**Thank You, Doctor**

*Give us this day our daily bread*

The monsoons had arrived in my half-room intern’s quarters in rural South India. As the cook struggled to keep the latch-less windows shut with a piece of rope. I moved the squeaky, metal frame of my bed away from the rickety table. The roof leaked, allowing raindrops to form a narrow trickle, which worked its way down the unpainted walls and between the bed and table to join the puddle at the opposite end of the room.

I hoped the water would not find a way to the other half of the room, where the clinic was located, separated from the doctor’s quarters by a half-wall and curtain. The clinic had been set up by modifying a small classroom at the local elementary school. I closed the clinic for the night, propped up my slippers on the narrow window sill and got into bed. The knock on the door was not a welcome sound.

“Doctor, could you come with us to the village?”

The two men placed their palms together in a gesture of greeting and supplication. They stood outside the door with bare feet, wet clothes clinging to their weather-beaten skin. I saw their bicycles and knew I had a long night ahead of me. The locals usually reserved bicycles for emergencies and travel to other villages.

“My neighbor has not been feeling well for the past few days,” explained the older villager, “and we would like you to see him at his home.”

I was puzzled by what appeared to be a simple reason for undertaking a bicycle ride on a stormy night.

“If he’s not been feeling well for a few days, why didn’t he come here earlier? For that matter, you could have brought him with you today.”

I was referring to the common practice of riding with the patient sitting on the crossbar of the bicycle.

“His wife would not let us bring him here, so we came by ourselves. She doesn’t know we are here on his behalf.”

They seemed apologetic for disturbing the doctor and looked warily at me, earnest eyes betraying concern that they had violated some rule for requesting a house call. Their goodwill gesture overcame my hesitation.

“Ok, I’ll come. Does he have a fever?”

I opened the travel bag containing an assortment of syringes, vials and pills. I had been warned by other interns to be prepared for the unexpected during house calls.

“He had a fever, and today he’s not breathing too well.”

They peered into the bag from a distance as I thought quickly about the possibilities. Pneumonia? Asthma? Heart failure? My experience was limited to three months of internship, and I had never thought about treatment options before examining a patient. I placed vials of aminophylline, penicillin, epinephrine, saline and dextrose in the bag and got on the bicycle provided for house calls. The rains had subsided, and the mud roads did not appear friendly.

“How far do we have to go?” I eyed the road leading into the darkness.

“Just follow us, it’s not too far,” said the younger man.

They rode ahead, warning me about rocks and ditches in the road. The street lights ended a few hundred yards away from the clinic. I realized we were headed into a neighboring village when they turned off the road into the fields. Frogs and crickets greeted us in the dark night. The rain-laden clouds had engulfed the moon, challenging us to find our way blindly. I had forgotten to pack a flashlight, and the bicycles did not have headlights. My guides, who were familiar with the dirt paths, instructed me to follow the sound of their conversation, and rang a bell to alert me to curves and sudden dips in the muddy, slippery embankments between the fields. We rode for about twenty minutes to reach the village, which had no electricity.

I entered, through a low and narrow door, a hut about the size of my doctor’s quarters. A smoky fire and a pot in one corner indicated the kitchen area, adjacent to a rolled blanket. An ox stood in the opposite corner, chewing on a few blades of hay and staring blankly behind the door. Then I saw the couple.

The woman was squatting on the floor, holding a small oil lamp and a bowl of water. She looked up briefly as I entered, then laid down the lamp to place a few drops of water on her husband’s parched lips, as she cradled his head in her lap. The man was a young, muscular farmhand, dressed in a loincloth. A strip of cloth, torn from the wife’s sari, was tied around his bare chest and served as a homemade bandage. His eyes had a vacant look and he was barely breathing.

I undid the bandage and rolled him over on his side. Blood and pus trickled from a deep wound between his shoulder blades. A poultice made of ash and leaves covered the source of his fever and sepsis. I sat back on my heels for a moment, struggling to keep my mind clear and focused. My textbook-oriented medical knowledge and little travel bag seemed woefully inadequate to deal with the scene that unfolded before me. I informed the woman that we would need to arrange for immediate transfer to a hospital. She quietly, but firmly, refused to allow her husband out of her sight.

I opened my bag, knowing that whatever I could do then was too little, too late. While I was preparing an antibiotic injection, the young man gasped and stopped breathing. I could only watch helplessly as the woman sobbed her heart out. Caressing the lifeless face of her partner. A loud thunderclap heralded the onset of another monsoon shower. I hesitated, muttered a few words of sympathy, and excused myself to allow the woman some privacy.

While I waited outside for the rain to let up, the men who had escorted me to the village spoke about the circumstances that led to the young man’s tragic death. The crop had been particularly poor in the previous year. The young man had provided for his family by obtaining a loan, using his small field as collateral. Earlier in the year, he had pawned off one of his oxen to buy seed and fertilizer. He had harnessed himself to the double yoke, along with the ox I had seen in the hut, to plough the land. A stab injury from the stake of the yoke had produced the wound on his back. The family had no resources to pay for medical care, and the man continued to work with a bandage over the wound.

I felt humbled by the young man’s determination, pride and perseverance. He had refused to submit to overwhelming odds, choosing to challenge nature and his circumstances with the strength of his will. He had given up his life in his quest, and become a hero, victorious in death.

I turned at the sound of the soft footfall behind me. The young widow stood in the doorway with downcast eyes.

“Thank you for coming, Doctor,” she whispered, and turned back to the solitude of the lonely hut.

I was stunned. The woman who had lost everything she had cherished in life had the graciousness to thank me for my feeble efforts, while her world collapsed about her.

I returned to the luxury of a dry bed later that night. I lay awake a long time, pondering on the goodwill of the present-day Samaritans, the inspiration of an unsung hero and the kindness of a grieving woman.

Many monsoons have passed since that memorable event. I now work in a very different environment. But when the clouds gather and all seems dark, I derive a sense of purpose from the memory of that simple phrase:

Thank you, Doctor!