

Even at this most critical juncture, there had been no mention to me of "cancer."

The firm would be sympathetic if I had cancer, he said, but "we would have to let you go." My need to keep this job overcame the urge to argue that this was either legally or morally wrong, or, on impulse, to respond against the tip of his nose. Instead, I said I understood.

Physically, I felt much stronger and saner than I had while the tumor was poisoning my brain. But slowly, I was being forced to accept that perhaps there still was something deadly up there.

Powerful, ancient memories returned without being summoned. Over half a lifetime ago, my editor, Frank Hand, had sent me out to a tiny Michigan farming community to cover a 100th birthday. The centenarian cried, unembarrassed, when memories turned to his father, dead for more than 85 years.

Sometimes during my lunchtime walks along the creek, I felt on the verge of tears. It had been that way when my father died, when I was a young man. I'd wanted to cry then, too. I found myself wishing I could be more like the old farmer, but at the bay, passing fishermen with elastic arms from countless casts and rare catches, I hid my eyes and couldn't quite manage to let the tears come.

I consulted an oncologist—a tumor specialist—who said my tumor, now removed, was a glioblastoma multiforme (GBM), the deadliest of tumors. Upon her suggestion, I spoke with a radiation oncologist on the telephone.

"Immediate treatment" was necessary, he stressed.

"Would that save me?" I wondered, doubting the growing number of deadly prognoses.

"No," he answered, candidly.

"How many years can you give me?" I pressed, matching his lack of emotion.

"Years?" He was incredulous.

"Maybe 13 to 20 more weeks."

I said I would think about it. He advised I think quickly. On October 30, two days after notifying my boss that I had begun radiation treatment, I was laid off.

I had an 8:30 a.m. radiation appointment on Halloween. In less than 24 hours, I had reasoned my way to better spirits, probably because I realized that we'd saved enough to pay the mortgage for six months. And there was the insurance. With my death, the debt would be paid.

With my newfound time, I looked forward to working on my long-held short stories and put aside gloomy thoughts. I felt a little giddy; having a brain tumor might provide new and promising direction.

I decided to go to the radiation appointment in costume. In a maestro's long-tail black jacket with shiny lapels, and a tuxedo T-shirt adorned with faux-jewel buttons and a silk-screened tie, I lay awaiting the ray which would briefly attack the tumor site from three directions. Afterward, at a laboratory across the street, a giant pumpkin talked about her children's plans for the evening before drawing blood in preparation for my first round of monthly chemotherapy.

One week later, recalling the radiologist's brutal candor in our first telephone contact, I requested a letter addressing my need for State Disability and Federal Social Security.

The malignancy found in my head, he wrote, presented "a very poor prognosis with a median survival of less than one year under the best of circumstances with the most aggressive treatment." The most recent data, he continued, indicated that my "specific median survival time is 7.5 months [with] a 28 percent one-year survival rate, a 1 percent three-year survival rate, and a 0 percent five-year survival rate." From the above statistics the doctor concluded, "the outlook could qualify as being hopeless."

"Hopeless" was the opposite of the hope to which I clung. I fought for breath; struck harder than the sum of three harsh rays he would direct to the tumor site for seven weeks. I was dying. In their opinions.

Reality struck with pure, cold clarity as I reread his words. Odds were against me seeing my oldest son, Josh, graduate from Skyline High, class of 2005. If my doctors' opinions hold true, I won't see my daughter launch her career as a court reporter or share much longer in my youngest boy's raucously joyful band practices in our living room. At risk is the silver anniversary with the only woman I've been in love with.

I'm a realist. The surgeon, the attending neurological oncologist, and the radiation oncologist share a belief which would soon put me to rest. I cling to the belief that they are wrong.

In February, I completed radiation treatment but chemotherapy continues: One week each month I take the toxic capsules. June marked seven months, more than halfway through the course. If I survive the year, I beat the odds.

But, following nine months of apparent good health, an MRI in late May revealed cancer activity at the surgical site, as had been predicted. On June 14, an oncologist at U.C.S.F. Medical Center recommended a second surgery, followed by an aggressive program of chemo utilizing thalidomide. Perhaps the infamous birth defect culprit of the past could prolong lives.

I will likely undergo this second surgery soon, though I will suggest a zipper across my forehead for simple future opening.

Family, friends, and daily purpose sustain me. I don't jumble or misplace my available words and haven't noticed any significant memory problems. Couldn't the doctors be wrong once more?

The longer I live, the less I consider death. My brain starts fresh each morning, with new thoughts, and I write. After dinner, I wash the dishes, then read or work on the Tom Waits tunes I've transcribed for my banjo. The songs sustain me, but thankfully they're not spontaneous compositions stemming from my brain. Life is good, and I'm hopeful for much more of it. ●

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