The Silent Regime

Part 1: The Symptoms of a "New Normal"

My name is Min. I'm 23. I used to be a third-year medical student, top of my class, memorizing anatomy and pathology. I was trained to look for facts, for evidence, for the story the body tells. But when the dictatorship collapsed, my medical school closed its doors indefinitely.

On paper, I was a survivor of a historic shift. I traded my stethoscope for a pen, documenting the aftermath of the regime and the fragility of our new freedom. I was "resilient."

But six months after the schools closed, my own body became a territory I couldn't govern . It started with a pressure behind my eyes that made the words on my laptop blur. A rhythmic pounding in my ears kept time with my typing. I felt a tightness in my chest that I assumed was just the weight of history, the grief of a stolen career.

I knew, with the clinical instinct I had developed in labs, that something physiological was wrong .

So I went to the clinics that were still open. I spoke the language of the doctors. I described the symptoms with precise medical terminology.

I was met with sympathetic dismissal . They looked at a young man who had lost his future to political chaos and saw only trauma. "It is the stress of the revolution," they told me. "You are grieving your studies. It is psychosomatic." .

The message was clear: A young, thin man doesn't have heart disease; he has "Post-Dictatorship Anxiety." .

When mentors you respect tell you it's in your head, you stop trusting your own training . I began to believe my blood pressure was just a manifestation of my sorrow. I wrote about

the pain as a metaphor for the country's tension, ignoring that it was a literal, physical threat.

Part 2: The Emergency And the Clinical Reality

The breaking point wasn't a protest or a riot. It was a quiet evening at my desk, trying to edit an essay about the closed universities .

My body finally screamed too loud to be silenced by a metaphor . The headache turned into a blinding flash. My vision tunneled. I tried to stand, and my legs gave way. I wasn't anxious; I was crashing.

I was taken to the very hospital where I used to study. This time, I wasn't a student on rounds; I was the patient in the triage bay.

The sphygmomanometer cuff tightened. The nurse's eyes went wide. The reading was undeniable: 220 over 140 .

It wasn't stress. It was severe, life-threatening hypertension. My kidneys were straining under the pressure. I was in a hypertensive emergency.

One of my former professors treated me. He told me something that rewrote my understanding of medicine: *If you had treated this as "anxiety" for another week, you would have stroked out before you ever got to re-enroll in school.* .

Part 3: Why Knowledge Isn't Enough

The diagnosis brought a furious clarity . The symptoms I was told to rationalize as "trauma" were actually a physiological crisis . The signs had been there, clear as textbook diagrams, but they were ignored because my context, the war, the stress, my age blinded the experts.

That realization stayed with me. If this could happen to me someone trained to diagnose, someone who writes about truth, it can happen to anyone .

I'm sharing this story because I learned a brutal lesson: You are the primary narrator of your own body . My medical background didn't protect me from bias.

And that matters because medicine often looks at the context (the dictatorship, the stress) and ignores the patient . It attributes physical screams to psychological whispers.

If you are being told your pain is just "stress" or "grief," if you feel your symptoms are being dismissed as a reaction to your environment, I need you to hear this: You are not imagining it .

Your instincts are valid . High blood pressure doesn't care about politics or your age. It is a signal. A signal worth listening to .

Trust your gut, even when the authorities, medical or otherwise, doubt it . Seek another opinion when the diagnosis feels like a dismissal . Never accept "it's just stress" as a substitute for investigation .