Ebola and the TCBM Moment

Med school faculty have a phrase to describe the experience of a medical student realizing their humanity in relation to the humanity of a patient in a difficult situation: The TCBM Moment. TCBM is not medical jargon; it simply means “that could be me.” It is a sudden and powerful burst of empathy that can often be terrifyingly painful. I myself hadn’t had one in quite some time. My area of expertise is infectious diseases, specifically evolution of emerging diseases, and this means that I spend a good deal of my time focused on people who are sick, frightened, and often in the position of being beyond help. There is a tendency to become numb to sickness and suffering when you think about if from the weeds virtually every day of your life, for self-preservation if nothing else. I thought I had lost my capacity for TCBM moments quite some time ago.

Then in 2014, the Ebola epidemic hit West Africa. I didn’t think much of the initial reports of cases from the winter; it does crop up in small clusters a few times per year in Africa. By May, I was growing concerned. Doctors Without Borders (MSF) was screaming for help in the form of personnel, facilities, and supplies by that point, and the world was not listening. When a woman collapsed and died in Lagos, Nigeria after becoming infected in Sierra Leone, the world woke up. It was August then, and thousands of people had already died. I myself, however, was neither terrified nor moved to incapacity. The threat for substantial spread in Western countries was limited, and while I felt bad for the patients and their families, I certainly was nowhere near a TCBM moment.

Then I watched a short piece featuring an Ebola-stricken village in Sierra Leone from the BBC, and I will never, ever forget it. Suddenly, there it was: a TCBM Moment. Oh don’t get me wrong: I wasn’t suddenly frightened that I would develop Ebola. This was much more visceral. The piece shared the story of a village called Kigbal, and the central feature was a road. It ran down the center of the village, subtly dividing it in two. On one side of the road, everyone was reasonably okay. Shaken, terrified, but okay. On the other side, everyone was sick. Two women were shown in the video, and they were feverish and delusional. A little girl, no older than 2, was also there although she seemed healthy. Clearly she had no other place to go, and I suspected that within a week she would be dead. Those on the “healthy” side of the road were more or less lined up watching the sick people, waiting for their turn. The reporter asked the children to raise their hands if they had lost a parent to Ebola. Every hand went up. A 14-year-old girl was interviewed, and she revealed that her father had been taken from the “sick” side of the road to a clinic. She did not know if he was alive or dead. He was unique; most of the people died right where they were on the side of the road.

Then a woman was interviewed with her arm around a little boy, and he had a headache. Was he infected? Who knows? Should he be sent where the sick people are to protect the others? What if he just had a headache, and then became infected when he initially wasn’t? One thing is virtually guaranteed: if he goes to the sick side, he will die. Would she, as his mother, stay with him while he develops Ebola and dies, or should she stay with her other son? If she goes with him, she herself would likely
become infected and die in the end. Her other son would then be alone, be one of the children raising their hands or be like the little girl wandering by her dying mother. If she does not go with her possibly sick child, she is sending her little boy off to die alone.

Bam! TCBM Moment. I sat at my desk and cried, wondering how a mother makes such a decision, because I have two sons too. I do not know, and I hope I never find out. Would I go with the sick one and abandon the healthy? Would I send the sick one away to protect the healthy one's chance at having some semblance of a family intact? I don't know. To the woman in the video, I would say this: I am sorry. My tears do not help you, but I'm sorry. By a favorable turn of chance, I was born in a Western country and my boys are safe whereas yours aren't. In another life, you could be me and I could be you. I owe it to you to do better, sooner, next time. The epidemic is now over, and I wish I knew what happened to you and your boys. I hope you are well, and I hope that next time, we do better.