

Fortnight on Maxwell Street:
Playing Doctor in an American Ghetto
by
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Most of us are about as eager to be changed as we were to be born, and go through our changes in a similar state of shock.

- JAMES BALDWIN

FORTNIGHT

By the time we got there, the Chicago Maternity Center had been delivering babies in the bedrooms, dining rooms and kitchens of the poorest people in town for three quarters of a century. We were the Northwestern seniors. Mostly white and male and prosperous, we said farewell to medical student life as we knew it, and went, five or six fledglings at a time, to live and learn, round-the-clock for a fortnight, amid the black and brown underclass of the inner city.

It was late winter of 1968, in the narrow crease between the Tet offensive and LBJ's announcement that "I shall not seek, and I will not accept" renomination for the presidency. It was three weeks before the King assassination, when buildings would burn and National Guard tanks would roll past the front door of our temporary home. I was three months from entering the Army Medical Corps and three miles from Grant Park, the site of the Democratic Convention melee that coming summer, where heads would crack and blood would spill in a coalescence of rage over Vietnam and Martin and Bobby. Into that tinderbox, we came to learn a little ghetto obstetrics, home deliveries in the housing projects and slum tenements of Chicago. It was enlightening, it was terrifying, it changed my life.

No realistic, sane person goes around Chicago without protection.

– SAUL BELLOW

DAY ONE

To the clatter and whack of tire chains and wiper blades, Butler steered her red Buick Roadmaster down the crunchy black tracks of an otherwise snowbound side street. The buildings left and right were a monotony of weathered three and six flats, slumlorded brick tenements that were once the fine apartments of thriving immigrant families, long since gone to our preferred neighborhoods and suburbs.

“Well, so much for the orientation,” my fellow student said. His name was Ricky Peerce and he was riding shotgun. Me, I was in the back wedged between Mary the midwife and Carla the nursing student.

Butler told Ricky not to worry, that we’d finish the orientation later. She sounded New England, though she’d been working out of the Near West Side of Chicago for almost half a century, delivering babies in buildings you wouldn’t walk into if you had a choice, which we did not. “When we get up there, don’t touch anything,” she said. “Just watch me and Mary. You’ll get plenty, believe me.” She cracked the window and lit her third Chesterfield in an hour. I got the March morning air like a scalpel, then the sweet sulfur of the matchhead, then the smoke. Those who could—and we medical students could not—called her Butts.

Out of the car, Ricky and I each carried a black leather instrument bag the size of a small suitcase. Carla shlepped a foot-high pile of newspapers, while Butler and Mary, the pros, walked ahead unencumbered. Doctor Butler’s stride and bearing were all business, her bright red go-go boots a snappy non-sequitor.

“C’mon, c’mon,” Butler said, herding us through a front door into a barely warmer

lobby of mailboxes and buzzers. The tile floor was filthy, sticky. Of the six doorbells, not one was labelled. Butler was about to try one when a boy, he looked about eight, appeared at the top of the first flight of stairs.

“You from the maternity?”

“That’s right, son,” Butler said.

He waved us up and led our little caravan into the dark.

I thought about my Jewish mother and her hand-me-down prohibitions—the perils of swimming after eating, of going outside with a “wet head.” If she knew where her twenty-four year old son was at that moment, she’d have probably asked if I was trying to kill *her*.

Butler told us to try not to breathe. It was too late for me. My stomach roiled with the reek, a melange of urine and feces and rotting garbage that saturated the stairwell. At the top landing, Butler was shooining us into an apartment like a basketball coach, her left arm extended and pointing into the open doorway, her right windmilling. “Let’s go, let’s go, let’s go.”

Inside, the flat was a surprise. There was the aroma of baking, an olfactory antidote, I figured, for the stench of the building. And there was the smell of Lysol. We were in the living room amid old but serviceable upholstered chairs, needlepoint pillows and walnut tables covered with white tatting. There was a black spinet overflowing with sheet music. The floor was polished oak, and all four walls were covered with family photographs. The place was a home.

We were welcomed by a calm and gracious dark-skinned woman, young enough to be the mother-to-be. She had a big afro and wore black horn-rimmed glasses. “Willa, my daughter, she’s in the bedroom.” She told us that Willa’s pains were five minutes apart and that her water had just broke. Then she offered us coffee and pastry.

“Miss Brown, is it?” Butler asked.

“Yes, May Brown.”

“Well, thank you for your hospitality, but right now I think we’d best get to evaluating Willa. Is that the bedroom?”

Butler led us in. The small room was crammed with our crew of five, mother May, two mid-twentyish women who referred to themselves as the *Ahnties*, and Willa, looking every bit her fifteen years. From a single bed in the corner, she looked up at Butler.

“Are you gonna help me?”

Butler told her that she would, that we would.

“Would you cover my feet?” Willa asked.

She re-positioned the girl’s baby blue polyester blanket, squaring it to the foot of the bed and across the teenager’s chest.

The queasiness in my gut was gone, replaced by the itch of apprehension. Protected and supervised, for the time being I was not in jeopardy. But I knew that soon enough

I would be in a place like this or much worse, on my own.

Willa whimpered and said, “Help me.” She had a flattened hook nose, bulgy brown eyes, and acne dotting her café-au-lait skin. Her hair, bunched into short and disorderly rubberbanded braids, was oiled.

“What’s your name again?” Butler said, looking at me. I told her for the third time in as many hours.

“Well, David, we’re going to examine this girl. Come over here and help get her into position.” Then she retrieved Ricky’s identity and assigned him to the opposite side. My fellow student and I, a millimeter from doctorhood, survivors of the brain-stuffing, sleep-depriving, debt-encumbering eight year pre-med and medical school marathon, were now going to be stirrups.

As we slid her buttocks to the bottom edge of the bed, Willa was exposed from the ribcage down. Her abdomen bulged in the shape of a watermelon from her breast bone to just above her genitals, the taut skin shiny and bisected by a brown-black line of pigment—the *linea nigra*, I remembered—running top to bottom.

I looked across at Ricky. Like me, he had one hand under a thigh, flexing the knee and pulling it toward his chest. We had Willa splayed, ready for Butler’s lubricated glove.

Suddenly I swallowed a laugh and was not at all certain I’d be able to contain the next. In this first clinical adventure with Doctor Theresa Butler, the Medical Director of the Chicago Maternity Center, a cackling outburst would have been about as welcome as booming flatulence. Still, looking at Ricky, I could not get the image out of my head. Though it had happened over three years earlier, it remained a contender for the most macabre and hilarious of medical school moments, no small distinction considering the collective comedic guilty pleasures of the Northwestern University Class of 1968. Jocular sublimation, anxiety cum merriment, a gallows doozy. I feared I would snort.

It was the fall of freshman year and Ricky and I and two other green souls were being introduced to the art and science of physical examination on a surgical ward at the Chicago VA Hospital. Our teacher, a urologist no doubt in the snare of tedious academic obligation, paraded us with faint exuberance from one patient to the next, pointing out physical findings and asking questions as we strolled. There were hernias and enlarged prostates and kidney stones. And there was a case of acute epididymitis, a red-hot and swollen crown of tissue sitting atop the testicle, a condition you unconditionally did not want. Eventually we came to a patient, or rather to a pulled curtain concealing a patient, who got a somber preamble. “This gentleman,” our guide said quietly, “with carcinoma, cancer of the penis, had his amputation about ten days ago. Let’s have a look.”

Now had Ricky simply fainted, it would have been an acute embarrassment, short-

lived grist for the sadistic kibbitzers—there were plenty of us—but that would have been it. What made it *legendary* was that upon witnessing the unfortunate man's hideous leftover, Ricky collapsed unconscious upon him, pelvis to stump. Then, in what looked like a scene from a madcap movie, we were simultaneously peeling our entirely limp colleague off this horrified and quite specifically limp patient, expressing frenzied and preposterous contrition, all the while laughing hard enough against clenched mouths and noses to clear our sinuses for a month.

Thankfully Ricky, with an armful of Willa's leg, remained upright and I somehow managed to control myself. Butler stepped between us, her right hand gloved and wet with soap bubbles. She lowered her chin and looked at me over the rims of her round wire spectacles. "Boiled soapy water. Best sterile lubricant out here in the field, and everyone's got it." Then she leaned forward, her ears even with her patient's knees. "Okay, let's see where this baby is."

Willa emitted a barely audible grunt and I looked down just in time to see Butler removing her gloved index finger from the teenager. The woman had completed her assessment in the time it took me to start getting my nerve up.

Butler startled me, shouting inches from my ear. "She's fully effaced, eight centimeters."

Mary the midwife bellowed back from the living room, "Where do you want to do this?"

Butler stepped back, took a visual measure of something between Willa's legs, and made her decision. "Kitchen table." Without looking up, she kept me and Ricky in play. "You two go watch her do the setup."

Mary was on the living room floor rolling newspaper. "It's for leverage," she said. With a four-inch thick newspaper roll in each hand, one rolled the long way and one the short, she got up and led us into the kitchen. "Okay, gentlemen, wash your hands and get masked, capped and gowned. This is our maternity suite." I may have been only three months from my M.D., but this nurse was giving orders and I was taking them.

Mary narrated as she covered the kitchen table with overlapping individual sheets of newspaper from the remaining pile. "These are sterile, you know. Newsprint is sterile." She unfolded an oilcloth drape and placed it over the newspaper, two-thirds on the surface of the table, the remainder hanging almost to the floor at what would obviously be the business end of the setup. Using safety pins, Mary shaped the hanging end into a trough. "If we do this right," she said, "we'll keep the mess to a minimum. Find me a small pail or a wastepaper basket."

Butler hollered from the bedroom, "This girl's about ready, are we?"

Mary looked at Ricky as he fiddled with his paper cap and mask. "Tell her two minutes."

Carla the nursing student took a bucket from under the big-basined porcelain sink and handed it to Mary. She set it at the foot of the table where it received the oilcloth trough. Then, quickening the pace, she laid a large white bedsheet over the oilcloth and executed a rapid series of folds using the newspaper rolls, leaving them at right angles to one another inside the sheet. Mary saw that I was perplexed. "You'll see," she said.

"Well, ready or not." It was Butler right behind me. She had Willa, her huge abdomen bulging out from under a sleeveless cotton top, under one armpit with Mother May under the other. Mary took over from May, and she and Butler lifted Willa to the table, knees up and apart with her feet firmly against one of the concealed newspaper rolls.

Willa was moaning. "Hold me, somebody. Hold me."

Butler quickly scrubbed her hands at the sink, then snapped on a pair of pale yellow rubber gloves. Without being asked, Mary took a small piece of white adhesive tape and fixed the nosepiece of Butler's eyeglasses to her forehead. The two worked smoothly and silently.

"C'mon, fellas." Butler was gesturing Ricky and me to close ranks on Willa. "Just control her knees. Don't let her close up on me."

Willa continued to moan. "Put me asleep, please, can you put me asleep?"

Mary held out a stainless steel bowl containing wads of gauze floating in sudsy water. Butler took them, one at a time, and began prepping Willa. "You start at the center and work outward. You never come back, then you throw it away." She scrubbed as she spoke, dropping one wad after another into the bucket below.

Willa was panting, throwing her head to one side, then the other. "Oh god, help me, help, help." Then she quieted and tried to roll on her side.

Butler leaned forward. "When you get a contraction, dear, do you feel like pushing?" Willa shook her head. "Now take two breaths in, then let it out. You're doing fine. You just rest for now, go easy now, just breathe in and out real easy now."

The crusty schoolmarm of an obstetrician, her voice clipped and severe a moment earlier, was now nearly melodious in quiet and soothing guidance. From my vantage point at Willa's left knee, I watched Butler's face soften and her attention focus, as if now that the preliminaries were over—the arrival, the introductions, the laying out of equipment and supplies, the scrub and prep, the near completion of labor—it was time to get personal.

"She's all covered with sweat," Butler said. "Let's get a cloth and wipe her face."

The contractions came, wrenching, about a minute per, punctuated by two or three minutes of exhaustion, Willa panting and pleading, Butler in warm and steady command.

"You've been a real good girl. Do you want a little water to drink?"

"I can't, I can't. Please help me. Please."

"You're having a hard time getting this little baby out. I wish you could tell me when you feel like pushing or not. Can you?"

"Oh god! Help, help me. It's hurting. I can't, I can't."

"Look, let me take your hand."

"Can I turn over? Please, please, please."

"Easy now, dear, just stay with me. Push down hard. Another deep breath and then push again."

"Wait, wait, wait, wait. My right leg hurts."

"Hold it longer, longer. That's the way, longer, longer."

I lost my grip as Willa suddenly straightened her left leg. "Now don't jump," Butler said. I got her back in position.

Then, over the next several contractions and breathers, Butler somehow cajoled and mesmerized this unprepared teenager into the alternating rhythm of pelvic agony and blessed rest. Like an obstetrical lion tamer, I thought.

"Alright, let's see where we are," Butler said. She did another digital exam, but this time she lingered. "We're occiput posterior, face up." This meant that the back of the baby's head would travel along the floor of the vagina. I knew that this was the hard way out, slower and more painful.

Butler dropped the maternal persona to sum up with me and Ricky. "So we've got an immature primip with a posterior presentation. I doubt we'll get by without forceps and an episiotomy. And she'll need a pudendal block."

This was suddenly anything but assisted natural childbirth. She'd get nerve injections through the vaginal wall, then a skin incision from the vagina downward toward the rectum, and finally an extraction using metal tongs on the baby's head.

"If you were on your own at this point," Butler said, "you'd definitely be calling the OB resident for help."

Ya think?

"Are the OB residents available, you know, immediately available?" This was my first question of the rotation.

"Well, of course," Butler said, as if I'd asked her if the sun were yellow, as though this were a question that had not for years bedeviled the Department of Obstetrics or burned through the student grapevine.

Now I was grafting ominous flesh onto my fearful bones. I kept my mouth shut and thought about the discouragement wrought the week before by my classmate and buddy Don Greenberg.

I'd never seen anyone who looked quite like Donnie Greenberg, his pronounced roundness and bulbous nose, thin and scraggly blond hair, and a goofy and boisterous *joie de* everything; a clown without need of costume or make-up. Donnie's rage, then, in full combustion across the table from me, was all the more disturbing.

“It was the single worst fucking thing that has happened to me in medical school,” he said.

We were a block from Northwestern at Gino’s, the Chicago pizza landmark and a cherished med student hangout for decades. The pizza and beer punctuated and mollified the insane hours and workload. Days away from my own inner city trial-by-fire, and scared well beyond acknowledgement, I’d asked Donnie to meet me to talk about his time at the Maternity Center. It didn’t take him long to close in on his catastrophe.

“The OB resident on call was Westerman,” he said, “the prick from Passavant.”

I’d done my junior obstetrics rotation at Passavant Memorial Hospital and knew the guy, an imperious jerk two years out of his internship.

“We’re on our own, me and a nursing student, in this roach-filled flat with a woman who’s abdomen is as hard as a brick,” Donnie said. “I phone Westerman and he starts pimping me with his Socratic bullshit. I tell him he needs to come see the woman. He says there’s no emergency. I say I’m sure that something is seriously wrong. He tells me the woman’s not in active labor and I shouldn’t be bothering him. I tell him I’m very, very worried about this mother and baby. He says, Greenberg, I’m not here to take care of your anxiety. I wanted to fucking kill him.”

What happened next was the stuff of nightmares. When the woman did go into labor a few hours later, she explosively hemorrhaged and went into shock. She’d had a placental abruption, a premature separation of the placenta, the afterbirth, from the wall of the uterus. Donnie wound up carrying her down three flights of stairs, over his shoulder fireman-style, blood gushing down her legs, with the intention of driving her to the hospital himself. At the pavement, a late-arriving ambulance—he’d called twenty-five minutes earlier—took her to Cook County Hospital. He thought the mother survived, but was uncertain about the baby.

“As far as I’m concerned,” he said, “I was fucking abandoned.”

So much for *joie*. In search of someone to ease my misgivings, I’d come to the wrong guy.

Butler held a trumpet in her left hand, the so-called Iowa Trumpet, a six-inch stainless steel needle guide. It got its name from its horn-shaped mouth into which one introduces a long needle, in this case for the purpose of numbing Willa’s genitalia. I’d had several supervised stabs, so to speak, at this procedure during my junior obstetrics rotation at Passavant. With a gloved finger and working blind, you find a particular bony landmark along the vaginal wall, use it to position the guide, and slide the needle in for the anesthetic injection. An important nerve—the pudendal—is “blocked,” chemically rendered non-functional, and the patient is successfully numbed. On my first pudendal adventure, I managed to twice drive the long needle into my index finger, resulting in yowling pain, bleeding, obliteration of

sterile technique, and high entertainment for the surrounding nurses, residents and attending physicians.

Teresa Butler smoothly executed a block of Willa's left pudendal nerve, then her right. "Let's give it a minute to take," she said, folding her gloved hands in her lap. The teenager was between contractions and for the first moment since our arrival, no one was speaking or even moving. The five of us—Ricky, Mary, Carla, Butler and I—formed a tight circle around Willa's lower body. Mother May and the aunties filled in about her head and shoulders. May held Willa's right hand in both of hers. The little brother, the one who led us up the stairs, had been whisked off to a neighbor. This makeshift delivery room was ready, clinically and emotionally. Butler's technical skill and demeanor, at once commanding and comforting, made this happen. By reputation, this had been the case for decades. My clear appreciation of this, however, would have to wait. At Willa's side, my attention had its fill just trying to please and not falter as an assistant, while continuing my negotiation with dread. I could not know, much less regret, that this was but one of two times I would see Teresa Butler, the sole master of our fortnight, in action.

Willa did not feel the episiotomy, a three-inch incision which opened the way for the extraction of her baby. Butler gave the blood-wet scalpel to Mary and asked her for the forceps. "I'll bring him out face up," she said. "No choice." She'd somehow decided it was a boy.

Mary handed Butler the forceps, paired concave metal blades designed to fit on each side of the head and face. Applied one at a time, they then interlocked like scissors, allowing forceful traction on the baby's head. The first time I saw them, I thought they belonged in a medieval museum.

"Monitor the fetal heart rate while I do this," Butler said to no one in particular.

Carla had the only free hands. "One forty-four," she said.

I was surprised to see Butler drop to her knees as she began the delivery. She narrated for our benefit, a nearly whispered instructional commentary. This was interspersed with out-loud commands and encouragement for Willa.

"When the contraction starts, you pull straight for the ceiling. If it were face down, you'd pull toward the floor. Okay, here we go. Now, honey, you've got to help me. Now push hard, push. Once more now, push hard, push hard. You put all four fingers around the forceps and pull up. The traction is steady and continuous, not jerky. Push for me dear. Don't stop, keep pushing. Here we go, here we go."

First I saw only hair, black, wet and matted, then a pale blue and wrinkly little face. The forceps came off.

"Okay, no cord around the neck. Suction the mucus out." Mary complied with a little red rubber bulb syringe to the baby's nose and mouth. This elicited a cough, but no breath. "I've got it on the sacrum and I'm rotating it 180 degrees. Push now, push. See, I'm not pulling on the neck, I'm reaching in and pulling on the shoulders. Now

push hard, push. Once more now, push hard, push hard.”

The head and neck were out and the baby had rotated face down.

“Now let me show you how to deliver a shoulder. Look, he’s taken his first breath.”

In a few seconds the chest and abdomen were out and Willa lifted her head, startled at her first child’s first cry.

And then, “We got a boy, we really got a boy!” Butler held him up for everyone to see. “Okay, let’s get the cord clamped. Oh, that’s a big baby.”

Mother May and the aunties laughed and Willa blurted, “I don’t know about no second one.”

In quick and quiet order, the umbilical cord was cut, Carla pivoted with the newborn to the kitchen counter, Mary took the lead to deliver the afterbirth and Butler, walking away, yanked the tie of her paper mask with one hand while reaching for her smokes with the other.

Ricky and I, the leg holders, continued to stand there like spear carriers in a high school play. It’s an odd thing, this almost doctorness—physician impostors, menial laborers, competence and confidence all over the place and not by a long shot reliably in synch. My confidence at the moment was woeful. It wasn’t just that I was not adept at forceps delivery. I wasn’t even supposed to be. It was that I was not at all certain that on my own I would have even recognized that this was a complicated labor. Butler’s rectal exam and easy diagnosis of the baby’s dilemma might have been for me not just a *literal* poke in the dark. Had I been alone with Willa and failed to recognize her jeopardy, it would have come down to luck, the ill side of which was fetal distress, or worse.

Every one of my student obstetrical experiences had been closely supervised—the next one would not be. Yes, I’d delivered six healthy babies in my junior rotation, but each was chaperoned, safeguarded by hovering guidance, competence at the ready. Northwestern prided itself on its supervision and protection of the medical students, but that was at its private and prestigious core—at Passavant, at Wesley Memorial, at Evanston Hospital. In the outlands, places like the Chicago Maternity Center or Cook County Hospital, it was the Wild Midwest. Cook County was particularly notorious for its huge volumes of indigent patients and its unsupervised doctors-in-training. A Northwestern faculty member famously said that at Cook County Hospital a surgical resident could do two hundred gall bladders *wrong*. How many deliveries could I do wrong? How much trouble could I be in before I even knew it? Would I, like Donnie Greenberg, find myself in over my head without promised reinforcements, a novice with the well-being, or very life, of a baby or a mother at stake?

Standing there, a bit player with no lines to speak and no actions to take, I was grateful for my last moments of irresponsibility, of safety.