28 September, 2024.

To the recipient of the marrow within my hip bones,

I don't know your name.
I was told that your identity must be kept a secret from me. Apparently, there are good reasons for doing so. Keeping your identity a secret means that I can't know your name, where you're from, or even, your age.

You could be reading this from anywhere in the world – Scotland, Sabah, Swaziland, Seoul, etc.
Yet, in a few months time, one litre of bone marrow will be drawn out of my hip bones, and injected into your bloodstream.

I didn't know that there can be so much bone marrow in a person's bones. Nor did I know that bone marrow is a liquid. I always thought it was solid, hiding beneath the white of a bone. Well, it seemed that way when I saw the broken pieces of chicken bones in my mother's soup. Maybe because it had been cooked, but I digress.

I guess it hasn't fully hit me that I will be going for the surgery. I can only imagine lying flat on my belly, with two sharp instruments drilling deep into my hip bones, like oil wells, extracting and pumping out the marrow from within. Hopefully, I'll be fully knocked out then. But why should I feel scared? People go for surgery everyday, and for worse things. Besides, friends have told me that donating bone marrow to a stranger is one of the most meaningful and noble things someone could do.

Although, I must confess, I don't feel righteous, or any warm, fuzzy feelings when thinking about donating my marrow to you. I'm sorry. I don't know what to feel. To give a piece of your body to another person, and to not know anything about them – that feels strange. To give a piece of your body to another, and not your story? That feels incomplete. Maybe that's why bone marrow donation coordinators encourage donors to write letters to their recipients. I've never written a letter to someone I don't know. I don't even know what you look like. I only know of your medical condition.

Last week, I met the bone marrow donation coordinator for the first time. I could have met her online on Zoom, but I insisted on meeting her in person.

"Are you sure? Most potential donors prefer to meet us online. It saves them time," she said over the phone, two days before our physical meeting. I explained that if you got a text message asking for your bone marrow, it would make more sense to meet the ones handling the matter – face to face. Anyway, I didn't have to go to work that day.

The office is located in a small town, my hometown. I hardly visit it now. Getting there takes 45 minutes by train, but the taxi ride only took 20. It also cost 30 dollars – which is the usual price of a Korean barbecue buffet meal where I'm residing now (which may or may not be Korea).
When I reached, I rang the bell and squinted through the glass front door. The coordinator appeared almost instantaneously. She looked more energetic than me.

“Thanks for coming in person,” she chirped.

“I’m so sorry for being late. I ended work at 11.30PM last night.”

“No kidding! You must be an accountant or something.”

“No, I work as a-”

“-Anyway, really glad you’re here, take a seat, we’ve got much to talk about. How’re you feeling?”

It was the first time someone asked me that question this week. It was already Friday.

A weak chuckle escaped my mouth. “I actually feel really drained from work. I didn’t sleep well last night,” I replied. “Again, sorry for coming so late. I woke up late, and I tried to rush here in a taxi but I’m still 20 minutes late-”

“Right, I forgot to mention; we’ll reimburse you for the taxi fare at the end of the month. Just send me the receipt.”

“I beg your pardon?”

“As a potential donor, you can claim your taxi ride to today’s meeting and also a ride to your next location afterwards.” A free taxi ride? Maybe I could have Korean barbecue later on. I found myself grinning, about to thank the coordinator with expressions of gratitude that I usually reserve for unexpected gifts. However, I stopped myself. Nothing ever comes free. “Thank you”, I mumbled politely.

Back to business.

I was led into a meeting room. From an open laptop, the coordinator pulled up a slideshow, angling it such that both of us could view it despite sitting two seats apart. For 10 minutes, the coordinator gave a usual corporate introduction. She sounded like one of those lecturers back in college who read off their slides. I wondered how many donors she had performed this presentation for, and if I was number 97, or something. My mind wandered to a TED Talk I had seen years back about the mistakes to avoid when giving a slideshow presentation.

Yes, she was definitely reading from the slides.

My mind quickly snapped back to the meeting room when I heard her say, “Your bone marrow recipient is a male child below 21 years old, with a rare disease.” The name of the disease was long, multisyllabic, alien to the ear. I can’t recall the full name, but its acronym stuck – four letters of the alphabet that I never knew could be meaningfully placed together. Despite working in a hospital for 2 years, I’ve never heard of this disease.

Somehow, all my tiredness from this morning seemed to fade away. I could hear the coordinator clearly now. She sounded like she was talking about something that really mattered to her – to me.

To you.

I should probably give her a name - Lina. (Lina has probably read every line of this letter. She needs to ensure that I don't reveal any information about myself, like where I live or what my name is.) Lina stopped referring to her slides. She now held in her hands a case note, stamped with the logo of the bone marrow donation office. I recognised the name of the disease printed in a bold font – its name, not its acronym. Of course, there was no information about you apart from you being a child below 21 years old". I'm sure the note had a serial number to anonymise you but I don't recall seeing it.

"Do you remember doing a cheek swab 10 years ago?"

I nodded, remembering how messy my haircut was 10 years ago.

"Based on the genetic information from those cheek cells, we found that you were the most suitable donor for the recipient."

I realised how little I recalled from biology class about genetics. I always found lectures on bones and muscles way more interesting.

Lina continued, neither looking at the laptop nor the case note in her hands, "Do you know what the immune system is?"

"Kinda? Um… not really. Wait, hang on, don't tell me. I think I've got this." She smiled and held back her next sentence. "OK," I continued, "from what I know, the immune system does things like fight infections."

"Excellent!" she said, without sounding patronising. "Do you know where it's located?"

"Right, OK, so the respiratory system is the lungs and diaphragm… the circulatory system is obviously the heart and blood vessels and red blood cells… and the digestive system is, well, everyone knows what that is. The immune system… um…" I trailed off. Lina continued smiling, waiting for me to find my words. She now seemed a lot less hurried than when we first met.

"Ah! That's the lymph nodes and vessels, right?" I felt satisfied with my reply, recalling the numerous anatomy diagrams I'd seen in textbooks. The lymph nodes were always a pale green, in contrast with the bright red arteries and dark blue veins.

"Exactly, but there's one more piece of the puzzle. Earlier, you mentioned red blood cells. Have you heard of white blood cells?"

At that moment, I really wished Lina would not find out that I worked in healthcare. “Oh right! Yeah! How could I forget?” I chuckled awkwardly. I vaguely recalled the names of several white blood cells I learned in school but I forgot what they did exactly. T-cells, B-cells… phago…phagocytes? Millions of tiny, intelligent helpers and soldiers running about in the body of a registered nurse who, up till that point, had completely forgotten about their existence.

“Basically,” Lina continued, “the white blood cells in your recipient’s body, well, they’ve gone rogue. Instead of fighting infections, they’re fighting their own friends.”

“Friends?”

“The other cells in your recipient’s body, and this affects his daily life.”

“My recipient–”

“–I’m sorry. *The* recipient. The choice to donate is ultimately up to you, sir.”

“No, no, that’s not what I meant to ask. You cut me off midway–”

“–Sorry, I have a bad habit of interrupting people when I get excited. I studied immunology in university, so I get really carried away sometimes. Please, carry on.”

“Oh, no worries. Anyways, I wanted to ask, my recipient, how old is he?”

“I’m really sorry sir. Confidentiality is to be maintained, even regarding the recipient’s age. In fact, I know as much – or as little – as you do.”

“Oh, right. I forgot.”

“Do you have any other questions?”

“You mentioned that this disease affects his daily life?”

She pondered for a while. I could see that distant gaze return to her eyes, the same gaze she had when she embodied the “immunologist” persona just a second ago.

“What we do know is that, because his white blood cells are attacking his own body, this causes many problems, especially in his lungs and intestines.”

“So he has difficulty breathing, eating and passing motion.” I said, donning my “nurse” uniform.

“Exactly! In fact, the recipient probably has tons of dietary restrictions – from what I’ve googled.” It was comforting to know that Lina also relied on Google.

I sighed. “Must be rough for the kid.”

“Yeah, his parents would be facing many issues as well. I mean, with a disease like that, it’s likely for the child to be hospitalised for weeks on end.”

Do you spend more time at home, at school, or the hospital?

My mind’s eye conjured the hospital ward I work in. “How long does he have to live?” I blurted out, not quite sure of what to ask next. I’ve never asked anyone that question before.

“I… I don’t know. It’s hard to say. There’s no mention of life expectancy in his case note.”

I stared at the case note, still in her hand, unable to register any words on that sheet of paper now.

“It hasn’t happened yet,” Lina continued. “But, if he gets infected by a certain kind of virus, his white blood cells will overreact like never before and put out every organ in his body.” Her gaze shifted to the table, her smile fading.

This was no longer just “Immunology”, a chapter in a textbook. This was a human life.

“So, what would I have to donate?” I asked, trying to remain respectful, but objective.

“Your stem cells. Baby versions of your white blood cells.” Surprisingly, I found her layman’s explanation more comforting than condescending.

“We’ll take your stem cells, inject them into the recipient’s bloodstream. Hopefully, they’ll mature into proper white blood cells, ones that won’t attack his body anymore.” I felt the tiredness from this morning creeping back in. “So, when do I donate my stem cells? Just let me know the date and I’ll put it in my calendar.”

“We’ll begin finding a date after you’ve given a written consent. And, of course, we’ll have to do a few blood tests before the surgery–”

“–surgery? Isn’t bone marrow just extracted using a blood transfusion or something?”

“Oh, you mean the apheresis machine? In most cases, yes, it can be used to selectively extract stem cells from the bloodstream.” Most cases?

Earlier on, I googled “bone marrow donation” in the taxi. There were many photos of donors sitting in chairs, blood flowing from arms, passing through a line, and draining into a machine next to them. Most were smiling at the camera.

“So, will I be using that machine?” I said, hopefully. Lina went silent. Clearly, she had foreseen that this part of today’s meeting would need to be handled delicately. “In your case,” she finally replied, “the recipient's medical team is requesting a less common method of extraction: a surgical procedure called a bone marrow harvest."

A bone marrow harvest. This was the first time a heard the word "harvest" used in a context other than farming. I tried to see how surgery would fit into the picture.

"Wait, so if they want to extract my stem cells, and they're not going to use a blood transfusion–"

"–apheresis."

"–apheresis machine. If they're not using an apheresis machine, where are they going to extract my cells from?"

"Your bone marrow."

Right, "bone marrow harvest", bone marrow donation clinic.

"Where's the bone marrow?"

Lina broke into a smile, "Going back to the immune system…"

Oh boy.

"... most white blood cells are formed from stem cells, which are made by the bone marrow and only some types of bones have marrow in them. However, the bones with the largest concentration of marrow are our hip bones."

"The ones behind the gluteus maximus?" I asked, trying to sound professional.

"Yes, the buttocks."

"Why can't they just use that apheretic machine to extract my stem cells from my blood?"

"The *apheresis* machine won't be able to filter out a certain kind of white blood cell from your blood, the T-cells."
"But aren't my white blood cells working fine?"

"They are, but since they're fully mature, your recipient's immune system might overreact to them. It's what we call graft-versus-host disease."

As she was explaining the details of the procedure, how my stem cells would be extracted, and the details of "graft-versus-host disease", I thought of alluding to the quote about one man's meat being another man's poison. But this was a bad time for witty banter.

"Even if he receives my stem cells?"

"Yes, because he is really young."

My eyes wandered to the windows across the meeting room. Outside was a busy street with office workers streaming across for lunch.

"So you're saying that hip bone surgery is the only way for them to extract my stem cells?"

"Yes sir. Your hip bones contain marrow with your stem cells in their purest form – no fully-formed white blood cells."

"How do they usually extract it?"

"A needle, sir."

I tried guessing how long – and how thick – a needle would have to be to reach the marrow inside the hip bones of a grown adult. The only needles I've seen were the ones used to collect blood from veins, but those were tiny.

Years back in nursing school, I almost got a chance to observe a surgery in the operating theatre, but it was cancelled when the pandemic happened.

"Would you like me to show you what the needle looks like?" Lina offered earnestly, turning towards her laptop. "No thank you," I replied quickly, looking away from the screen.

"Sir, I should let you know that all of our donors who have gone for this procedure were able to return to their usual life upon discharge from the hospital. Most had a slight pain in their upper buttocks, but it went away within a week. And of course, all expenses will be paid for by us."

"Well, it does seem like a relatively simple procedure," I said, "The patients in my ward usually go for far more complicated surgeries, like removing gallbladders, cataracts, prostates – that kinda thing." Lina stared blankly at me for a few seconds, probably recalling how I had nearly failed her little immunology test earlier on.

"You're not a doctor, are you?" she asked.

"No, no. I'm a nurse," I said, feeling somewhat regretful for showing my cards so soon.

"Perfect," she said, without betraying any judgement in her eyes. "Then you should be familiar with the whole process of–"

"–yeah, consenting, pre-surgery checkups, anaesthesia appointments – all that stuff. Sorry, you were saying?" It was my turn to interrupt her.

"That was pretty much it. After all, this is a minor procedure."

"Of course."

"At this point, do you have any questions for me?" Lina asked for the second time during our meeting.

"Not that I can think of," I said, glancing at the door of the meeting room.

"OK. If you have any more questions about the procedure, or the recipient's disease, your surgeon will be more qualified to answer them. That is, of course, if you're willing to proceed with the surgery at this point."

Proceed. I heard that word all the time at work. One of the senior nurses would holler "Proceed!" whenever someone seeked – and gained – her approval to do something which required her acknowledgment.

My attention seemed to wander between random thoughts and the meeting room Lina and I were in.

"Sure, I don't see any reason to not go ahead. Do I sign the consent form now?"

"Oh! Thank you so much for your kindness, sir!" Lina exclaimed. "Yes, there is a form to be filled, but that isn't the final consent form for your surgery."

Out of a crisp envelope, she took several sheets of paper that had been stapled together and placed them next to your case note on the table.

"Our office will use this form to apply for your surgery, and all the required checkups," Lina explained, deftly leafing through each sheet of paper with one hand.

"Before I sign this, I do have one question." Lina looked up, having only checked the first few pages of what seemed like a deceptively long questionnaire. "Earlier you said I would have to take some blood tests," I continued.
"That's right. These are the standard tests for the bone marrow harvest."

"Does that include a blood cholesterol test?"

She gave me an inquisitive look. "Let me check." she said, filing through another stack of papers. "Unfortunately not. Serum cholesterol is not one of the pre-surgery tests."

"Could you make an exception? I'll pay for the test."

Lina bit her lip and furrowed her brows. "I'm really sorry, sir, but our office usually does not apply for blood tests that are non-essential to the surgery. I hope you can understand."

"No worries at all, ma'am. I'll still sign the form," I assured her. Lina returned to the form, leafing through the papers from the first page again. "Just out of curiosity," she asked quietly, "what is the reason for your request? You seem like quite a fit, young person."

"Oh, nothing. My mum's just been asking me to get my cholesterol checked."

"I see. That's nice of her."

She began to take me through a long long form. It had many questions.
Have you ever self-injected non-prescription drugs, including body-building drugs, or recreational drugs?
"No"

Where else could I get my cholesterol checked?

Have you ever had cancer?
"No."

I definitely could not get it checked at my own ward. That would be unprofessional.

Coronary heart disease?
"No."

What about the clinic two streets from my apartment?

Chronic Obstructive Pulmonary disease?
"No."

But it's not on the way to work. So, maybe not.

Diabetes?
"No."
Maybe my hospital has a clinic for its own staff.

Are you carrying, or might you be carrying the Hepatitis B or C virus?
"No."

Yes, I recall my colleague mentioning that he had gone for a medical checkup before coming in for his shift one day.

Have you had any severe allergy to anaesthesia before?
"No."

When I left the bone marrow donation office, some rain clouds were gathering in the distance. At this point, I was really hungry too. So, I bought two sandwiches from a cafe down the street. I didn't have anything planned that day. I considered Lina's offer of a free taxi ride anywhere. Oh, right, the Korean barbecue! However, it was too late. I was already halfway through the second sandwich. I decided to take a taxi to my grandmother's place. After all, I hadn't seen her in months and her house had a piano – which she does not play.

The rest of the day went by fast. I couldn't claim another taxi ride, so I took the train home. Thankfully, I managed to find a seat. It was a long ride home, too. I took out the envelope Lina gave me. "To my recipient," it read in large, cursive font. I took out the pen from my right pocket, stared at the rain through the window, and began to write this letter.

Thank you for reading.

Rest well,
Your donor.

Contribution: Editor
Though I do not have much experience editing yet, there are still some things that I tried to take into consideration: Not forgoing the author's style and voice, the characters they created and their personalities. I believe that as an editor, it is essential to highlight and complement the author's writing, not to create something totally new in my own style (which can be a challenge as a writer myself)

Description: This manuscript is a work in progress that I am developing with my friend about the experiences of organ donors and the emotions they experience. Many times, we hear about what it's like for the recipient themselves and how wonderful it is to be given a second chance at life. But what about the (living) donor, the sacrifices they make and the conflicting emotions they experience? What is that like?
Although we have only worked on the first chapter and it is currently centered around one character so far, I envision developing this novel into a collection of short stories, memoirs and letters based on the experiences of donors that sacrifice their own bodies for the sake of others.