

Behind the silence, the urgent need to listen

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Sometimes in medicine, one night on call is unlike the next. Let me tell you about this unexpected lesson.

We were contacted by telephone by an emergency doctor from an isolated hospital with no onsite urology department. A 30-year-old woman attended for a common reason in my practice: back pain and anuria.

Initially, we had limited information: her height was about 1.70 meters, her weight 90 kg. She had significant abdominal distension, but no other details. Blood tests revealed anaemia and severe renal failure. A non-injected CT scan was performed.

The situation felt unusual, though I couldn't immediately explain why. We received the CT images. The screen showed something so large, it exceeded the monitor's frame. At first, we thought it was a technical error.

After a brief period of reflection and collaborative analysis, I recall the silence that ensued as we realized the truth: a massive tumor lesion that had spread across the entire field of my screen. The mass occupied the entire abdominal cavity. The issue was causing pressure on the surrounding organs, including the kidneys. The mass was estimated to be around 60 kg.

When the patient arrived at our facility, I realized the situation was more complex than I had initially thought. When I greeted the patient, I was immediately struck by the stark contrast between her skeletal limbs and her hugely distended abdomen.

Adding to the uniqueness of the situation, the patient had a left duplex kidney, requiring three endoprostheses to divert her urine. Following a multidisciplinary discussion, a team of urologists and

gynecologists performed a laparotomy. The tumor was successfully removed intact. It was a rare ovarian tumor with a favorable prognosis.

During her hospital stay, I asked her why she hadn't sought medical help earlier when her abdomen started to swell. She told me that initially, she had been busy looking after her two children and was afraid of doctors.

As the tumor grew, she became progressively weaker, losing muscle mass until she could no longer move without assistance.

What struck me most was what she told me: "Because I was scared to see a doctor, I got stuck in a vicious circle. The longer I waited, the more I feared what health professionals would think."

She had carried this burden alone for months. She had kept herself hidden away because she was exhausted, both physically and mentally. She was afraid of being judged by others.

Following surgery, she began rebuilding her strength. Without the tumor, her weight had dropped to 30 kg.

In our medical training, we grow accustomed to early interventions and patients seeking help promptly. This experience taught me an unexpected lesson: even in a developed country, extreme cases of neglected symptoms can still occur, rooted in deeply personal fears. Suffering can be silent — both morally and physically — hidden behind a composed exterior, and the human body's capacity for adaptation is astonishing.

This patient allowed me to share her story in the hope that it would encourage others to seek help without fear or shame and make them feel ready to see a doctor. Symptoms should never be ignored, even if they evolve slowly or seem painless.

Some patients can have a significant impact on our careers. This one reminded me that every patient has a unique story to tell. Sometimes, the biggest emergency is hidden behind the calmest exterior, and listening to patients can transform both their treatment and their lives.