More Than a Diagnosis: Finding Meaning in Medicine

The journey toward choosing a medical specialty is deeply personal and multifaceted. My path began with an early, life-altering encounter. When I was three years old, I became gravely ill; I was passing out, losing weight rapidly, and eventually arrived in the emergency room with fruity breath, abnormal breathing, and near-comatose status. The diagnosis was swift and unequivocal: I was in diabetic ketoacidosis (DKA). Shortly thereafter, I was diagnosed with Type 1 diabetes mellitus. While my parents were overwhelmed by fears of an abnormal childhood, retinopathy, and the dire prospect of an early death. I was more excited about the attention that came with my diagnosis. After all, I was only a kid.

From what I can remember, I had a pretty normal childhood. I played hockey with friends, had sleepovers, and ate cake at birthday parties. My diabetes didn't define my childhood. Despite the chronic demands of daily finger pricks and insulin injections, I learned an important lesson from my doctors: I am not merely a diabetic, I am a *person* living with diabetes. This empowering message taught me that while chronic illness may be a part of my story, it does not prescribe its entirety. Rather than allowing diabetes to dictate my identity, I discovered strength in integrating it into my life in a meaningful and manageable way. This shift in perspective fostered a deep appreciation for life's fleeting yet profound moments.

It was during these formative years that I nurtured my burgeoning passion for health, self-care, and an active lifestyle. The experience instilled in me an early commitment to understanding and managing one's physical well-being, a commitment that has shaped not only my personal routine in diet and fitness but also my professional aspirations. I began to harbour the hope that one day I could extend the same compassionate care that had been given to me.

My understanding of life's impermanence arrived during my early teenage years when my mother was diagnosed with breast cancer. My mom was always there to take care of me. She checked my blood sugar levels when I was asleep and delivered me sandwiches with the crust cut off when I had low blood sugar. The gradual shift in her presence, from the constant reliability of a caregiver to that of a patient grappling with her own mortality, was both disorienting and heartbreaking. I felt utterly helpless as I watched her deteriorate, a sentiment that was intensified by the pervasive focus on prolonging life at the expense of truly living it. Although her initial remission allowed us to slip into a false sense of normalcy, it was shattered when the cancer metastasized. Her final two weeks were spent in a hospital room, isolated from the familiar comfort of home and the passionate embrace of the life she once led.

My mother was a remarkable woman. She was a PhD candidate, a professor, an avid traveller, and above all, the best mother imaginable. I like to think that she found solace and peace in her final moments, embraced by the memories of a fulfilling life. However, witnessing the clinical detachment of her care, with a focus on extending her lifespan instead of enriching the quality of her remaining days, left an indelible mark on me. It exposed a disquieting reality in the field of oncology: while the scientific strides in treatment are commendable, there is a profound need to consider the entirety of a patient's experience, not just the extension of life.

This realization has profoundly influenced my desire to specialize in oncology. To me, the field represents an opportunity not merely to treat cancer but to support patients in finding meaning and dignity in the face of mortality. I am inspired by the notion that even when confronted with an incurable illness, a patient's journey can be enriched by compassionate, individualized care that honours their personal values and desires. I believe oncology is not simply about aggressive treatment protocols and rigorous clinical guidelines. It is also an art

form. It demands a holistic approach that values the integration of palliative care, psychological support, and, fundamentally, the preservation of the human spirit.

As I consider the factors that ultimately guide a medical student's choice of specialty, I find that the capacity to bring meaning to someone's life is paramount. We are all on a finite journey, and while the inevitability of death looms in the background, it is the quality and purpose of the time we have that truly matters. I am drawn to a field that not only challenges the intellect but also calls upon us to embody empathy and compassion, where every medical decision is made with an awareness of its impact on a patient's overall sense of fulfillment. When I think about what defines a specialty for me, I see it as a confluence of scientific rigour and an unwavering commitment to the human connection.

In choosing oncology, I am not rejecting the advances of modern medicine but rather advocating for a balanced approach. One that acknowledges the importance of cutting-edge treatment while never losing sight of the art of healing. As Dr. Paul Kalanithi eloquently states in *When Breath Becomes Air*, "Even if I'm dying, until I actually die, I am still living" (Kalanithi & Verghese, 2016). This sentiment encapsulates the delicate, yet powerful, interplay between life and death, and it is a perspective I intend to incorporate into my practice. My history has imbued me with an acute sensitivity to the emotional and existential dimensions of patient care.

Ultimately, the most important factors in choosing a specialty lie in the opportunity to make a meaningful impact on someone's life. For me, this means embracing a medical discipline that not only equips me with the tools to combat disease but also empowers me to help patients navigate their most vulnerable moments with grace, dignity, and purpose. The dual commitment to scientific excellence and compassionate care is what inspires my pursuit of oncology, and it is this balance that I believe defines the highest calling in medicine.

References

Kalanithi, P., & Verghese, A. (2016). *When breath becomes air*. Random House.