

Three patients. Three lives. Three rooms.

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Today felt ordinary at first.

The kind of day that blends into the many others we spend moving from one home to the next. But by evening, I knew I needed to write it down, because some days stay with you not for what they contain, but for what they quietly reveal about love, exhaustion, and the weight people carry in silence.

We began, as usual, from the oncology base hospital and headed out for our home visits. Our first patient lived nearly 20 kilometers away on the outskirts of Bengaluru, and the drive itself took more than an hour. She was an elderly woman with advanced breast cancer, no longer a candidate for curative treatment. Now in the hands of palliative care. Her son had called earlier, distressed because she had become completely bedridden and was in severe pain. Bringing her to the hospital would only have added to her suffering.

When we arrived, her younger son welcomed us with a worried but gentle smile. He had given up his job four years ago to care for her. Inside the room, everything spoke the language of illness: pillows arranged around a frail body, the soft groan of an oxygen concentrator, an obviously hurting woman too weak to tell us where it hurt. And yet, after a careful examination, the cause turned out to be something simple in medical terms but deeply distressing for her — a distended bladder and severe constipation.

After catheterization and stool evacuation, her body slowly softened. She drifted into sleep, quiet and relieved. She did not need to speak for us to know the difference. The room changed almost at once. The tightness eased. Her children looked lighter, as if some hidden knot had finally loosened. Moments like these remind me that relief can be small, almost invisible from the outside, and still feel enormous to the person receiving it.

Our next stop was to a four-year-old child in a coma because of a neurological cancer. After a long stay at the hospital, the family had finally agreed to get the child discharged only on the assurance that a competent home-care team would extend a far more personalised line of care at home.

The contrast with the first patient was sharp, yet the atmosphere was strangely familiar: the same hush, the same fear, the same effort to hold oneself together. The parents and grandmother sat around the child with questions they could not quite voice, carrying fear and exhaustion in equal measure. There was little we could offer medically, but we stayed, listened, and spoke with them for over an hour. Before we left, they asked one simple question:

“When will you come again?”

The kind of question that stays with you. For a long time. It was not only about a visit. It was about reassurance, about the fragile comfort of knowing that someone will return.

Our third patient seemed straightforward on paper — hypopharyngeal cancer — but, as life so often reminds us, illness never arrives alone. He was living in a difficult family environment. A home that was familiar with tragedy. One brother had died just days earlier, and grief still hung in the house. He had stopped chemotherapy because no one could accompany him to the hospital. An accident a few months ago had left him homebound and dependent on a walker.

He lived with his 60-year-old mother, who was still working to support the family. His teenage son remained distant, and relationships with other family members were strained. What he carried was not just disease, but loneliness, dependency, and the ache of being held up by very little. We offered medications, guidance, and conversation. We could not change everything. And perhaps that is the hardest truth to sit with.

But we showed up.

Sometimes, showing up is not a small thing. Sometimes it is the most honest thing that can be given.

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All filled with different kinds of suffering, and yet one shared need — to be seen, heard, and cared for with steadiness and tenderness.

On days like this, I am reminded that palliative care is not only about symptoms or treatment plans. It is about standing beside people when life becomes too heavy to carry alone.

@Saranam is a not-for-profit philanthropic institution working to create access to palliative and end of life care in public health institutions and space.

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