

Case Study

Is Hope a Univocal Word?

Case compiled and questions posed by Rosemary Flanigan, director of ethics committee education and training, Midwest Bioethics Center, Kansas City, Missouri.

Susan H, forty-six year old wife, mother, and successful financial consultant, visits Dr. E for her annual checkup. The examination reveals a small lump in her right breast, but otherwise she is found to be in excellent condition.

Dr. E sends her for a mammogram which is positive and Dr. F, her surgeon, performs a breast biopsy. The results show no evidence of metastasis and he tells her, "You are a relatively young woman with an excellent health record, and we have caught this lump at the beginning. I recommend that you let me perform a lumpectomy followed by radiation therapy."

Susan agrees and she followed the regimen Dr. F offered her. She returned to work in two weeks' time, immensely relieved that she felt so good. "I always hoped that I would be back doing what I love," she told co-workers on her first day back on the job.

Several years pass. When she describes herself as a cancer survivor, she always adds, "I knew God wouldn't let me die; I knew that if I hoped enough God would cure me."

Five years have passed and she returns to the surgeon, Dr. F, for her annual checkup. She tells him she has been coughing in recent months and has had difficulty catching her breath. He orders a CAT scan which reveals pleural metastasis.

When Susan hears the test results, she bursts into tears. "Hope is a nasty four-letter word," she says. "How could God have played such a trick on me? He allowed me to have so much hope and now it is being dashed to bits."

QUESTIONS

- What does the word “hope” mean to you? (Ask several volunteers.)
- Insofar as you can interpret her remarks, what was Susan’s understanding of hope?
- Susan may now be facing a crisis in faith; how could the institutional health care delivery system have assisted her years ago when she faced her first health care crisis?
- From the details in the story, Susan has had no other support system than clinical providers. Why does current literature stress the need for institutional psychological, social, and spiritual care teams that include clinical as well as nonclinical personnel?
- Clinicians are likely to resist both recognizing and questioning Susan’s meaning for hope. They may also resist offering alternative understandings. Why?
- Do you know people like Susan? How can you lead them to consider other meanings for hope?
- What articles in this issue of *Bioethics Forum* might best serve both clinicians and Susan to reflect on their meaning(s) of hope?



Discussion