

## Kath

Will you not allow that I have as much of the spirit of prophecy in me as the swans? For they, when they perceive that they must die, having sung all their life long, do then sing more lustily than ever, rejoicing in the thought that they are going to the god whose ministers they are.

Plato  
*Phaedo*

Nineteen ninety-two has been a strange year for funerals. Not a heart death among them. Six in all. All solid tumor. Two lungs. Two breasts. A colon. And a cervix. Three men, three women—mean age, 55; range, 34 to 70. Two other physicians, a physician's wife, my accountant of 27 years, a much-loved brother-in-law. And Kath. Katherine Swan Ginsburg, 34, MD, MPH. Department of Rheumatology, Brigham and Women's Hospital, Instructor in Medicine, Harvard Medical School, first author of an article (1) in this issue of *Annals*; and my youngest daughter.

Kath had been away from home for 16 years—UCSD, Tulane Medical School, and since 1985 in Boston. Internal medicine resident at the Beth Israel Hospital, fellow in rheumatology at Brigham and Women's. Only when she was dying and after her death did I really have any understanding that she was a mature and truly gifted physician, and could then comprehend not only the tragedy of her passing but the broader loss of a superb role model for young physicians. As a father, I was proud of her coming into our profession, but to me she was still my girl. When I would come to Boston she would get ready to do "The Daddy Thing," she told her friends. Exactly what the Daddy Thing was, none of them knew, but it must have been her way to preserve our father-daughter relationship.

There were 300 or more at the funeral at the Presbyterian Church in Newton, Mass.—enough for a politician or a full professor or even a dean. Patients, nurses, staff, coworkers, members of her church and of her cancer support group, and especially her BI housestaff counterparts—that new generation of physicians that has restored my optimism for our profession. And only then did I understand the maturity she had gained, the respect with which she was regarded, and the sheer love that she had inspired. A BI nurse: "She was a scared intern when I first met her in 1985, but she became a mature and confident doctor quicker than most, and far more compassionate." A rheumatology fellow: "If I wanted to discuss anything, I waited for Kath, even when she was sick, because I would get her complete attention. She'd wait a day or so and then we'd work it out together." A dying Massachusetts General patient with AIDS: "What has happened to Dr. Kathy Swan? She gave me so much time at the BI when I first got sick." Her clinical chief: "We knew that her interaction with patients was characterized by

compassion and her respect for their dignity. These qualities have established a standard for all of us to emulate." Dr. H. Richard Nesson, President of the Brigham and Women's Hospital, wrote: "Kathy was recognized as a gifted physician with superb clinical skills and extraordinary compassion for her patients. Her ability to maintain an active clinical practice despite her three-year battle with cancer was remarkable. The fact that she never let it interfere with her ability to provide care spoke volumes about the kind of person she was. . . . I hope that the establishment of the Katherine Swan Ginsburg Visiting Professorship in Rheumatology will serve as a reminder to us all of an extraordinary physician and a lovely woman."

Kath loved the Beth Israel Hospital. For the first month there were the four times weekly consult calls to the west coast. Then she could sail on her own. "Dad, the only services I didn't like were AIDS and Heme-Onc. So many young patients, and we could do nothing for them." A prophetic statement if there ever was one. Her marriage to Geoffrey S. Ginsburg, now a cardiologist at the BI, on 1 October 1988 was the high point of her life. Her next door neighbor: "After work, they would sit together on the deck with a glass of wine, or iced tea, like newly-weds." Home life was mostly jeans and oversized sweaters. But when the occasion called she was front-cover *Vogue*. A goodly proportion of her BI housestaff were women, and several, as did Kath, married or were married to their contemporaries. This unique group—combining a full professional career with an equally important family life—bonded together in a spirit of total commitment to one another. This support, together with her Christian faith, sustained Kath and Geoff through the horror that they endured for 2 years and 5 months of their marriage of less than 4 years. Fifteen hospital admissions, three laparotomies, two radiation series, three chemotherapy sequences, stem cell transplant, mega chemo, short bowel syndrome, a Hickman and a right nephrostomy catheter for her last 6 months, and countless outpatient visits for radiation, chemo, and labs. And a positive liver biopsy as a thirty-fourth birthday present on August 3rd. Yet no complaints, except, in her last elective admission, to gently counsel a new intern because of his audible and inconsiderate comments on her condition. And, between times, back to her normal life, her training—taking boards in rheumatology during chemoradiation, authoring the report in this issue of *Annals* before and during stem cell collection, doctor to her patients in the real meaning of that title, and remodeling her home, with the last piece of her new furniture delivered 6 hours after her death.

And what for me—the Daddy; 20 April 1990: "Dad, I don't want to disturb you—it'll be just fine. But I have cancer." My world stopped. At 31, it must be class I. There are so many advances. So much more is known.

The old mortality tables don't count. Not for Kath. So went all of my denials. Her first laparotomy in May confirmed our greatest dread—a single para-aortic node. But chemotherapy was not so different from a decade ago. Radiation therapy did not seem to be effective against the aggressive malignancies. Solid tumor cancer deaths seem to be increasing rapidly, despite all claims of success from "the authorities." In July, the crab took off with incredible fury and was totally unstoppable. Shortness of breath, fatigue, loss of appetite, and intolerable back pain. A CT scan positive for pelvic, para-aortic, hepatic, mediastinal, and pulmonary metastases. And the anger. A Pap smear in 1982: "The cells are seen to infiltrate the adjacent surfaces" . . . in a 24-year-old! She had called from New Orleans: "Everything is okay, Dad, the doctor says I have nothing to worry about."

I returned from Spain on September 3rd, as events accelerated. Turquoise eyes sunken in their orbits. Arm—a stick covered by skin. Pronounced lower limb edema. Severe orthopnea on continuous oxygen consumed all of her energy in the work of breathing. Morphine limited her awareness yet the persona was there. "Hi, Dad, how was your trip? You must be tired." A coughing spell, aspiration pneumonitis, the emergency ambulance to BI, admit to the MICU, chest bilateral white-out. Her friends, coworkers, and the nurses joined in our grief at her bedside. And so, on the morning of the fifth day of September 1992 with Geoff, my wife Roma, and son Jeremy, I watched Kath Swan Ginsburg die, complete with radial line, pulmonary artery catheter, blood gases, and so forth. Knowing the outcome, she spoke her last words before intubation: "Tell them that I'm not afraid"—a final expression of concern and comfort for her husband and family before self.

"Dad, how do I learn to swim with sharks?" asked Kath when offered a staff position at the Brigham in the fall of 1991. She answered her own question: "It's a clinical position, and I'm always comfortable with patients, so I'll just do my best and smile." And the sharks mellowed and loved her. The leadership of the BI and of the Brigham—the institutions that had nurtured her maturing into the person she became—did their part in sharing the economic burden of her illness—she was one of their own, she was family. Her admired coworker and my own dear friend, the respected epidemiologist Dr. Charles Hennekens, wrote to Kath on 1 September 1992, to tell her that her paper had been accepted by *Annals*. He continued: "Your perceptions, sensitivities, dignity and grace continue to inspire us. Contrary to outside opinion, we who have had the pleasure and privilege to know you, also know that Jeremy Swan's greatest contribution to this world was not the catheter but the Katherine." Right on, Charlie.

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