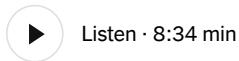


Maybe It's a Bad Idea to Fall in Love When You're Facing Death

At 61, divorced and living with Stage 4 lung cancer, a writer chooses deep fondness instead.



By **Annabelle Gurwitch**

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Who would date a person with a poor prognosis? Maybe someone with commitment issues? And that would be perfect for me, because I'd lost the capacity to fall in love.

A Stage 4 lung cancer diagnosis at the height of Covid coincided with the dissolution of my 20-year marriage. The news landed like a sucker punch, upending my equilibrium. Though I was asymptomatic, I was soon holding onto walls, uncertain of my ability to walk; speaking slowly, like a record player spinning at the wrong speed; and getting lost going to the grocery store where I'd been a customer for 25 years.

I began a targeted therapy, and it took my doctors and I six months to manage a grab bag of side effects. I had moments of fleeting invincibility, only to be felled by immobilizing fatigue, but with enough caffeine coursing through my system, my cheeks were rosy and my constitution energetic.

We celebrated my cancer anniversary with the best news possible: The disease was being held stable.

This was a temporary reprieve. Lung cancer is as wily as a toddler figuring out ways around any containment. Eventually, I'd need to move onto a treatment with greater toxicity, timeline unknown.

My appearance was unchanged, but I was now someone juggling the daily responsibilities of lifelong treatment. I veered between a stultifying numbness and a desire to carpe every diem. Wasn't that the lesson imparted by those hovering at death's door? Suck the joy from every moment before shuffling off this mortal coil?

I flirted with having one final fling, but entering into a situationship at this age raised the question: What was I looking for if I wasn't starting a family or anticipating a lengthy future?

Along with who I might want to share my life with, I would now have to think about who I might want to share my death with. Besides, intimacy required vulnerability and a brittleness had displaced my inner sturdiness. I entertained the idea of being in it just for the sex, but could I do that at 61?

Maybe the ideal companion was someone who also had cancer. Googling "cancer dating" produced a website that matched cancer folks by location. There were 890 in my ZIP code, which was promising for me but sounded like a cluster that warranted further investigation by the National Institutes of Health.

I spent 20 minutes perusing profiles before I realized the site was for Cancers, the astrological sign.

Then, "real life" intervened.

I'd known Jeremy as the father of twins one class below my kid, when they'd attended the same school almost two decades ago. I'd noticed his rakish good looks and a British lilt with a trace of New Zealand twang. There might have been a spark, but I chalked it up to my weakness for accents.

Anyway, he and I were each married back then.

We'd been regular attendees at a charity fund-raiser over the years, and in the fall of 2021, we found ourselves at the organization's first event post-Covid. He had recently separated from his wife, moved nearby and frequented the same trails as me.

"How about a hike?" he said.

We began meeting several times a week. We talked about our shared love of travel and nature. I was wildly attracted to him, but, by then, I'd shelved any idea of involvement. Besides, I wasn't certain if he wanted to get into my bed or into my regular hiking calendar.

"You brought your dog with you," I said when he showed up with his terrier mix.

"I thought it was important," he said, though I couldn't fathom why it would be.

When he insisted on accompanying me to the market after a walk and said, "I don't want this to end," I thought: Here's a guy who needs a friend.

After a month, one of us floated the idea of dinner. We both liked oysters, which sounds obvious and clichéd, but it had come up naturally in a discussion about fishing in New Zealand.

Over ceviche, he confessed to glancing longingly at my "bum" when I bent down to do some stretching on the hiking path.

"So, this is a date?" I asked.

"This is a date," he confirmed.

"You understand that I'm in treatment and will always be in treatment, and this is still a date?"

"Yes," he said.

I threw my body against his, kissed him and sent him home after dinner.

We made another date, and another, and then one that fell on the evening of my regular three-month CT scan and bloodwork, the standard protocol for monitoring metastatic lung cancer. I was racked with "scanxiety." Even a small amount of disease progression could spell the end of my tenure on the targeted therapy.

I was happy to drift through the fog of romance for as long as possible and to proceed on a "need-to-know" basis. I didn't need to know about the ins and outs of his recent separation, and though I'd been upfront about my prognosis, he didn't need to know about the details of the close monitoring. I didn't mention the appointment until I invited him over for a celebratory drink after spending a few hours waiting for the results.

Six months into our situationship, he floated the possibility of lasting love. The comment introduced the specter of the future, a subject I'd deferred. I'd assumed that his recent separation was a limitation that I was uniquely open to accepting, and I'd lucked into finding someone with commitment issues.

I laughed it off. Not long after that, he introduced an even more unnerving prospect: "I might be falling in love with you," he said.

"And, I am deeply, deeply fond of you," I answered.

We were in a romance, but love wasn't my plan. I'd been looking for a liaison dangereuse.

Platonic love was a language in which I was still fluent. I had a wide circle of friends, family, patient support groups and a cadre of young people whom I mentor. I have an adult son whom I text pictures of our beloved cats way too often.

I'd come of age during the 1980s, in the downtown theater scene; falling in and out of love had practically been another vocation. That roller coaster had once provided a reliable dopamine rush. And by the end of my marriage, resentments had been braided into my experience of romantic love. Kindness had given way to contempt. I could afford occasional ecstasy, but that ride could derail my wobbly inner reserves.

Jeremy was just British enough to have a practiced stoicism, and he greeted this deflection with gracious bemusement.

We have been walking together for four years.

In 2024, we returned from an adventure overseas, and he took up residence in my home. He is still an incurable romantic, and I am still exploring the opportunity I inadvertently invented by falling "deeply, deeply fond."

Romantic love is a burden, weighted with calcified associations of past mistakes and misread cues. Deep fondness has freshness — a bearable lightness. It awakens my curiosity, allowing me to listen more closely and be more attentive to the marvelous precarity of human connection.

Still, the boundaries of my "need-to-know" paradigm have become more porous.

One night, I awoke to extreme leg cramping, another side effect of cancer treatment. I rolled out of bed, howling on the floor, legs extended in the air, and Jeremy rushed to my aid.

As he massaged my calves, something in my belly relaxed. My medication exacerbated a natural tendency toward gassiness — one of those “need-to-knows” that I’d kept quiet — and three years of flatulence unleashed the loudest, longest whoopee cushion cacophony.

We are still laughing about this.

I still prefer going to my appointments solo. On the two occasions that Jeremy accompanied me, I adopted a performative wellness that didn’t serve me well; however, my doctor’s appointments are penciled in on the kitchen calendar.

My carefully cultivated lifestyle, seemingly unaffected by cancer, will one day crumble — and then what? No one knows. No one can know. We’re an unlikely throuple: Jeremy, me and my side piece, existential dread.

While navigating this alien landscape, I wondered whether I would recognize love if it came my way. That question has been answered: The most astonishing part of my joy comes from walking alongside someone who can accept falling deeply, incurably “in fond.”

Annabelle Gurwitch is the author of six memoirs, including her most recent: “The End of My Life is Killing Me: The Unexpected Joys of a Cancer Slacker” (Zibby Publishing). She is currently traveling the globe on The Comedy and Cancer Center Unexpected Joys Book Tour.