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Illness Narrative

There are millions of different illnesses in the world. Each and every person with an illness has a different way of dealing and processing an illness. Though the use of illness narratives, anthropologist can better understand how people and society interact with illnesses. In this paper, I have identified two people of different ages and genders that both have been diagnosed with asthma and I will describe their illness narratives and similarities that they both have in common.

The first narrative is of Al. Al is a male in his late 50’s, early 60’s. Al was diagnosed with asthma at the age of 11, however this wasn’t his first encounter with asthma. His mother was diagnosed with asthma just after Al was born. Before her diagnosis, she has no history of asthma herself or in her family. Al’s mother had had a grueling history with asthma. Al began his interview by describing it, “First off we can start off with my mother, my mother had it, she died from it.” What happened with Al’s mother has influenced how Al interacts with his asthma. This is evident in how he has been cautious with the types of medications, the quantity of each dose, and the frequency in which he uses each medication. This is traced back to the medications that his mother was taking to save her life and how a lot of them were new trial drugs. Some of the trial drugs that Al mother was a “guinea pig” for are current drugs that are on the market that Al is taking today to help combat his symptoms.

When Al started having trouble breathing, shortness of breath, and coughing, Al’s mother knew right away that Al had asthma before she took him to the hospital from her “40 years of medical treatment.” After the trip to the hospital, Al was officially diagnosed with asthma. Since being diagnosed, Al has become acquainted with his asthma. He has noted that at specific times, like when he has a cold and the freezing weather of winter, is when his symptoms are at their worst. Al explains it as, “all the sudden my lungs just shut down.” During the winter, Al covers his mouth with a scarf or jacket to make it easier to breathe, but throughout the year, he mainly uses an inhaler and preventive medicines when his symptoms are especially bad. His inhaler offers Al almost immediate relief to make it easier for him to breathe. Because of its quick effect, Al keeps “One or more inhalers in my pocket, 24 hours a day, 7 days a week, 365 days a year” to help control his asthma in case of an emergency.

Even though inhalers help with Al’s illness, he does acknowledge that they aren’t a cure all for asthma and he believes in the long run, asthma will have a negative effect on his body, “plays with my lungs, damages my lungs.” With that being said, Al has believed that over the last fifteen years, he has gotten his asthma under control the most. He connects this with advancements in the medications used to treat asthma, medications that his mother had tested. With advancements in medications, Al has been to live his life much the same as he would if he didn’t have asthma only with, “carry something in [his] pocket basically.”

The second illness narrative is of Aspen. Aspen is a female in college. She lived a normal life growing up; playing sports, running around, and just acting like any other kid would. This all changed when she reached eighth grade around the age of twelve. While in gym class, Aspen started to experience chest pains and her breathing became labored. She described it as, “Whenever I would laugh or run I would have shortness of breath and it would be really hard to breathe like my throat was closing up.” Because of this new feeling, Aspen immediately went to consult her gym teacher to report what was happening and to see if they could help. This led to her gym teacher discussing it with her parents. Her mother then took Aspen to see her doctor during her annual checkup to try to find an explanation to what was going on. When Aspen explained her symptoms to her doctor, the doctor pretty quickly came up with the conclusion that what Aspen was feeling was symptoms of asthma. To solidify his deduction, the doctor required Aspen to “run around a track a bunch and then breath into a tube” in a series of tests to examine Aspen’s breathing capabilities. When the doctor gave Aspen her diagnosis, it came as somewhat of a surprise to her and her parents. Aspen had a feeling that it might have been asthma based off of her symptoms, however asthma is not heredity in her family and she did sports growing up. She still doesn’t quite know what caused her asthma, but she has come to term with having it for the rest of her life.

After being diagnosed, Aspen continued to have the same symptoms as before she was diagnosed with asthma. Running, smoke, and cold air caused her asthma to flare up and makes it hard to breathe. To combat the symptoms, Aspen uses an inhaler that she always has on her. She will use her inhaler “whenever it is really cold outside … before I exercise … or if it just gets hard to breathe for whatever reason.” Even though the doctor prescribed inhaler does help her asthma, Aspen believes that her asthma has “gotten a little bit worst.” Over the years, the cold air has made it harder for her to breath to the point where she cannot take in any air and will start choking. Aspen has contributed her worsening condition to bad luck, “I have heard that sometimes when you get older it tends to get worst or it reverts itself either way. I was unlucky.” She believes that if she doesn’t use her inhaler during an asthma attack she could possibly pass out due to lack of oxygen to her brain.

 Luckily, this has not happened to Aspen yet. However, she does have to deal with the way that the public looks upon her when her. Aspen has dealt with people’s realizations in different ways. Some people have been surprised, “Wow you have asthma. I didn’t know that,” but she explains that the common response that she gets is when she uses her inhaler, “most times people don’t really care, unless it is the loud noise of the ‘shhhhh’, then people turn around, but people don’t say anything.” While people’s reactions to her asthma doesn’t affect her too much, what Aspen is not capable to do because of her asthma is more impactful. When asked how life would be without asthmas, Aspen says, “I could wear a lot of perfume, I could smoke ([but] don’t want to smoke), I don’t have to be cautious outside, I could just run outside, and I don’t have to worry if I get the flu or a cold that I would get sick. “

 When comparing the illness narratives of Al and Aspen, there some similar patterns that arose. Firstly, were the first symptoms that they both felt during their first encounter with asthma. They both described it in some relation to trouble breathing, shortness of breath, and chest pains. These common symptoms were the first realizations for both Al and Aspen that something was wrong with their health. This led them to the conclusion that they had asthma. The symptoms that they experienced when were first diagnosed has also continued throughout their lives. What causes their symptoms to flare up is also very similar. They both give credit to exercise and cold weather. These both effect the lungs which, according to Al, is the main effect of asthma, “[it] plays with my lungs, damages my lungs.”

Another similarity that they both had in common was how they believed that got the asthma. Aspen said that she just one day had problems and ended up having asthma. While Al wasn’t the first person in his family to have asthma, the first person, his mother was in a similar situation as Aspen, just one day she started having symptoms. Al would then contract asthma around the same age as Aspen. The age that both patients were diagnosed with asthma are both very similar. Just a year part. This could have to do with changes in their bodies, perhaps puberty because of the time in their life. While Al’s mother did not develop asthma until later in her life, she had a similar experience as Al and Aspen when her first symptoms started. The hormonal changes in her body that happened when she was pregnant with Al and the changes that it caused in her body could also account for her newly developed asthma.

One difference in these two narratives is the treatment paths that both patients took. From the beginning her diagnosis, Aspen has been using only one type of medication, an inhaler. She has found that this is a very efficient way of controlling her asthma and the symptoms. Al on the other hand, has had a very different history with medication. He has tried many different kinds and combinations of medications to try and find the best ones for him. Al also explained the history that his mother also faced with her medications. She had a long road of figuring out medications and this shows in how Al uses and tries different medications. It is the experience he has gained from his mother and also his older age that Aspen has not experienced yet that has caused Al to have a longer track record with treatment options. This is also attributed to advancements in the medications that are used to treat asthma. New medications have been able to increase the safeness of the drug to treat the symptoms while reducing the risk. Both Al and Aspen believe that this is the best time that they have had their illness under control much due to their preventative medications.

Both Al and Aspen also believed that asthmas does not hinder their life in any substantial way that their lives would be any different if they did have asthma. Al credits this to just having to carry an inhaler and Aspen’s asthma causes her to be more cautious in her environment. Overall, asthma does not decrease their quality of life and they are able to live regular lives with their illness.

The illness narratives of Al and Aspen has allowed a personal view in how two people are able to interact and cope with their illness. By creating illnesses narratives, anthropologists are able to identify qualities that an illness has and how people and society experience their illness to try and find new and productive solutions to these illnesses.