Living With Cancer, We Keep at the Scans

It’s hard not to think about cancer when you’re constantly taking meds and getting scans, scans, scans, writes blogger Adam Hayden.

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“How long does an MR spectroscopy scan usually take.”*

The ground shifted beneath our feet in November. No, not that November. November 2023. I had a routine MRI scan that month that showed an anomalous area. It was “subtle.” The changes I mean. The little blurs of white against the dark charcoal of the MRI image: areas of enhancement, where the contrast dye lights up, indicating, well, indicating something.

We watched and waited. Scanned again. More changes, this time a little more pronounced. “A mini-stroke?” someone wondered in the tumor board that week. So the differential was now possible stroke.

Statistically unlikely for a host of reasons: my general decent health (except for the brain cancer), my “youth”; 42 does not feel youthful, but 40s are the new something, the new whatever? I don’t know. I still eat dry cereal out of the box, and my boss had to explicitly tell me earlier this week to dress up a little for a client meeting where we were trying to sell some work, so, I’ll say, yeah, likely not a stroke because of my youth, and no high blood pressure problems or anything.

But with stroke now suggested, “Maybe, it is a stroke?” I guess somebody else must’ve thought in the room and agreed, that idea rose to the top.

The real reason I found this to be so statistically unlikely is the obvious: A long-term survivor of a brain cancer that is known to have near universal recurrence after one weird scan, then another, like, it’s not “stroke” I see flashing in the neons, it’s very clearly recurrence, right?

Right?!

“We think you may have had a mini stroke,” my oncologist relayed.

I scoffed—I hope not audibly. “A stroke?” I probably said with the higher pitch intonation emphasized in the latter half of the word.

“StrooOOKe?”

“Yes, so you’re now at greater risk for a larger stroke. I mean, if this was a stroke, so you’ll need to start on daily aspirin immediately, and I’ll order a few tests.”

Whitney was even more incredulous than I was when I told her the news.

“A stroke” she said deadpan. Here words looked like:

a s t r o k e ?

“Wait.”

Do you ever soak the sheet pan with a few burnt spots from the roasted potatoes on the sink, horizontal, with a squirt of Dawn in the shallow water? The blue Dawn, with the yellow duckling on the label. I want to believe that advertising lie so badly; the adorable duck. the bubbles have turned tiny at the top of the water as the sheet pan soaked, and you go to rinse it off by tipping the water into the sink and running the faucet over it, and there’s just enough viscosity that a satisfying leading edge of soap water races toward the stainless steel basin?

It was like that.

“Wait.”

Washing over me.

“Could it have been a stroke? What if I do have a major stroke now?!”

I had first found the news unbelievable, then humorous, then absurd, then serious, and then frightening.

There’s a scene in The Big Lebowski where The Dude says, “My only hope now is that the Big Lebowski kills me before the nihilists cut my dick off.”

That’s how I felt.

Brain cancer plus a stroke. Cool.

But yeah. All those tests for stroke turned up nothing. Here’s the good news, bad news, and you can choose which is which: I did not have a stroke, so we’re likely dealing with recurrence. Another fancy scan with a tracer deal would confirm recurrence by MRI and FET-PET scan a week or two later.

Six weeks to rule out stroke, the holidays, consults with radiology, and a second opinion, and we got on chemo for a year that I just finished, and will keep going; probably.

So, the past couple of scans have been stroke-like again. I mean, not really. No one said stroke. But they've been weird again is what I mean. More changes. "Subtle." There's that goddamn word again.

It's been chemo, scans, and blood draws happening every month now. Tomorrow is another. Let me tell you how hard it is to not think about cancer when just about every week you have something going on, whether it's swallowing poison, lying in a tube, or getting your arm poked. And sometimes you think about it just 'cause.

It is brain cancer, after all.

Wild.

Not sure to this day, going on nine years, that I've ever really accepted that simple matter of fact, despite seeing a surgeon cut it away during an awake brain surgery: there is a cancer growing in my brain.

Wild.

We keep at the scans, and tomorrow is another one.

My usual MRI with contrast and perfusion, and we'll tack on an MR Spectroscopy scan to see what we can see. It images other stuff, but data is data, and I'm getting tired. The last two years have started with medical indecision and uncertainty. In between, it's chemo and anxiety.

The short courses of this disease are fucking devastating. For those with mere months diagnosis to death, there is so much love that I have for you guys, and, contradictorily, it's become really hard for me to be fully present to others who have that presentation of this disease. Your suffering is one that I cannot know.

Living a long time is a different type of suffering. I guess that's the ground truth: brain cancer is suffering.

We keep at the scans.

Oh. The answer is an additional 30 minutes.

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