

TPIU Compassion Essay/ Video Contest

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Across the Horizon — Why Compassionate Healthcare Matters

Putting on my swimming goggles, everything looked hazy and surreal. The twelve-year-old me submerged into the water and let my heart sink.

At ten I was diagnosed with scoliosis. Following a chain of unfortunate events, including mistreatment at one time, I developed a debilitating coccyx pain and even lost my bladder control. Physical therapy and swimming helped—and that was what I did daily for an entire year.

Sometimes as I slowly went under water, it parted my visual field into two: the top calm and bright, the bottom turbulent and deep. For years I belonged to the latter—I was a scared patient, navigating uncharted waters.

Eventually I recovered and got into medical school. I wish I could say that what inspired me was compassionate care; quite the contrary, it was a most rude and arrogant doctor who set me on this path. I still vividly remember how he refused to listen and yelled insults at my family. I felt wronged and powerless—I had no place in the small consultation room.

It was then that I found my purpose: I would serve the weak and needy, I would be their voice and advocate. His lack of compassion made me realise how fundamental it is—it is a bridge between two worlds, a pair of goggles that allows us to see and immerse ourselves in a different realm.

As a medical student, I was delighted to find many humble and caring doctors around. One of them, a nephrologist, opened my eyes to a different level of compassionate care.

In the renal ward he patted patients on the back and shared laughs with them. In turn they greeted him with such warmth and enthusiasm, as if he was an old friend. I could not quite name what made him so genuine—it was more than his words and smile. His whole being breathed equality; it was human-to-human before doctor-to-patient.

I observed how there was no feigned politeness, no sense of superiority. He was not there to offer pity; rather he was to empathise and help as a fellow human.

Then one day, I met a patient awaiting peritoneal dialysis and asked her how she was feeling. She looked up—immediately I saw she had a story to tell. I settled at her bedside as she told me her fears and regrets. I learnt that she was estranged from her family and very alone; she saw herself as a burden to society and had persistent suicidal thoughts. Other than checking that her psychiatric appointments were up to date, I barely had to do anything—I just listened as she sobbed between words.

Before I moved on, she whispered “thank you” with a soft smile. I could see the wrinkles at the corners of her eyes. The lines began to blur—from patient to medical student and doctor, everything merged. The horizon was traversed, and worlds finally crossed.