

Rabbi Julie Pelc Adler

Support Group

I'm sitting at a long, wooden table in a chair that swivels from side to side, participating in a support group on the eighth floor of Cedars Sinai hospital in Los Angeles. Each of us in attendance has suffered a ruptured brain aneurysm and, despite the odds, survived. At twenty six years, I am clearly the youngest person in the room. There are several men seated around the table and only one other woman: she is seated directly across from me. Some of us have brought our family and friends along to the meeting; my younger sister, Sari, is sitting beside me. All of us are wearing name-tags, labeling ourselves so we might feign intimacy with one another by calling each other by our first names. Some of us have more physical challenges than others. Some of these challenges are clearly visible to any observer. Others are not. I imagine that, seated, I might not look like the survivor of a massive brain hemorrhage or its subsequent neurosurgery, as the scars are tucked neatly underneath layers of brown curls, and inside my heart. My incompetent left hand is folded in my lap; my weakened left leg is invisible, under the table.

We eye one another nervously, waiting for someone else to break the silence after the facilitator has turned off the VCR which just played the informational video, "Your Un-Ruptured Aneurysm". We just learned about the various treatment options that are available, so as to avoid a possible rupture. I glance around the table to discern whether anyone else finds this funny.

"You look *really* great," the other woman in the group says to me, shaking her head. She continues, almost with surprise in her voice, "I expected everyone here to have

real disabilities!” I smile, return the compliment, and offer my gratitude. She repeats her compliment five or six times during the next thirty minutes. I have stopped smiling.

I think about the disabled parking plates fastened to the front and back of my car; permanently branding me with preferred parking wherever I drive. I remember the months riding in the passenger seat with my wheelchair nestled in the trunk, my mother driving me from physical therapy to occupational therapy, from vision therapy to hypnotherapy. I remember mornings when I needed her to pull the car to the side of the road so I could vomit. I think of my elderly compatriots in therapy, walking up and down imaginary stairs to practice lifting our weakened legs high enough to reach the step.

“Can I be honest with you, Pat?” I ask, careful to use the name printed in magic-marker on the name-tag fastened to the blouse of the woman seated opposite me at the long, hard table.

“Yes, of course,” she replied, looking thoroughly confused.

“I have a lot of resistance to being told how good I look. It makes me feel not-seen – almost like you’re not acknowledging how hard this is – how hard I have to work everyday at this...” I feel my voice crack and the emotion rise inside my body at this confession. Sari reaches out for my hand. This may be the first truly honest thing I have shared about my emotions in this support group.

“Huh...” she answers, “interesting...” She does not apologize.

General conversation shifts again to the video. Nobody complained that it had essentially been created for an invisible crowd of people whose aneurysms exist in the un-ruptured world of potentiality – of “what if?” What if I had known about the aneurysm *before* its rupture? If I’d had a CAT scan or an MRI for no reason at all, and

they had detected the tiny cluster of narrowed blood vessels – waiting, weakening, pushing against their ever-thinning walls, closer to bursting with each heartbeat, pressure rising with every pump: to coil or to clip? To elect open-cranial surgery, despite a symptom-less existence “just in case” the aneurysm were to burst someday?

The facilitator, a young, athletic nurse planning to run a marathon next month, asks whether we’d like to discuss the first video, or move immediately to the next. We discover that the second video will be about ruptured aneurysms, though much of the preliminary information about the origin, nature, and behavior of aneurysms will be the same. My sister speaks aloud for the first time, indicating that she – we – would like to see the second video. I blink, waiting for a response from the others in the group. Silence. The Registered Nurse moves toward the VCR, with a new video tape in hand.

I swivel my chair back to face the VCR, preparing to watch, “Your Ruptured Aneurysm”. The room darkens; we blink in unison to adjust our focus to the screen before us, once again. I am relieved that Sari has spoken my own desires aloud, as I am aware of the awkwardness hanging in the air after my exchange with Pat. I wonder whether I will see myself reflected a bit more in the second video.