

Whenever a sale was made, Sous would ceremoniously bring down the bag and piously intone with the practiced visage of an accomplished salesman: "Reglar sous, hawt sous?" The customer would then make his selection, biting his inner cheek so as not to offend his utter seriousness. The neighbors were not just buying lumpia with sauce from us; they were purchasing an experience.

Our perimeter was wide, and business was strong. Naturally, other children followed suit. But no one could beat Sous's hot sauce, a recipe he would brutishly guard like a dragon with his treasure. He vociferously maligned one old lady who had the gall to ask him for it. I say malign, but I really do not know. All three of us were wiping our faces with his superfluous saliva that escaped his mouth during his episode of sputtering indignation.

We bought the sidecar in record time and the remainder of the summer was spent in relentless pursuit of idle nothingness. Sous became a constant fixture in my house, and I in his. I introduced him to other friends as my brother and he beamed in unmitigated delight. Pictures celebrating my birthdays often found us in constant battle, shoving the other aside to blow out the candle. As we both grew older and though the need for candles and cakes became a trivial reminder of the ceremony, I always made sure that there was a cake with lit candles for him to blow out.

I had a hard time in medical school. Despite my strive for academic distinction, I was lost, awash in a sea of self-doubt and trepidation, having failed a basic subject—Anatomy. I mulled over thoughts of leaving medicine and return to nursing, and perhaps trade the Philippines for some European country who had better regard for medical school rejects.

I went home late that day, blearily dragging my feet in dejection. Sous was waiting for me in my room, abuzz with excitement. I could see him desperately hiding something behind his back, his entire frame quivering with unfettered glee.

"Nonoy!" he called me to sit on the bed. I sat down expectantly.

"Nonoy, hu! Doctor ka na!" he said, pulling out a stethoscope. It was standard issue, a freebie when you buy a manual sphygmomanometer. It was chipped near the bend, and the tips were hard as rocks. Sous ceremoniously laid it across my neck, as one would bestow a gold medal on a champion Olympian. He was always proud of me. He was as invested in the entire enterprise as I was. I didn't know to tell him that I will be quitting. "Dali! Pamati-i heart ko," he said, baring his chest so I could listen to his heart. The stethoscope was uncomfortable as the bend had solidified, sticking out like a dehydrated branch, while the white tips bit into the entry of my ear canal.

The abnormal sounds of Sous's heart jogged me out of my reverie. Intimate to a diagnosis of Down's syndrome was cardiac pathologies. His cardiologist remarked that even though the tiny hole in his heart was not large enough to cause trouble, it would always be there, limiting his movements and potentially be of concern once he grows older into his senior years. If that happens, he will need his only brother, the one with the medical degree.

"Beautiful, no?" he asked expectantly.

"Huo, beautiful gid!" I replied solemnly. And I did not mean this heart, the one with the hole in it.

The thunderstorm ceased as abruptly as it had begun. Iridescent beads of rain weighed heavily on the surface of the glass, clinging desperately to rebel against gravity. Eventually it slips, racing downward to form a clear puddle below. Everything it touches, it purifies. The film of dust on the surface of things is gone. Even the air seems cleaner, crisper. Plants hedging the streets greedily drink the tiny rivulets which meandered to the caverns of the canal below. Water, with all its potential for casual destruction, can be an impetus for something better.

The insistent pinging of my cellphone brought me back to the present. I reluctantly peeled my gaze off the window, deliberately, in the manner of a sloth retracting its face from a pond. My fifteen minutes was up. The pressing itinerary this morning was with a hemodialysis center of which I was the head nephrologist.

The chronic kidney disease patient undergoing hemodialysis (HD) is a ripe case of collateral damage to COVID-19. My patients have their sessions at twice to thrice weekly intervals ad infinitum. A year and a half into this pandemic-soaked scene, we at the unit have devised measures to ease the cross contamination. Some of the guidelines were borne out of hard-earned science, but most were a series of Hail Mary's hastily plastered together. In the earlier part of the viral scourge, scores of HD patients died, not because of the infection, but to their disease. I often receive heartbreaking reports of family members found dead because of a skipped session.

I remember the time when our unit had the first HD patient diagnosed with COVID-19. That very afternoon, the number of nursing staff went down by nearly half. Irrational fear is something that could be explained away, and there are no rules that compel them to stay. The remainder valiantly picked up the slack. The nurses are our heroes. But they do not expect adulation and praise; what they need is security and assurance and the government's support.

Chronic kidney disease patients by their very nature certainly put them at suspicion for COVID-19. Because most of them urinate less or none at all, the patients become waterlogged and eventually flood their lungs. They end up coughing, and as algorithms direct, they need an RT PCR test. But the RT PCR swab costs an arm and a leg, and in the earlier times, the results came in several days later. Some of the patients succumbed first. Of course, cohort sessions are arranged to treat these patients as a group, but the fear is as deadly as the virus itself.

Sometimes, I think that the pandemic has hardened us, forcing us to make guidelines and policies that serve the general public, not recognizing that there are others who fail to meet the standard criteria. What of those that do not fit the mold?

I rarely use stethoscopes these days, dreading that it will become a vehicle for the fomites to cling to. Today, however, I scrounged about the bottom drawer of my clinic desk for the box. It contained the stethoscope Sous had gifted me a millennia ago. I had assiduously repaired the crack in the bend with plaster, making it look like an ugly, two-headed eel. The HD unit was in the next building, a convenient three-minute walk. The medical center's buildings are interconnected by a flowing river of passageways. The sides are clear glass windows, showcasing the wellmaintained Japanese Zen gardens below.

The Hemodialysis center was in controlled, coordinated chaos as the nurses danced around each other clad in their PPEs. I redirected my path to a small room dedicated for sterilization and protection prior to entering the treatment rooms.

"*Nonoy!*" A diminutive figure on the dialysis bed raised himself into a reclining position, waving his hand. Sous had his arm out, his arteriovenous fistula ready for the dialysis needles. I bent over and took his free hand with my own gloved one. He smiled through the mask as he acknowledged the stethoscope draped around my neck.

That afternoon we will follow up with his surgeon, hoping to repair his

aberrant heart. Then we could talk about kidney transplantation. I made a few skips in the procedure and had myself tested. We are not a complete match, of course, but just enough to give us hope of returning him to a functioning renal state. Despite the ongoing pandemic, I felt unafraid, focused on the task at hand.