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The Shadow Of The Whale

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Oh, God, thy sea is so great, and my boat is so small.

— Breton fisherman's prayer

It is 2 A.M. on a Sunday when my husband, Brian, and I arrive at the emergency room. The waiting area is strangely quiet, almost peaceful. The TV overhead drones, and a Latina mother and her young daughter sit in adjoining chairs, looking calm and wide awake. I take a deep breath and step up to the admitting window in my slower-than-usual, wide-legged fashion. The man behind the glass looks down at my belly and asks, "How far along?"

"Twenty-five weeks," I say. We should have several months to go. The man takes down my information and tells me a wheelchair will be coming soon, though I insist I can walk just fine. While Brian paces the length of the waiting room, I find a seat facing the dark window, close my eyes, and turn my attention to the intermittent cramps in my abdomen, sensations that may mean something bad or may mean nothing at all.

Less than a week ago we were tooling around the Hawaiian island of Kauai in a rental car, listening to slack-key guitar music on the radio and looking for secret snorkeling spots. I wore a flowered bikini, feeling both proud and shy as I slathered my bare belly with sunscreen. My mother had tried to talk us out of the trip. Though an intrepid traveler herself, she'd said things like "After all you've been through . . ." and "If, God forbid, anything were to happen . . ." These comments had made me feel fragile, jinxed. I just wanted to be a normal pregnant woman, as the doctors had assured me I was. Brian and I were both tired of worrying, tired of being the object of other people's worry — or, worse, their pity. And so we hiked in the rain, did a little kayaking, hunted for waterfalls, caught a glimpse through fog of the green Na Pali coast. As I hauled my extra bulk up sandy slopes, I felt vigorous and full of health. I began to let myself feel excited about the future.

The waiting-room clock reads 2:35 A.M. Brian is clenching his fists and looks ready to start yelling at someone when the wheelchair finally arrives. The young orderly tells us we're lucky: it's a slow night in labor and delivery, so we'll get a private room instead of a curtained-off gurney in triage. (We don't ask why, if it's such a slow night, we had to wait a half-hour.) Our trip upstairs is silent except for the ping of the elevator and the squeak of rubber on the polished floors. My belly is



quieter now, but fear still burns in my throat.

Tonight started out as an ordinary Saturday evening. Happy to be back home in San Francisco, we had dinner at our favorite Burmese restaurant, sitting at a cozy table under the giant gold Buddha head. We ate tea-leaf salad and spicy samosa soup. Afterward, at our apartment, we watched a movie; Brian headed for bed halfway through, but I stayed up till the end. It was nearing eleven when the cramps started, vague at first. Indigestion, I figured. But then the pains grew sharper and more frequent. I didn't want to wake Brian, so I telephoned the on-call advice nurse. She told me to drink a quart of water, wait a half-hour, and then time the cramps. I curled on the couch and scribbled down numbers, dozing off between pains with the pen still in my hand. When I called her back with the results — strong cramps every five to seven minutes — she said, "Shoot." Then, "You'd better come in."

I woke Brian from a deep sleep and watched his face take on that hard, masklike quality I hadn't seen in a while. We drove without speaking through the deserted city streets, parked, and walked toward the red EMERGENCY ROOM sign that buzzed in the distance.

Growing up, I was spared what I've come to think of as "real suffering." Yes, my grandparents died, my parents' marriage was quietly miserable, and I was dogged by a persistent melancholy. But sudden, abject loss — the kind that pulls the existential rug out from under you — remained something I read about in the newspapers, something that happened to people I didn't know. I knew how lucky I was, but I also felt oddly numb, cut off from the world. And so, though I never exactly wished for anything bad to happen, I harbored a secret yearning that something might come along and make life seem more real.

The hospital room is dimly lit, and I'm sitting on the bed, still in my clothes. Our nurse, whose name is Bernadette, wraps my arm in a blood-pressure cuff and asks the usual questions. "Is this your first pregnancy?"

I never know how to answer that one. "Yes. . . . Well, no. . . . Uh, it's my third — but the first one to get this far."

Bernadette wrinkles her brow in sympathy.

Once she's gone, I pull off my sweat pants and fleece pullover — almost tipping over, as I sometimes do these days — then lie on my back, my belly beneath the thin hospital gown like a blue-flowered mountain. Though his face is grim, Brian manages to reassure me. "It's better to know," he says.

I didn't used to be the kind of person who worried — at least, not about the big things. "Everything is going to work out," I would say when Brian was anxious about something. "It always does, right?" He confessed later that he found my sense of security frustrating and presumptuous, but also enviable. And when my certainty was undone, he was sadder for me than I thought I had a right to expect him to be.

After a while Bernadette comes back and straps a disc-shaped fetal heart monitor around my belly. The monitor emits a blank, watery sound. She frowns, moves it around a bit. There is static, then more vague whooshing. She sighs and

tries again. Brian and I grab each other's hands.

Five years ago it was the silence of a missing heartbeat that let us know our first pregnancy had ended in miscarriage — a common-enough occurrence, but it had taken us more than a year to conceive, and the loss of that baby shook my world. We didn't know it was only the opening salvo in a longer struggle.

Bernadette finally finds what she's looking for — a steady, fast heartbeat — and secures the monitor around my belly. She explains that they need twenty uninterrupted minutes of monitoring, then leaves us to wait.

After the miscarriage we tried for months, and then years, but we were unable to conceive. Having exhausted every holistic option, we turned to high-tech fertility treatments, one after another, each more expensive and invasive than the last. Despite a good prognosis from the doctors, nothing worked. Our long string of failures began to take on a fluky, could-almost-be-funny-if-it-weren't-so-heartbreaking quality: bizarre drug reactions, a crippling bout of chronic-fatigue syndrome, a lab error leading to a false-positive pregnancy test (on my birthday), and a doomed tubal pregnancy (at Christmas).

During the years we struggled to get a pink line on the stick, friends, siblings, cousins, neighbors, and co-workers — even some who were on birth control — got pregnant and had babies in quick succession. Out of self-preservation we answered few phone calls, turned down invitations, withdrew into our quiet world of two.

You might think (and many of our friends would secretly have agreed) that the time had come for us to move on to plan B and adopt a child, or else call it quits altogether. But we weren't ready to give up on what the doctors kept telling us was a realistic chance of a healthy pregnancy and all that came with it: childbirth, breast-feeding, a little person in our house who might one day saunter like my father or laugh like Brian's mother. We joined an infertility support group: eight couples, all of whom had been through years of attempts, though we had the dubious distinction of being the longest-suffering. Over the months, as though it were scripted, every couple became pregnant but us. Brian and I were what the group called "the cheese" — as in the children's song that ends, "The cheese stands alone." The losers of the losers.

By the time Brian and I made what we had agreed would be our final attempt at in vitro fertilization, we weren't expecting much. We hauled the cardboard box out of the closet and unpacked syringes, alcohol swabs, and drug vials, cracking junkie jokes and speculating bitterly about the exotic vacations we could have been taking with the money spent on the procedure. We doubted it would work, but we needed to go through the by-now-familiar marathon of needle bruises, drug-induced emotional meltdowns, and white-knuckle ultrasounds one more time.

It was a shock when we got the good news. We had become so accustomed to disappointment that we didn't quite know what to do with the possibility of success. For months Brian saved the voice-mail message I'd left on his cellphone.

My voice sounded as though I were reciting a grocery list. I didn't say the words *pregnant* or *baby*. Instead, I recited the blood-test results and said, "So. There you go."

The same week I found out I was pregnant, an essay I had written about our infertility experience came out in a national magazine. All of a sudden my in-box was flooded with e-mails from strangers who shared their own harrowing stories. One woman wrote about having had two miscarriages before giving birth to a boy who died of a heart defect after eleven days. Another woman had gone through ten in vitro cycles — an unthinkable number to anyone who's been through one — to conceive her only daughter. At age seven the girl had been killed in a car accident. I was moved by these people's attempts to make peace with their tremendous losses, but also terrified. Their stories underscored what five years of traveling in infertility circles had taught me: that there is no way to know how many more losses you will have to face.

One Saturday morning, newly pregnant, I woke to sun streaming through the bedroom window in biblical streaks, illuminating dancing dust motes. Filled with an unfamiliar, delicious anticipation, I announced to Brian that I was going shopping for maternity clothes.

I drove across town to a secondhand store staffed by new moms. The woman helping me wore her dreadlocks in a head wrap and carried her sleeping baby in a colorful batik sling. She was the kind of mother who made it all seem so natural and around whom I tended to feel envious and self-conscious, but on that day I didn't care. I put on the fake belly under a flowered maternity top and waltzed around the dressing room, asking the dreadlocked woman what she thought. I lingered over the bibs and diaper bags. I fawned over a newborn dozing on her mother's chest and asked how much she ate and slept. I was beginning to believe that, in less than a year, Brian and I would have one of these all our own — that was, *if* everything went OK; and *if* our little bundle of cells was arranged in the right way, with the right number of chromosomes in all the right places. Genetic abnormalities were just the sort of risk I would have been dismissive of in the past, but now the possibility of having a child with a congenital heart defect or trisomy 18 seemed very real.

The genetics-testing class was held in a brightly lit conference room. The couples crowded around the narrow table whispered to each other and leafed through the piles of handouts we'd been given. The instructor, a young blond woman with a long lanyard of IDs bobbing against her chest, managed to sound simultaneously perky and apologetic as she led us through an overview of genetic problems and the tests available to screen for them. She hurried past certain slides — a graphic drawing of a spinal deformity, the baby's spinal column an open pink trough on the outside of the body — and did her best to minimize others: "This is actually a very rare condition, and one that can be easily tested for, so don't let it worry you too much." When she got to sounding breezy, Brian would raise an eyebrow at me as if to say, *Yeah, right*.

Like most everything in medicine, nothing was as straightforward as it sounded. Each test seemed to have a drawback: the results were vague, or it picked up certain disorders while remaining blind to others. The most accurate test of all, amniocentesis, posed a small risk of miscarriage itself. Beyond the statistics loomed an unspoken question: How bad would the news have to be before we would consider ending the pregnancy? The doctors had turned uncertainty into a list of percentages, as though knowledge of the risks could prevent heartbreak or help manage devastating news.

In the end we opted for a simple screening test, just three vials of deep crimson blood drawn from my arm by a nurse with a Russian accent, her long nails painted the same red color. The results told us our child was at no special risk for the most common genetic abnormalities. Everything looked normal.

Despite the apparent good news, Brian and I joked that we could avoid telling people about the pregnancy until they noticed a kid in our house. If there had been a way, we might actually have done this. When I imagined myself walking around with a big belly, I felt naked, exposed, a human billboard announcing to perfect strangers the most intimate, tenuous part of our lives. And if something terrible happened, there wouldn't be any way to keep it to ourselves.

We never mastered the art of announcing our news. We tended to be sheepish, as if embarrassed by our good fortune. Or else we'd be awkward and loud, Brian booming without any preamble: "So, Thea's pregnant!" When family or friends congratulated us, we'd duck our heads and nod, trying to make ourselves physically smaller, as if we needed protection from their unchecked excitement.

Brian took off work when we went for the sonogram. This was the big one that could pick up problems the blood test might have missed and would tell us the baby's gender. The cheerful technician spent forty-five minutes moving an ultrasound wand over my belly, examining ghostly images on a screen, and tilting the monitor to give us a better view. After we'd told her why we were nervous, she made sure to explain what she was doing and not let the silences go on too long. She counted the chambers of the heart, measured the head circumference, and pointed out the brain: a dark mass inside a smoky ring of skull. "Everything looks perfect," she kept saying. She even measured the femurs, which she pronounced "a little short." We laughed, thinking of our own long torsos and stumpy legs.

The technician took pictures of the hands, feet, and face from all angles. "You've got a cutie here," she said. And there was something sweet about the bump of the nose, though the stark outline of bone looked spooky.

She gave us stacks of images, which we took home and kept on the dining-room table for days. I was partial to the one of the spine, its curved chain of delicate, perfectly formed vertebrae. Brian's favorite had a large arrow pointing to a barely discernible bump. "Poor little fella," Brian said. "He needs an arrow to point out his penis."

In the hospital room I lie here trying not to look at the basinet in the corner, with its clear plastic sides and rolling metal base. It reminds me of the time I saw a friend's daughter in the neonatal ICU. She'd been born at twenty-five weeks, without the ability to see or suck, so tiny she fit in her father's palm. She stayed in the ICU for months, and though she survived, the doctors couldn't say what problems she might have. Our friends are lucky; she's a tall, plucky kindergartner now. Still, the early photos are haunting: her body thin and red under the tubes and wires, the protective goggles dwarfing her miniature face.

The wall clock clicks to 3:45 A.M. Nurse Bernadette seems to have forgotten us. Brian comes back from wandering the hallway and lies down next to me. The cramps are better, I tell him. We agree that even though we have been waiting a long time to see a doctor, even though it's starting to seem as if the pains are probably nothing, we are comforted to be here. We both nod off and sleep until an alarm shocks us awake. The piercing sound fills the room, and my body floods with adrenaline. Brian's face has taken on an expression of icy anger, a sign that he's afraid. A new nurse comes in and turns off the alarm, then readjusts the band around my belly and fiddles with some buttons. The reassuring pinging starts up again. "Damn machine," she mutters. "It does this." Even after she's gone, my body feels like a struck gong, waves of panic ringing out from me.

Once my pregnancy became obvious, a fellow writer sent me a book she had published, a journal in which expectant mothers could record experiences and expectations. The book sat untouched on my bedside table for weeks. It wasn't just that the journal shocked me with its air of certainty, which it did. And it wasn't that I didn't believe in the reality of the baby, which I admit was still difficult. What kept me from writing in it was that, somewhere along the way, a great silence had settled around me, like a body of water so quiet I didn't dare cause a ripple on its surface.

Instead of writing in that book, I wrote this:

It's as if we have lived for years on a boat and felt safe enough there, accustomed to thinking only of whether we are comfortable or uncomfortable. And then the shadow of the whale appears, a dark shape that moves far beneath us. We realize that our safety, our little world on the boat, has been nothing of our own doing, nothing for which we can take credit. It's simply that the great whale — who is neither malicious nor benevolent, but merely its own enormous, moving self — has not upended us, splintered our boat, and left us floating in the waves amid the debris. No. We are alive in the cold night, naked under the bright, fierce stars.

It is after 4 A.M. now. We lie together on the bed, anxiety having given way to fatigue. The baby is moving, and I place Brian's hand over the hard lump of a knee — or is it an elbow, or a shoulder? — making its liquid way across my belly.

Bernadette announces the arrival of the obstetrician, a short-haired woman about my age who strides in briskly, speeds

through the introductions, and scoops up my chart. It takes me a moment to notice that under her pale blue scrubs she, too, is pregnant, and quite a bit farther along than I am. I sit up and ask, "When are you due?"

"In five days," she answers without looking up, clearly not interested in any pregnant-mother bonding. But I'm fascinated. It's four in the morning, and here she is rushing around, all business. She's a doctor; she knows all that could go wrong.

After a manual exam she determines that I'm showing no signs of true labor. My cervix is high and hard; the baby is moving well and has a strong heartbeat. Maybe the spicy food caused intestinal cramping, she says, which activated the uterus: a false alarm.

Brian and I leave the hospital and drive home. I gaze through the car window into the still-black morning, imagining the shadow of the great whale passing under us and moving away, for now, into the dark ocean.

The next day, after a few hours of sleep, we go to Mass. We're exhausted, but church seems like where we need to be. We sneak in a side door, disheveled and late, and slide into an open pew just as Father Lacey is summoning an older couple, the Fergusons, up to the altar. Everyone in the parish knows the Fergusons. The husband, Michael, once a burly and jovial police officer, has had mouth cancer for years and is missing most of his lower jaw. Through surgery after surgery, he has lost the ability to speak clearly, to smile, and to open his mouth to eat or even accept the Communion wafer. He proceeds up the aisle with his characteristic dignity, and instead of offering him Communion, Father Lacey takes Michael Ferguson by the shoulders, leans toward him until their foreheads are touching, and prays in words no one else can hear.

Michael looks frail, and his wife holds his arm. Their grown daughters and a few grandchildren gather around them and stand there expectantly. Then the priest begins the renewal of their wedding vows. "For better or for worse," we hear him say. "In sickness and in health." It is difficult to name the feeling that arises in me then: like something breaking open inside.

Next there is a thundering clatter as the congregation stands for the Prayers of the Faithful. "For the world," a gray-haired woman at the lectern begins. "For those who are sick or alone. For those suffering because of famine or war, terrorism or poverty." A pause. There are so many ways for the human heart to be broken. "We pray to the Lord."

"Lord," we respond together, "hear our prayer."

After Mass has ended, Brian and I walk to the side altar, with its white statue of Mary. I feel almost as though I've never noticed any of it before: the brilliant red glass of the votive candles; the sweet scent of wax and incense; the skin of Brian's palm, so warm and alive in mine. *Thank you*, I say without speaking.

With his free hand he fishes in his pocket for quarters and drops a few into the brass offering box. The coins land with a bright *clink*. Then I take a thin matchstick, touch it to the burning wick of another candle — someone else's unknown prayer — and light one of our own. ■