Practical Radiation Oncology® (2026) 000, e1−e2

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Narrative Oncology

The Daughter and Physician in the Room

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Received 23 July 2026; accepted 14 September 2026

I hung up the phone.

"I love him more than anything."

Her words repeated in my mind.

I loved him more than anything. Painful memories, deeply buried, began to resurface. An indescribable pain as I held my father's hand while he took his final breaths. An emptiness I cannot bear to experience again.

My heart was breaking. This time, for my patient's daughter. At first, we spoke physician to physician—discussing recent scans, labs, and hospitalizations. As professionals, we knew there were no more options. As loved ones, we wanted to leave no stone unturned in search of that one overlooked miracle. How quickly desperation overcomes rationality. The desperation to fight, as a child, spouse, or parent, no matter what. The pressure you feel to provide hope, even if false.

A long pause as she cried, and I tried not to. Our conversation shifted to discussing an identity we now shared: two daughters navigating the loss of their fathers to cholangiocarcinoma, a bile duct cancer increasing in incidence, with a 5-year survival rate of 20%.[1]

"Any advice?" she asked.

My mind went blank as I processed the uncanny feeling that I was about to speak to my younger self. I didn't know what to say to either of us.

My father died the week before I entered medical school. His funeral, the morning of my White Coat Ceremony. I am now in my early career as a radiation oncologist, and I still have trouble talking about it, even thinking about it. I feel an urge to seal off that part of my life, to protect myself with the white-coated armor of professionalism. But I also worry about becoming hardened in the years to come. Allowing human connection to slip away. Becoming unfazed by loss. "It's part of the job." "You can't help everyone." Buried beneath patient cases, never-ending emails, workplace drama. Loss of empathy leading to burnout. Or is it the reverse?

I remind myself: someone loves this patient "more than anything." They are someone's parent, spouse, or child. They are someone's everything. Remembering that truth allows me to hold space for outside-the-box patient requests, exploration of alternatives, and repeated messages. I see that what we often label as "difficult" is simply the desperation of love. I was once here, too.

For me, that reminder takes physical form at the annual Cholangiocarcinoma Foundation Conference. A weekend when patients, caregivers, scientists, and physicians gather, pause their individual lives, and sit together at banquet hall tables. Not separated by hospital beds and exam tables or by the boundary between patient and provider but bonded by a common goal: to do better, to improve outcomes, and pave a path forward as one. At the most recent meeting, I heard touching patient testimonials one after another, caregivers asking difficult questions while fiercely advocating for their loved ones, and loud applause as promising new treatments were shared. One caregiver's honest reflection reminded me of what it was like to "live in the in-between": to exist in a space of unpredictability, hope, and trepidation. A space shared by many caregivers, by my patient's daughter, and by myself.

On the phone, my patient's daughter was still waiting for my answer. After another long pause, I shared what I wish someone had told me 11 years ago: Nothing can prepare you for the heartache. It never goes away. But grief changes shape, meaning emerges from loss, and with time, joyful memories may begin to eclipse the painful

Presentation: This essay has not been previously presented.

Sources of support: This work had no specific funding.

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https://doi.org/10.1016/j.prro.2026.09.007

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ones. Truth be told, I still struggle to find balance. To identify the thin line separating cognitive empathy and emotional contagion.[2] To avoid reliving the painful loss of my father through my patients while remaining open to connecting with them, to feeling alongside them. As the years pass, I want to remember patients not by their scans but by the lives they lived before fate brought them to me, a radiation oncologist.

We live busy lives, constantly, in motion with scarce moments to breathe or reflect. But I could not shake this conversation. Her words, "I love him more than anything," played on an endless loop in my mind, crescendoing in moments of stillness. So, I did something I rarely do. I wrote down how I felt. An unfiltered outpouring onto paper that, in turn, allowed me to organize my thoughts, bandage old wounds, and experience a catharsis of emotions suppressed for so long.

Looking back, I am proud of where I am today: healed, and still healing, from a loss too profound for words. Over a decade ago, I was a newly minted medical student visiting my father's grave every Wednesday, crying beside his tombstone and mourning his absence; the thought of a happy life was inconceivable. A few weeks ago, I got married: an occasion many little girls dream of, walking arm in arm with their father down the aisle. Although I could not have this moment, I found myself able to celebrate not with grief but with remembrance and joy. And perhaps that is what time has taught me: our losses remain with us, but somehow, we learn to carry them differently.

It has been 11 years since my father passed. His photo is on my desk. His hospital ID badge is in my wallet. Reminders of why I am here. To help me remember what it means to be the physician caring for a patient with cancer, as the daughter of one.

Disclosures

None.

Declaration of AI and AI-Assisted Technologies in the Writing Process

During the preparation of this work the author used ChatGPT in order to proofread. After using this tool, the author reviewed and edited the content as needed and takes full responsibility for the content of the publication.

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