



William's Story

A4: WILLIAM'S STORY

▶ 1.32 mins

I've always thought I had good genes; both me mum and dad lived until they were well in their nineties so I thought good outside chance I might live until a ripe old age too. That is until recently, I discovered that when I went to the toilet there was blood on the paper and in the bowl, now he wants me to go and have a colonoscopy, he wants to look up inside the bowel. It's a bit of a worry; you know you don't even think about dying until somebody sends you off for a test like this one. Then you're convinced you're going to have cancer. You're not going to be able to do all the things that you want to do with your life.

A9: WILLIAM – ONE YEAR LATER

▶ 2.49 mins

Doctor: Bill you know from your visit to Dr. Maxwell that they've found the cancer has come back in your liver.

William: Yeh, yeh he said that.

Doctor: What did Dr. Maxwell tell you about what happens from here on in?

William: *Sigh* Well, he told me that the treatment hadn't worked, um and the chemotherapy wouldn't help me anyway. He just couldn't tell me how long I had left. I asked him, he said, he said a few months.

Doctor: Yes

William: *Sigh* So what do I do now, do I just wait around for something to happen. I have so many questions; I mean 'How much pain will I be in?' 'Do I have to go into hospital?' It's too much to think about.

Doctor: Well Dr. Maxwell has sent me the report and I've had a look at the scans. It's quite understandable that you have a lot of questions and a lot of concerns at this time. And It's also important to know that even though the chemotherapy is not going to help you very much at this point, there are a lot of other things that can be done; and I'll be working with a group of skilled health professionals to make sure that things are as good as possible for as long as possible. Would you like me to go through some of the options that are available to you at this time?

William's wife: Yeh that'll be good.

William: Yeh we'd appreciate that.

Doctor: Yeh, well the most important thing is that everyone is an individual but there are some things that can be predicted, some physical and emotional health problems that can arise and it's important for us to keep a very close eye on you to identify those problems early and try to prevent them if we can, but also to try to treat them as early as possible. Bill, is there anything in particular that's worrying you at this time?

William: Well it's hard really, I don't know. I'm worried about Gladys, how she'll cope, and how we'll manage once we get home and I get too sick.

Doctor: Well most people want to be as independent and active as possible for as long as possible. We can engage specialists in medicine, palliative medicine, and palliative nursing, to be able to help you and monitor your progress, they can also identify things and treat them as early as possible. With that support it is possible for most people to stay at home and be active for quite a long time.

William's wife: Okay

William: Well that's better than I thought

William's wife: Yeh, yeh

William: They'll book you straight into a hospital or something, that's good.

A10: HIS ILLNESS PROGRESSES

▶ 2.29 mins

Nurse: So can you just tell me how things have been going for you both since I last saw you.

William: Yeh, not too bad Linda, my appetite's still lousy and I'm in a bit of pain, but you were right those tablets do take the edge right off it, but I don't wanna take that liquid morphine anymore, it makes me too drowsy.

Nurse: Okay so you've got some problems with your appetite and some problems with your pain. The GP, has he been contacting you regularly?

William: Yeh, well I sometimes feel the need to move my medications around a bit, so I just call up the office and make an appointment. The girls are great; they just always seem to be able to fit me in.

Nurse: Do they keep contact?

William: Yeh, there was that social worker that came by last week, she showed us the legal documents to fill in when I get to the point where I can no longer make decisions for myself.

Nurse: Now, I wanted to talk a bit more about your pain and appetite problems, but is there any other sorts of things that you want to talk to me about today?

William: Sighs. Yeh, well look um, I'm unsure as to whether I should go into the hospice or the hospital, when the time comes, when I can no longer be managed from here. Hospital is closer, but everyone says the hospice is great and all the specialists are there on tap. So I just don't know what to do.

Nurse: Have you and Gladys discussed it together?

William: Yeh, look I want to stay at home of course, but the kids have all got their own families and they mostly got work full time, none of them live nearby anyway. So I think when the time comes I should be looked after elsewhere.

Nurse: Well there are a few things we can do. One thing we can do is to increase your services here at home, to you know try and help you stay at home here, but you know if something comes up out of left field, where you're having some problems, you can go into the hospital or into the palliative care unit and hopefully get that sorted out and then possibly come back home again.