

THE MIRACLE OF MAGGIE

THE "OLD DOC" sounded as if he were trying to give me the message from his office, 30 miles away without using the phone. Becoming more and more deaf as the years of country practice took their inexorable toll, he shouted at everybody: his patients, the hospital staff and even his gentle wife, still acting as his office nurse, who frequently shouted back.

"This gal's only about four months along," he roared. "It's her seventh pregnancy though, and I'll feel better if she's in the hospital for her miscarriage. 'Case she bleeds or some fool thing. Handle it, will you? It's an inevitable, she's three-quarters dilated. Give her some ergot when she's through. No, I don't need to be there! Got an office full of sick people."

Maggie was on her way into our lives.

I climbed the curving old stairs to the second floor of the hospital to tell the medical nurse to expect her new patient. In the large city hospital I had left, I'd have picked up the phone. In this small rural one where I was the evening supervisor, I had learned to go to the floor, to stop and smile, to chat, to go turn down the bed, to get some fresh water and to hope for a smile from the nurse's face. Because this was an unhappy little hospital, and a most unhappy evening shift.

Everybody was related to everybody else, either by blood or marriage. Everybody gossiped non stop. Everybody's problems were everybody's problems and could even be triggered because the nursery nurse hated the surgical nurse who was her sister-in-law, because the surgical nurse refused to get up and cook breakfast the way their "dear Momma" always had for her "dear brother." If things got dull, the nurses forgot their own differences, remembered their blood ties and joined to disagree with any outsiders and try to make their lives miserable. The hospital management were all in this category, having been deliberately hired in an effort to get the little place on its feet financially and accredited in the Province of Ontario. Hospital management, of course, included the evening supervisor.

There was no smile from the medical nurse tonight. I went on to the nursery to help bundle and carry babies to their mothers for the 6 o'clock feeding. This was one of my favorite treats. I indulged in it whenever I could find the time and a good excuse like tonight's overflowing maternity ward. To cuddle these clean new little lives, to be rewarded with even their "gas pain" smiles was a real reward in this alien place.

It would be close to an hour before our new patient could arrive.

Her eyes were the first thing I noticed when I opened the emergency room door. Huge, blue-black. Fringed with unlikely looking long curly eyelashes. Terrified, haunted eyes. An animal backed into a corner. Dark circles under them told me how tired and sick she was. A complexion like whipped cream, high cheekbones and a soft mouth told me she had once been beautiful. Now a layer of fat blurred all the outlines. Her husband, quiet, sullen, muttered something about "seein' to the other kids" and was gone. No kiss, not even a touch on her hand.

On our way to the elevator, she grabbed my arm, gasping with a contraction, and I winced from the hurt. The fingers I reached to hold until the pain was gone were long, slender and clean.

"I didn't know four-month misses hurt this much," she muttered.

She definitely looked more than four months pregnant. But after six babies and too much weight gain, many of these women had poor muscle tone and their abdomens sagged. Fetal scans hadn't been heard of in that year of 1952.

An hour later the nurse called to tell me she was pushing hard with her pains, which were every two minutes, and bearing down hard. With a four month miss? Definitely. Pushing. Bearing down.



The six-bed ward had two visitors at each bed, and I suggested we move her, bed and all, into the privacy of the empty labor room. She was certainly pushing, and I could see the shiny bulge of a large bag of water as the pain ended. I called Old Doc.

"Thought she was a mite big for four months," he roared, "but I've only seen her this once for this pregnancy. She'll know, though. You can believe her. I've looked after her since she was a kid. Probably thinks she should push or something, like the other ones. No, I don't need to come. She'll get it over with in a few minutes. Likely as soon as you stop wasting time talking to me."

Rubbing my ear, I went back to check her, arriving in time to have her membranes rupture all over my clean uniform. The baby's head was right behind, and the mother's face was twisted into that universal birthing grimace which tells you the woman has gone to walk in that country which is uniquely her own.

There was too much pressure, too much bulging, and I grabbed a tray of sterile instruments and stuck my hands into sterile gloves. This was no four-month fetus. The medical nurse went to call Old Doc and tell him to get in here.

The little face was purple when it emerged, and my fingers told me there was a fairly large cord wrapped tightly around the neck. This small morsel, who had yet to take a breath, was being effectively asphyxiated. The cord was too tight to slip over the head, so, sighing, I clamped it in two places and cut between the clamps. Someday I'd get sued or something. Nurses didn't legally do these things. Nurses didn't stand around

and let something potentially viable die, either

A gentle lift for the second shoulder, and I was holding a perfect little girl who fit neatly into the palm of my hand, her head at my wrist, limp legs dangling at the ends of my fingers. Instinctively I turned her over, face down, cleaning her mouth and throat with my finger, saddened because this tiny life had been stopped before it ever had a chance to begin.

She sneezed. The limp arms and legs curled up, and a mewling, kitten cry wavered through the hushed room. She was getting pinker now, the miniature fists were flailing faster, and I could feel the deep breaths she was taking through my gloved hands.

We weren't ready for a living, premature infant. Our one old incubator wasn't kept plugged in, and the labor room had no oxygen supply.

I cuddled her close to me for body heat, the medical nurse threw towels over the boiling instrument sterilizer to heat, and the nursery nurse was waiting with the oxygen turned on and a baby mask attached when I got across the hall to the delivery room. The surgical floor nurse had glanced in the door and was now covering the medical floor as well as her own.

"Baptize her for me, nurse, please," the mother whispered. "I'm so sorry."

All nurses have the authority to perform emergency baptisms. In these cases, we didn't usually name the child, leaving that for the minister or priest to do later. As I dabbled sterile water on her forehead and repeated the old phrases, I impulsively named her "Margaret." A real scrapper, she seemed to deserve a name. Wrapped in warm towels, gulping oxygen, her wails were louder and furious. She had her mother's red hair and wide-set eyes. She also seemed to have no intention of dying.

By the time Old Doc arrived, Maggie was warm and pink in her incubator, sleeping quietly. Mom was still in the labor room, sobbing her heart out, pouring out the dreadful secret she'd kept for close to six months.

Maggie had not been a planned pregnancy. Neither had her last four siblings. With each conception, the husband became more angry, more depressed and spent more and more time at the village hotel, coming home drunk and abusive. So he had never been told about this baby. Maggie's mother had never gone to the doctor. And she had taken every herbal tea and laxative she could think of or had heard about, to try to "get rid of it." Two weeks before, she had started to have some spotting and had told her husband she was "having a miss, not to worry."

OLD DOC'S EXAMINATION this evening had been brief and hurried, and she had assured him she was no more than four months pregnant at the most. No, they knew nothing about birth control. Never had.

We walked quietly into the nursery, and Old Doc stared sadly down at our minuscule, sleeping Maggie.

"So many of my patients," he mourned, "so many who carry around all these burdens, and half the time I can only guess at what's bothering them. They can't know, until they're taught, and nobody's teaching them. That woman has suffered in her own hell for six months, maybe seven, and when this baby dies, the hell's gonna get a lot hotter."

Maggie opened one eye, clenched her fists, the fingers like little grains of rice, opened the other eye and stared back at us from inside her glass house.

"This baby, dear doctor," I said, "is not going to die."

"Don't be stupid," he roared. "She weighs maybe three pounds, although I doubt it. She's been undernourished all her life. She's been subjected to God knows what in the way of chemicals, and about eight hours from now, she'll run out of steam and stop breathing. You know it as well as I do. Some day, we'll save these babies, but not today."

I stayed four hours after my shift to sit beside Maggie's incubator. The day supervisor came in four hours early to relieve me. The nursery nurse came back on her day off. And at 9 o'clock that night, while I was wrapping babies to go out for their bedtime feeding, Maggie stopped breathing. But we were there, and in a few seconds, after some artificial respiration, she was pink again, breathing on her own.

We didn't have much to work with in those days. No tubes, no respirators, no magic blood readings to tell us about oxygen levels. No scans to pinpoint bleeding areas in tiny brains, no clicking monitors to tell us what little hearts were doing. We had a warm incubator. And some oxygen. We dropped sugar and water into her mouth with an eyedropper, and, when she swallowed it, we added breast milk, pumped and donated by other new moms. We rubbed her gently with warmed oil to try to keep her tissue-paper skin in one piece; put cotton wool under her miniature heels, elbows and ankles. And we loved her. And we were there. For three weeks, 24 hours a day, somebody gave up part or all of her time off to come in and do "constant care" with our Maggie.

Maggie fought right along with us. She came back so often, after almost disappearing into that eternal darkness of the grave, we almost gave up expecting her to do it again. But she did.

Her parents never missed a day to come and stare longingly through the window at this child neither of them had wanted. They were getting proper counselling from Old Doc, and from the minister who had married them. They were finally talking to each other, desperate to make up for the wasted years. They walked away each evening holding hands.

The day Maggie was three weeks old we decided she could come out of her glass house to be weighed. Two pounds, 14 ounces. Her mom was allowed to hold her for a minute, and from that day we Maggie never looked back. Her cheeks filled out until she resembled a chipmunk, worried that the coming winter might not end. The red hair developed a soft curl, and the day she graduated to a regular crib, her parents celebrated with a cake for us.

Her whole family came to take her home. Six little stairsteps, round-eyed and solemn at this first remembered trip to a hospital. Big grins of welcome for Maggie when they saw her, dressed like a princess, every piece hand knit by one of us, her surrogate mothers.

And, as surrogate mothers, a group of women fighting for the life of a beloved child, we had become a cohesive, efficient hospital staff. We had learned to be proud of ourselves, proud of each other, willing to accept and make use of our individual differences.

She had been our Maggie for such a short time to have made such an impact. We knew we had done our job, and done it well. Our goal had been to send her home where she belonged and to get there healthy and strong. But we would miss her.

Walk with our love, Maggie, wherever you go. And thank you for having made us all a little better for having known you. □

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Rideau Lakes Union
Library News

ATTENTION all young poets! Penguin Books is sponsoring a poetry contest for young writers between the ages of 8 and 12. Your poem can be about anything you want, and Penguin will print between 100 and 150 winning entries in a special book in 1989. The deadline for the NUFFIN LIKE A PUFFIN Poetry Contest is June 1, 1988. Further information and entry forms are available from the Elgin branch - 359-5315.

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