



Ringer lactate - the magical fluid

Vinod H Krishnamoorthy

Final Year Medical student, ESIC Medical College and PGIMSR, Chennai

Corresponding Author:

Vinod H Krishnamoorthy,
ESIC Medical College and PGIMSR, Chennai - 600078
Email: vinodhk2998 at gmail dot com

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It was as usual the most meaningful day of the week - Sunday, my day with our community medicine teacher in our rural clinic. Every Sunday, our community medicine teacher volunteers in a rural clinic and some of us accompany him in turns to work and learn in the clinic. The clinic is about 80 km from the city and we take a long 4-hour train and bus journey to reach there.

The day started early - at 4 a.m. - and we reached the rural clinic on time and started work. It was a routine clinic with most of the patients visiting for a refill of their diabetes and hypertension medications. It was soon noon and hunger started setting in; however, there were still many patients waiting to be seen.

A young man with a walking stick in his right hand and a distinct limp entered the clinic. My teacher seemed to know him from earlier, because he greeted him by his name, Kamalesh (name changed to preserve confidentiality) and asked him how he was doing. Kamalesh made some inarticulate sounds instead of using words and began eagerly showing his forearm veins to Sir. I was very curious to know why he was doing that.

Sir took Kamalesh to the treatment room and made him lie down. Then he started arranging

for infusion of intravenous fluids while he told us about Kamalesh. The young man, he disclosed, had advanced and terminal cancer of the tongue with metastasis up to the lungs.

This was the first time I was in the presence of a patient with advanced cancer. I started trying to recall the pathology of neoplasia and the risk factors for tongue cancer. Since Kamalesh could not eat properly, the intravenous fluids were his main source of nourishment, Sir said. This explained the eagerness he demonstrated for the infusion. Just like a hungry person looks forward to food, Kamalesh was craving intravenous fluid. After receiving his infusion, Kamalesh left.

That evening while returning from the clinic, I asked my teacher about Kamalesh and he began narrating the full story. Kamalesh was once a young, energetic and happy man with many life dreams. Suddenly one day he developed weakness of the hand and leg on the right side and was diagnosed with a stroke. It was believed that his habit of smoking and his alcoholism had contributed substantially to the stroke at such a young age. He was engaged to be married but the diagnosis shattered everything and the marriage was called off. As if the stroke wasn't bad enough, after a few months he was involved in a road traffic accident and sustained a fracture of both bones of the right leg. Limb reduction

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had to be done, which was why he had the limp and needed a stick to walk. To add to his many challenges, he then developed cancer of the tongue. It spread rapidly and he gradually lost his ability to speak and eat.

On hearing this story, I was speechless for a few minutes. How could one have these many health problems, that too at such a young age? I wanted to somehow go back and talk to him and comfort him. I was very eagerly waiting for the next Sunday so I could meet him.

He did turn up the next week, but he looked dull and wasted. We were unable to find a good vein for the intravenous infusion. I remember Sir desperately trying to find a vein and even chanting a word of prayer. Finally, when we managed to secure an intravenous line in Kamalesh's left foot, Sir asked me to add a vitamin injection into the fluid and when I added it the fluid turned magically yellow in colour. The successful intravenous line and the way the intravenous fluid turned colour made Kamalesh's face brighten up. After two bottles of fluids, when I went to see him, he was behaving as though he'd had a grand feast!

In the subsequent weeks, Kamalesh's health deteriorated significantly and he was unable to even walk. So, we began to go to his small hut to give him the intravenous fluids there. Giving intravenous fluids inside a little hut is an interesting exercise. There are no IV stands to hook the bottle on to. I noticed my teacher tie the bottle to a hook on the roof of the hut and start the infusion. That was the last time I met Kamalesh. The next week when we went

to the clinic we were informed that Kamalesh had left the world.

I'll always be grateful to my teacher for showing me what it means to be a good doctor. I am also grateful to Kamalesh, who left a great impact on me. With his many challenges he was cheerful till the end and never gave up. The pain and the suffering that Kamalesh experienced and the burden on his family, especially when in a rural setting, cannot be explained in words. This patient taught me that even for advanced conditions like terminal cancer, simple interventions like giving intravenous fluids, and palliative care, are important. They can make a significant impact on the lives of the terminally ill.

Kamalesh, during his last few days, could not come to the clinic so we went to his house instead. Not all terminally ill patients have access to such health care where teams visit their homes and give them palliative care. Many such patients suffer in silence and die without dignity.

As students in tertiary care city hospitals we see only a small dimension of medicine; other dimensions like social and mental health can be witnessed only when we work in the field. The responsibility of a doctor is not just to cure the illness of the patient but also to alleviate suffering and provide a painless and dignified death.

Kamalesh helped me understand that Ringer Lactate, the intravenous fluid which we take so much for granted in our medical college hospitals, can be a delightful magical fluid - a ray of hope - for a few.

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