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Honey and Bread

Cindy Malone

Steam rose from the sweet potatoes, and with it the smell of soil and the earth's dark sugars. French doors divided the sunlight into a slanting grid so that rhomboids of light and bars of shadow lay across the table. My daughter, four years old and recovering from croup, left her chair to climb into my lap. She wanted nothing to eat—nothing on the sunlit table, nothing in the kitchen. She rested her head against my shoulder and said, “All the choices are bitter.”

I know now what my daughter meant. I recalled her words over and over during months of chemotherapy, when the foods I love turned repulsive. As I'd done so many mornings, I poured soymilk over frozen blueberries and multigrain flakes. I managed three spoonfuls before I poured the contents of the bowl into a plastic bag, tied the top, and stuck it in the freezer until garbage day. One freezer shelf collected the plastic bags of uneaten meals I'd expected to savour and couldn't stomach. Into a bag went wholegrain penne with steamed spinach and garbanzo beans, into another bag went two black-bean-and-salsa burritos. My mother taught me to eat fruits and vegetables of many colours, but I could count on only three foods, and all of them were beige: cream of wheat, string cheese, and buttermilk pancakes. Pancakes always delivered.

No one knows precisely how chemotherapy agents spoil taste, though the problem of foul taste is well documented. A 2009 article in *Supportive Oncology* notes that both cancer and cancer treatment can distort the senses of taste and smell; the article links these sensory problems with the frequent occurrence of malnutrition in cancer patients. Patients report aversion to a wide range of foods and beverages, including red meat, coffee, citrus fruit, and even water, which many find intolerable because of a strong metallic taste. Cookbooks for chemo patients omit from recipes the most unpalatable tastes and textures and offer simple instructions for small, tolerable meals. In my own case, chemo or cancer burned out most of my taste receptors. Salty, sweet, savoury, and sour tastes flickered dimly or failed to register. Only bitterness remained.

The link between anticipation (partly memory, partly imagination) and experience (the taste and the texture of food in my mouth) eroded and sometimes snapped completely. On my better days, I lay on the couch dreamily inventing perfect little meals: a few blue corn chips, a small dish of guacamole, and a stack of tiny cheddar-cheese cubes. I learned very early the value of the ready-made, since appetite and energy, equally fickle, wafted off in the few minutes it took to chop and sauté. Treating my appetite as I might a cranky toddler, I took down a pretty plate and set upon it my chips, guacamole, and cheese cubes. It looked exactly right.

Then came disappointment like betrayal. Everything looked as it ought to, but tongue and teeth objected to the chips, abrasive and saltless, reduced by chewing into fine gravel. The smooth green mound of guacamole felt thickly paste-like and tasted strongly of rubbing alcohol. I spat out the sharp white Vermont cheddar but couldn't spit out the smell and taste of sweaty socks. Betrayed by food that tasted nothing like I remembered or imagined, I nevertheless didn't end up malnourished. An hour later, the toddler and I were back in the kitchen, where I assembled another small meal on another pretty plate—hummus, perhaps, with a slice of grainy bread and a clementine—only to be stung once more with shock and disappointment. Again and again, the image in my mind sang of pleasure to my tongue. Both con artist and dupe, I never stopped falling for the bait.

It might have been the cancer or it might have been the chemo that wrought such miserable alchemy. Before I happened on the lump in my breast, I didn't notice any changes in taste, so I'm inclined to pin the blame on the chemo agents, Cytoxan (cyclophosphamide) and Taxotere (docetaxel). Of cyclophosphamide, a relative of nitrogen mustard, the CDC cautions, "Because no antidote exists for nitrogen mustard exposure, the best thing to do is avoid it." Sage advice, certainly, but the poison was the whole point.

Pharmacologists derive docetaxel from the European yew tree, a species that the 2008 *Columbia Encyclopedia* describes this way: "Of somber appearance, with dark green leaves, the yew since antiquity has been associated with death and funeral rites." In fact, the exceedingly long-lived yew often spreads its shade over British cemeteries.¹ Tennyson's elegy for Arthur Henry Hallam pictures the yew at the site of his friend's grave:

Old Yew, which graspest at the stones
That name the under-lying dead,
Thy fibres net the dreamless head,
Thy roots are wrapt about the bones.²

Taxane fibres net my head, too, strangling the pleasure I once found in food. And no wonder: the highly toxic seeds, needles, and bark of the yew tree kill unwary horses, cows, sheep, and goats. As veterinary doctor R. B. Cope observes, "Since cases have been recorded in which horses have collapsed within 15 minutes of consuming *Taxus* species, absorption of ingested taxine alkaloids in monogastric animals is rapid."³ It's hardly surprising that humans—also monogastric mammals—who take the yew-derivative docetaxel directly into their veins have some serious trouble with appetite and digestion.

MedLine Plus lists chemo side effects all along the digestive tract: mouth sores, changes in taste, nausea, vomiting, diarrhea, constipation. In the week after chemo infusions, when the mouth sores were most aggravating, I depended on my beige trio and avoided the lumpy, the scratchy, the sharp, the acidic. Not that I always had much latitude of choice; during a spell in the hospital because of abysmally low white-blood-cell counts, I wasn't allowed to eat raw fruits and vegetables. When the nice young Menu Man came by, he asked me what I wanted for lunch:

Menu Man: Our special today is a chicken stir-fry.

Me: I'm sorry, I don't know if this is in the chart, but I'm a vegetarian.

Menu Man [looking at the chart]: Oh. Oh, yes. [Pause] Well, how about a pork sandwich?

Me: I'm sorry, that won't work. You see, I'm a vegetarian. I don't eat meat.

¹ "Facts about Nitrogen Mustard," Centers for Disease Control and Prevention, last reviewed February 22, 2006, <http://www.bt.cdc.gov/agent/nitrogenmustard/basics/facts.asp>.

² Alfred, Lord Tennyson, *In Memoriam A.H.H.* (1880), II.1–4. The poet returns to the yew tree in XXXIX.

³ R. B. Cope, "Toxicology Brief: The Danger of Yew Ingestion," *Veterinary Medicine* 100, no. 9 (2005): 648–650.

Menu Man [thoroughly flummoxed]: Well, I can have them make you a salad.

Me: I'm sorry to be so much trouble, but that won't work either. I have neutropenic fever, so I can't have any fresh fruits or vegetables.

We reached a settlement, finally, when he proposed a grilled-cheese sandwich.

I recovered quickly from the neutropenic fever and got my fresh fruits and vegetables back, only to develop a deep-vein thrombosis and a new list of restrictions: no cranberries, no green tea, no alcohol. The clinic handout warned about foods rich in Vitamin K—spinach, kale, mustard greens—and exhorted me to eat the same portion of the lesser greens every day. Wherever I went, wherever I might wander in the next few months, I had to conjure up one romaine-lettuce salad daily. Meanwhile, I wondered about the deep-vein transportation troubles—the clot a jack-knifed semi, behind it a long string of nutrient pile-ups.

I certainly managed to eat, even if I didn't derive much pleasure from food. The nausea-control medications worked well for me; my food, once down, stayed down: I was a one-way street. In fact, I was a cul-desac, posted No Outlet. Though I took brisk walks, though I spiked my cream of wheat with ground flax seed, though I tipped glass after glass of foul-tasting water into the tubes and chambers of my digestive tract, food hardened and set, like plaster of Paris. Helpful young nurses suggested drinking more water and adding more fibre to my diet. I peered glumly at them over the rims of my bifocals. Water, in time, will carve a Grand Canyon, but I had neither the time nor the patience for the gradual work of geological time. I wanted cataclysmic change, preferably by morning. At last an older, more experienced nurse handed me a discreet paper bag full of samples of the meds I'd need to turn the cul-de-sac into a through street. God bless her.

On bad days, I lay in bed, thinking far too much about yew trees and nitrogen mustard. If I could have read books, I would have disappeared from my life as often as possible, as long as possible. But the docetaxel had plugged up my tear ducts, and puddles of tears spilled over whenever I opened my eyes. Like a miraculous icon, I wept continuously and decorously—no sobbing, no nose-blowing, just a steady flow of Taxotears. I lay in my darkened room, eyes closed, wondering how, precisely, these chemo drugs had wrecked the pleasures of taste. The mirror confirmed the cyclophosphamide damage to tongue and palate: coarsened tissue, dark red craters. Whole colonies of taste buds must have slid into those sinkholes. What about saliva? What happens when horse-slaying taxanes and the spawn of nitrogen mustard mix with its enzymes? What about the neurons that carry taste signals to the brain? Did they manage to light their beacons, or did they just stumble and flounder? And what about my poor brain, shocked and shivering in its pan? Even if the news of taste had managed to get there, could that hollow-eyed, palsied brain hear anything but its own rasping breath?

I had devolved into a poor specimen of my kind. If some predatory species had gotten hold of me, I hated to imagine its butcher's appraisal: a few parts still plump and smooth, but too many swollen and gristly bits, too many clots, too much tissue charred beneath the skin. The nerve fibres in my hands and feet sometimes flamed, sometimes smouldered. Cancer and chemo had

left me bald and puffy, red-faced and exhausted, sickened by the very foods I still reached for from long habit. I expected to recover my sense of taste, just as I expected those other effects to diminish in time. Bit by bit, I hoped, I would add more items to my sad menu, my cream of wheat, string cheese, buttermilk pancakes, and romaine salad. But would I love what I used to love?

Chemotherapy and then radiation mean that I will probably live long enough to see my daughter grow up, barring some other catastrophe. Enduring those treatments, I was relieved, grateful beyond measure for the years they are likely to grant. But I also felt the throbbing of a question: after four “chemotherapy insults,” four infusions of a chemical agent that alters the DNA of healthy cells, would I be the same person?⁴ Would I love all that I used to love?

“No man can give me any word but Wait, / The puny light”: and so I wait, with Gwendolyn Brooks’s stark poem in my burning hand:

I hold my honey and I store my bread
In little jars and cabinets of my will.
I label clearly, and each latch and lid
I bid, Be firm till I return from hell.
I am very hungry. I am incomplete.
And none can tell when I may dine again.
No man can give me any word but Wait,
The puny light. I keep eyes pointed in;
Hoping that, when the devil days of my hurt
Drag out to their last dregs and I resume
On such legs as are left me, in such heart
As I can manage, remember to go home,
My taste will not have turned insensitive
To honey and bread old purity could love.⁵

⁴ In “Cyclophosphamide Induces Caspase 9-Dependent Apoptosis in 9L Tumor Cells,” *Molecular Pharmacology* 60 (2001): 1268–1279, Pamela S. Schwartz and David J. Waxman discuss DNA damage from cyclophosphamide. At least, I’m pretty sure that’s the gist of the article.

⁵ Gwendolyn Brooks, “my dreams, my works, must wait till after hell,” *Selected Poems* (New York: Harper, 1999), 23.

