Day 3,175 — Unexpected Consult & Twisted Thinking

Dr. B's comment about life expectancy struck a chord with me because it's something that I often joke about.

July 21, 2019 By Dan Zeller

Last Thursday, a physician came into our office (keep in mind my office is in a hospital) and was asking about how to bring a volunteer on board to shadow him in radiation oncology. Of course, my ears picked up with the "radiation oncology" part of his request.

After explaining the process to bring his volunteer on board, I asked him if Dr. W was still in radiation oncology. Dr. W was the radiation oncologist that I saw in May 2018 to discuss my rising PSA, and he told me then that he planned on retiring in the next year or so. Dr. W had, in fact, retired according to Dr. B, the physician with the volunteer question.

Dr. B asked how it was that I knew of Dr. W, so I explained that I had the consult with him for getting zapped for recurrent prostate cancer. A bit to my surprise, Dr. B started asking a question or two and, the next thing you know, we're having a ten-minute consultation in the lobby of my office.

In a nutshell:

- His threshold for starting salvage radiation therapy for recurrent prostate cancer was when the PSA hit 0.10 ng/ml.
- He talked of how statistically the likelihood of the cancer being in my prostate bed is pretty high. In a tangential way, he implied that having positive margins confirms that the cancer is still in the prostate bed; having negative margins, as I did, makes things slightly less certain.
- We had a very cursory conversation about imaging technologies, but my sense was that his view of the newer technologies was more optimistic than what I've read about their effectiveness at my PSA level.
- He talked about how deciding to treat is a very personal decision and that there's no right or

wrong answer. But, with a PSA of 0.10, he said that I will be dealing with this again at some point in the future and, if I wait too long, the options for dealing with it become fewer.

At the end of the conversation, he was saying a treatment decision is also based on life expectancy and overall general health. Nothing new here. If I was 85 and had a cardiac condition, he wouldn't recommend zapping; but if I'm younger and in generally good health, he would treat. "I would get treated if it were me."

I thanked him profusely for taking the time to have a hallway consult when he was under no obligation to do so. I told him that I have another PSA test coming up at the beginning of October, and that we'll see what that brings.

Now for the funny part and insights into how twisted my thinking can be at times…

Dr. B's comment about life expectancy struck a chord with me because it's something that I often joke about.

My father died at the age of 69 and his mother also died at the age of 69, so I've always joked that I'll follow in their footsteps and die at 69, too. "It's hereditary," I'd say. Most would find it pretty morbid and tell me to knock it off.

If you've been reading this blog for longer than three minutes, you know I'm a numbers guy (see post title). So on the bus ride home after speaking to Dr. B, curiosity got the better of me. I wondered how freaky it would be if my father and grandmother lived the same number of days in their 69-year lives. When I got home, I ran the numbers.

I plugged their birth and death dates into the duration calculator that I use to calculate the day number of these impromptu posts and found that they didn't live the exact same number of days, but it was close. Dad outlived Oma by 49 days.

You know I couldn't just leave it there.

If I live as long as my grandmother, I'll be checking out of Hotel California on 29 July 2027. If I live as long as Dad, it will be 16 September 2027. If I follow Dad's trend an outlive him by 49 days, it will be 4 November 2027.

And then I had my "Oh, shit!" moment.

I may have less time remaining than the amount of time that I've been running this blog—3,029 days (best case) vs. 3,175 days.

I began to wonder what I will do in those eight remaining years. If I have only one big trip a year, what are the eight places I want to go see? How many more times will I see the people important

to me if we see each other only once every 1-3 years? How much longer will I continue to work?

I know it’s cliché as hell, but it was a bit of a wake-up call to get me off my butt and doing more than I am right now. Nothing like having a deadline to motivate you, eh?

I also know that there are no guarantees. I could get hit by a car crossing the street tomorrow, or I could live until I’m 90. I don’t dwell on any of this, but it’s nice to be reminded—albeit in a twisted way—that none of us are getting out of here alive, no matter how hard we try to avoid the inevitable, and that the days we have left should be cherished and embraced, whether in ways big or small.

Oh. If I make it to 5 November 2027, everything from then on is icing on the cake.

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