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SMOKESCREEN: EVEN MY MOTHER'S BATTLE WITH EMPHYSEMA DID NOT CURTAIL HER CRAVING FOR CIGARETTES

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My mother lay in the hospital bed, an oxygen mask over her nose and mouth. But she couldn't get the craving for cigarettes out of her mind.

So she took her mask off, picked up the phone and called the local cab company. Quickly and quietly -- so as not to tip off the nurses out in the hall -- she ordered a cabdriver to bring her three packs of her brand of cigarettes. Thirty minutes later, my mother's cigarettes were delivered, complete with matches, directly to her hospital bed. Now all she had to do was find something to use as an ashtray.

Who ever said smoking is not addictive? Paying a cabdriver to buy and deliver cigarettes to a hospital room -- where she was being treated for yet another unmanageable attack of breathlessness -- was nothing short of a desperate act by a drug addict.

My mother survived several more hospital visits, each worse than the last, each bringing us all closer to having to face the one where the emphysema would finally choke the last of her fading breaths.

The diagnosis, according to her doctors, was irreversible emphysema and advanced heart disease. The cause, they told me: a lifetime of smoking.

By her last year of life, her blood oxygen level had dropped so low that she was unable to breathe on her own. She got around by wheelchair and carted a portable oxygen tank with her everywhere.

The last time I saw her, on a beautiful spring day in Fresno a month before she died, she lay helplessly, confined to a steel bed in a sterile room in the intensive care unit. Her lungs had weakened beyond survival, tattered and torn from the black acid of nicotine wearing away at the fragile walls for more than 50 years. She had a fever burning hot enough to keep her near-comatose. And her heart was fading.

All through our childhood, my four siblings and I had begged her to give up cigarettes. Since before we could talk, we were witness to the horrible chest-heaving coughing her smoking caused. Even as the surgeon general pronounced the first dire warnings on the dangers of cigarettes, my mother kept smoking.

"This is not a good time," was her favorite argument. "Can't you see how upset I am? How can you expect me to quit smoking right now when . . . [fill in the blank: . . . your sister is sick; . . . I'm so worried about Grandma . . .]!" Life was full of "upset"; today we call it "stress." It's always something. I finally gave up and even, much later, stopped feeling angry.

Medical reports say that cigarette smoking is the nation's largest cause of preventable death, that more than 400,000 American men and women will die this year from smoking-related diseases. Smoking is responsible for more than 80 percent of all cases of chronic lung disease, including emphysema. Emphysema, like my mother had, does not develop overnight. It takes over the body with an insidious leisure. It takes years of exposure to cigarette smoke's irritation to the lungs until it turns into emphysema. But, according to the American Lung Association, emphysema's damage to the air sacs in the lungs is "irreversible, resulting in permanent 'holes' in the tissues of the lower lungs."

The smoking slowly destroyed my mother's health, but still she clung to her habit. During every one of her hospital stays, she screamed at the nurses to get her some cigarettes! When nurses and family were no help, she resorted to subterfuge, recruiting any sympathetic stranger she could. Desperate times, desperate measures. And she felt entitled to her vice. She knew what her body needed! She had her rights and was quick to yell at doctors and nurses who tried to tell her otherwise.

My last visit with her was little exception. She knew she could have no cigarettes in the hospital's intensive care unit; the nurses there had real power. But she knew they also had the power to relieve her pain, and her pain was great. The challenge, however, in her last month in the hospital, was that she could not talk. My mother's doctor had performed a tracheotomy to enable a more efficient transport of air into her inefficient lungs. Her vocal cords silenced, she was reduced to writing her questions and demands quickly, with great economy of words, on small note pads kept on her bedside table. I watched her strain to communicate.

"Still much pain. Need more Valium," she wrote. Sometimes they gave her more Valium. Sometimes they would remind her of her medication schedule, and she would moan and try to sleep.

"Need irrigation. Now!" And the specialist who maintained the plastic hoses going in and out of my mother's nose and mouth and throat would check everything again and clean and rinse until my mother's eyes said, "Thank you."

That sucking noise from the tubes was like a bad scene from a horror show. Just looking at that mottled plastic tubing -- the trickling of brownish clumpy fluid leaving my mother's lungs -- was revolting enough. But the sound, that awful vacuuming sound as the poisons were sucked and flushed from her body, was more than anyone should have to bear.

She would try to speak, to mouth the words. Then she would write. She filled sheet after sheet, pad after pad of paper with commands and questions. Sitting with her one afternoon, I watched her suddenly scrawl a few lines and then rip off the sheet of paper, handing it to me in one smooth move. She smiled. The note said, "Time and space is any place your mind can go." I smiled back. I'm still not quite sure what she meant. Perhaps she was telling me she could still "escape" the pain, the hospital, the inevitability illuminated in her silence.

And then Mom stopped writing notes. Two days passed. She seemed depressed. The nurses reported that her lungs, her heart, her digestive tract, all were fading like the Cheshire Cat slowly fading until all that's left is the trace of a smile. She seemed to have given up.

Early the next morning, she suffered cardiac arrest. She died that afternoon.

It's impossible to judge which is worse: for someone to die quickly, painlessly and suddenly, but allowing no time for preparation. Or for someone to die a long, slow, pain-filled death with time to plan for the end. The long and slow of my mother's passing allowed us all to prepare to some degree, although no one can ever be fully prepared for a loved one to die. Death from cigarettes is a gruesome protracted affair. And -- I cannot forget -- a preventable one.