

## **THE ADVENTURES OF A HEART TRIPLE BY-PASS OPERATION**

As we endeavor to help others going through similar experiences, we welcome any feedback. If you find this helpful and beneficial, we would appreciate a donation to assist in the ongoing costs.

Mail donations to: L & R Marshall, P.O. Box 7453, Wellington South, New Zealand.

### **INTRODUCTION:**

#### **August 1996 WAKEFIELD HOSPITAL (Wellington New Zealand)**

At the time of printing, ten days after the first incision was made in my chest on 7/8/96, this operation has been an outstanding success. None of the predicted possibilities of down days, nightmares nor bouts of depression have occurred to me. Healing has been fast and problem free. It may be that we, the hospital staff, my family, my friends and I have done everything right. Maybe I'm just lucky, but I don't believe in blind luck. Following is a day by day diary record of my thoughts, feelings and comments. If we have done something right maybe others can benefit from my experience.

After the printing of the first ten days of my diary I discovered there was a great deal of interest in it. My wife, Lynne, found not only was there a great deal of interest from people due to have the operation, but considerable interest and comment from caregivers. So with this in mind we decided to continue with the record and add to it comments from others including the effect on the caregivers and families.

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## **THE HISTORY:**

We have a family history of heart disease.

Dad died from a heart attack before he was 50. My young sister had a heart attack in her thirties. My young brother in his late thirties, but they all smoked. My other brother Graham (four years younger than me) and I, the eldest have never smoked, but a couple of years ago Graham discovered he had bad arteries and after a couple of operation postponements at the Sydney hospital he died before he made it to the operating theatre.

\*Since the operation I have been reminded that Graham suffered a fatal heart attack on the 7/8/92. My operation was on the same day of the same month 7/8/96. Exactly four years later.

About three years after Graham passed away I had a very adventurous job working on Sakhalin Island, in the far East of Russia. My driver took me up into the wilderness of the mountains on a fishing trip, where I met a most unusual and interesting man named Victor. I later learned he had a reputation as a healer and people visited him just to have him lay his hands on them as he could heal many ailments. He could not speak a single word of English, but somehow he and I did communicate and he invited me to his home, where he proceeded to have his wife and daughters prepare a superb feast for us. As we waited for the food to arrive he stood behind me, reached over and touched my eyebrows, and within seconds I was hypnotised (and I had NOT been drinking Vodka!!). I awoke from the spell within a minute or two and felt 10 feet tall and bullet proof. My interpreter told me Victor advised:-

"Tell Rob he has a heart problem and should see someone about it. In the mean time I've done some thing to help!"

Scary stuff!! Heart problems are not something I regard lightly and for several years had been taking anti cholesterol pills and carefully watching my diet.

However in spite of these precautions, just over a year after this experience with Victor the magic Russian healer I discovered he was correct I did have a problem:-

### **JULY 1996:**

A couple of weeks ago my son in law wanted to go for a mountain bike ride and we headed off around the Wainui coast and into Palliser Bay (several miles of rocky track). Mark, although quite fit, is not a fanatic speedster on a bike, but on the rougher and steeper parts I found I was having trouble keeping up. I became puffed and found catching my breath was causing me some distress.

Lynne and I do quite a lot of ballroom dancing, we get weekly lessons and if I say so myself we are quite proficient at it. But recently I discovered that after several whirls around the floor in the quickstep I was breathing heavily and wanting to sit down.

About four weeks ago my wife and I returned from a short holiday break in Vanuatu. We had lived on fruit and fish and over the ten days. I averaged at least four hours each day diving. I believe I'm really quite fit for a 54.95 year old! (55 in two weeks).

With our family history we are a bit paranoid, so I went to see John, our family GP.

"I can get you in for a stress test at the Wakefield hospital within a few days," he advised.

"It'll cost a few hundred dollars but these tests will show you if there is a problem."

I have since discovered stress tests only identify about 65% of blocked arteries.

Angiograms on the other hand identify almost 99% of blocked arteries, but are invasive and do have a risk factor.

## **INVESTIGATIONS AND TESTS:**

I've done these stress tests before. Take along some runners and shorts. They shave patches of hair from your chest, sand paper the bald spots and stick on about eight or ten electrode pads with wires going into a monitor. They hooked me up and the adjacent screen showed mysterious zigzag lines and a digital counter indicated the heart beats. Next to this is a conveyor belt and it began to chug around.

The specialist coronary (heart) Doctor Sue O'Mally, had described the whole exercise to me and holding the wiring clear of the mat ordered me onto it. I stepped on and found myself walking at a gentle pace, until after about three minutes the elevation increased and so did the speed of the revolving belt. This speed and elevation increase occurred at regular intervals until at the final stage the belt incline was quite steep and I had to almost jog to stay on board.

"You're doing real well you're going to make it to the end of the test," they encouraged.

"I don't think so" I gasped. I watched the digital pulse meter as it climbed dramatically.

"Your pulse rate is at maximum now," Sue agreed, and the belt drifted to a stop as I dripped perspiration onto the floor and gasped for breath.

They peered at the screen. "There is just a little abnormality in this," Sue said.

"Nothing much to worry about I don't think."

I had a shower and headed off home quite pleased with my self, I'd survived another test, all my efforts at keeping my cholesterol down and eating up my fruit and vegetables was still working.

At the end of the week Lynne paid for the test and on that very afternoon a letter arrived. It was from Doctor Sue.

"I'd like to consult with you again," it read.

**PANIC!**

I couldn't get an appointment for a week, so cancelled it and went to see John my own reliable GP, now, immediately.

John had the report and read through it.

"You should not get your pulse rate up too high, and I suggest you go back and see her."

I hate waiting and sitting around in airports. And if there is any thing I hate worse it is sitting around hospitals, they are the pits; ten times worse than airports, and they're full of sick people. Ugh!

"Maybe later," I said, "she did say I was OK when I did the test".

My younger brother, Ian, found out what I'd done and called me on the phone to give me a rev up.

"Get down there and demand an angiogram and that will tell you exactly how you are. Why do you pay your health insurance if you don't take expert advice?"

Dr Sue O'Mally called me at home and with bad grace I agreed to have an angiogram. I was most unhappy, she'd said I was OK and I did not want to have heart problems! And it would not fit in with my future plans. I had a job arranged to do on Sakhalin Island in Russia and had bookings to fly out on the 20<sup>th</sup> of September. I'd been there 5 times previously, it is a poor place, but the wilderness, fishing and adventure, not to mention the wonderful people, made me desperately wish to return.

At 2:00 p.m. on Thursday 1/8/96, just three days since talking to Sue, I arrived for the angiogram. Thank goodness we have the health insurance, there is enough stress and worry about your health without wondering where all the money for the tests will come from, and they're not cheap those tests.

They took me to a room. Very nice, like a hotel, a little balcony over looked the gardens and an en suite. I decided to use it, it was dark in there and I groped about for the light switch. I pressed the red light (in Russia the hotels have little red lights on the light switches). Once I'd pressed it I realised it was not the light but the emergency call button. I poked and pulled at it and by the time I'd figured out how to switch it off, the buzzer had gone off about three times and into the room ran three nurses (I later learned three rings is the super emergency call!).

"Just testing," I said trying to smile. As they went out the door I over heard one say "We're going to have trouble with this one."

A male nurse arrived and introduced himself as Johnno, he presented me with a gown, cap and a blue pair of sexless looking bikini pants.

"Put the gown on back to front, it ties at the back." He held up the bikinis. "These are optional."

I've stayed in hospital before and if I've learned one thing it is don't worry about being too modest.

"They will be putting a needle into your groin and feeding in dye and will X-ray it as it goes around your heart arteries," he advised.

"So they will take these sexy bikinis off as soon as I get in there anyhow?"

He shrugged his shoulders and smiled. "Yep!"

I put on the gown, took the bikini and left it neatly folded on end of the bed.

A nurse came in with a pill, Ian had told me about these 'funny pills' and soon I felt as if I'd drunk half a bottle of wine. Who said four walls do not a prison make? The accommodation was very nice but I would have much rather been somewhere, in fact, anywhere else. I sort of stalked and staggered, about the room like a half cut caged lion.

Johno came back again, "I've got to shave you around where the needle will be inserted." He held up a monstrous shaver and proceeded to carve a swath through my pubic hairs and in a flash a great hand full of the black and curly ones dropped onto the floor.

I looked at the job. The area was now half bald and smooth as a babies, but where was the artistry, a real hair dresser would have evened it out, trimmed the other side to match or something.

I thought about the earlier stress test when they had shaved my chest to stick on the pads, it ended up like a threadbare patchwork quilt with clumps of hair sticking up here there and all over the place. When I got home I had trimmed back the tufts which made it look tidy, and any how I believe it is now fashionable to have the bare naked smooth chested look, that made me feel better.

Feeling a bit drunk I was wheeled into the theatre, and rolled onto the central table, the centre of attention and surrounded by TV screens. A crowd of female attendants dressed in bullet proof vests to deflect the X-rays crowded around me, and the thought passed through my mind that I was quite vulnerable lying near as damn it naked under this dangerous machine. But the thought passed as quickly as it arrived.

"A small prick" said Sue.

Cheeky damn woman, I thought, but when I felt the jab of a needle in my groin I thought maybe she was not making personal remarks.

"You will feel a warmth going through your body," she said, and a pleasant warm flush ran around my whole body.

The TV screens showed little stick like veins jiggling about on the screen, meaningless to me but quite interesting nonetheless.

They wheeled me back to my room at about 4:30 p.m. and within an hour Dr Sue and a surgeon, introduced as Dr John Reardon, arrived to show me some photos taken off the 'TV' and gave me the news I really did not want to hear.

"You need a triple by pass." Shit! Damn! I didn't want that news.

"Look," I said to the surgeon. "If I have this done I'm booked to go to Russia on the 20<sup>th</sup> of September (six and a half weeks time). Can I do it?"

The surgeon looked me in the eye and said, "that shouldn't be a problem you look pretty fit and should be OK by then".

I couldn't believe it. "When can you do it?" I asked.

"Come in next Tuesday and we'll do it on Wednesday."

I thought about my brother Graham and Sydney Hospitals tragic effort and asked, "Tuesday? You won't postpone it?"

“We won’t postpone it, see you on Tuesday. Now you must lie here for another three hours.”

My nurse, Debbie, came in and again advised, “you must lie still on the bed and must not move until 8:00pm.” But I wanted to move. I was bursting and wanted to use the toilet.

“Can’t I just pop into the loo?” I pleaded.

“Yes. At 8:00 PM! Use a bottle.” She bought me a plastic bottle to pee into. It’s bloody degrading, I could walk for the couple of feet for goodness sake.

My digital watch slowly ticked onto 8:00pm and I rang the call button. Debbie arrived immediately and I was permitted to use the toilet.

“Can I go home now?”

“You are booked to stay the night with us. Don’t you like our accommodation?”

“Your accommodation is very nice, but I don’t want to stay the night, I want to go home to my own bed and get my head around this thing.”

She agreed and made sure we knew that if there was any sign of bleeding at all from the needle hole I should immediately PANIC.

As I left she wagged her finger and said, “I’ll see you next week, I know we are going to have trouble with you.”

The impact of learning you will need to have your chest chopped and opened up to allow someone to play about with your heart is not nice. A heart is really a very personal part of your body, in fact I’d say it is the most personal part of all and it seems to me to be absolutely obscene to have some one fiddling about with it. But this is now a very common operation and very successful, but the fact remains, I’m a real wimp, I don’t even like the thought of someone sticking a needle into me. At the dentist I refuse the anaesthetic injection because it hurts.

Over the next couple of days the negative thoughts tumbled through my mind and often I awoke at night in a cold sweat. Time passed and after a couple of days I came to my senses. For goodness sake I’ve been aware of the family history, I’ve done all the right things, tried to eat all the right foods, and now we have discovered this problem before a heart attack could occur. We are covered by health insurance, so have no worries there. Think about it, thirty percent of people only have one heart attack, it’s their first and last. It kills them! That’s permanent.

I’m fit and healthy, I heal quickly, I don’t have to wait for weeks or months as the stress builds up and the body deteriorates because you become afraid to do anything in case it causes an attack. The power of positive thinking, I was now on track. Lets get this show on the road! I’m prepared for the sweat and pain to get better.

Then a little doubt came to me, someone told me I would not be able to SCUBA dive after a by-pass operation. My God I’d just pine away and die if I couldn’t go diving. They may as well just shoot me now!

My mind returned to our recent trip to Vanuatu where the dive master Brett, told me about an old guy from the USA.

“You two must be brothers,” he’d said, “he’s just like you, keen and enthusiastic, he’s 66 years old and he dives like a twenty year old and the old bugger has had a triple by pass.”

Why had Brett given me this guys FAX and phone number? I thought about it and decided this was fate. I wrote out a FAX asking him if I had my facts right. I dialled the FAX number in the USA and waited for the squeak, it didn’t come, some one answered the phone, it was the man himself, Mr George D. Mann.

I introduced myself and told him about my meeting with Brett, and my fears of not being able to dive.

“Who told you that?” he asked. “That is just one great load of bullshit. I’ve had a triple by pass and regularly dive to 200 feet.” For the uninitiated 200 feet is a very deep dive! It’s over 60 meters.

“That’s a big dive,” I said.

“Don’t smoke, not too much drink, eat good food and exercise. I do, and I can still out swim most thirty year olds!”

Fate? Am I just cheeky? I have no idea what the time was in the States when I called, but boy that phone call made me feel good.

“Thanks George! You’re a little beauty mate.”

I awoke in the night and planned a goal program ending in my trip to Russia at the end of September. I also decided to write down the experience of this thing, who knows it may assist someone else in the future. I’m feeling very positive but must admit, am not looking forward to experience.

## **FAMILY AND FRIENDS:**

How could you manage with out them? The support, the calls and the encouragement from everyone over the few day between finding the problem and getting to hospital has been overwhelming and I could not even start to list the people who have given me encouragement. I'm not a religious person but many people have told me they have offered their prayers for me and it is a surprise to me how much of a soothing effect this simple act has been to me. My son in law Mark (a catholic) told me he'd had a word with the Big Fellow up there for me.

"I hope you didn't make me out to be too great, he may decide he wants me up there."

"No chance of that mate," he said, "you can't bullshit Him!"

### **5/8/96:**

Tomorrow is the big day, this evening I went with Lynne to the dance lessons classes, there were about 30 of the friendly crowd on the floor doing their thing and when I walked in the door everyone seemed to notice me. Someone gave a little clap and one by one, young and old they came by to give me a word of encouragement, and when I left I felt a great wave of emotion. This whole business would have to be an out standing success, how could I let these good friends down? I awoke in the night and took stock of my advantages and strengths:-

I had discovered this problem before it had blocked off completely and killed a part of my heart, so my heart is still very strong. I'm very healthy, fit and I heal well.

Remembering my brother Graham, who had had the same problem diagnosed in Sydney 4 years ago, and because the hospital postponed his operation for a week he had died while waiting I would indeed be stupid not to get this job done as urgently as possible.

I have very good breath control. I was New Zealand spearfishing champion – twice and can still out free dive most of the youngsters of any age who are around these days so post-op breathing exercises should be easier for me than many.

I have goals set to achieve results, including attending a dance in three Saturdays time. And the ultimate success – to go to Russia at the end of September. I also have a secret weapon that has worked for me every time in any past illness. It is a five foot diameter four foot deep wooden hot tub and I've often wondered why the medical profession has not recognised the value and effectiveness of immersing a damaged or injured body into the warm weightlessness of water?

## **THE DIARY: DURING THE OPERATION**

### **6/8/96 WAKEFIELD HOSPITAL (Wellington New Zealand)**

2:00 p.m.: We arrived at the hospital and the action started immediately. I was first escorted into my designated room then marched down to get a chest X-ray. This was followed by a constant procession of doctors, nurses, physio and anaesthetic personnel advising me of what would happen during the operation, taking blood samples, checking for allergies and explaining the Anaesthetic.

There was so much information that I can't remember it all and they tell me I'll forget most of it anyway as the drugs and anaesthetic will take out short term memory and jumble the rest like shuffling up the pages in a book. Everyone knows what their job description is and they have made it very clear to me that they are very competent at it. The registrar arrived and pointed out that there is always a risk involved in any operation, and I flushed into an instant cold sweat. I knew this already, and although I suppose I should be warned, it did not fit anywhere into my goals, it was something I definitely did not want to hear about it and I took an immediate dislike to the poor fellow who should be so impertinent to even think such a negative thought, I'm not going to die on the table! I am only interested in the positive aspects of this exercise! A nice meal arrived and the anaesthetist advised I eat up a hearty meal tonight as I'll be on the table tomorrow afternoon and can eat very little for breakfast, I will be given only a piece of toast early in the morning.

The barber arrived after dinner, I laid out naked on the bed and he protected?? My modesty with a towel as he wielded his electric shaver and shaved my chest, legs and pubic hairs. This was quite relaxing and the removal of all body hair has left me with a smooth and tingly, but not unpleasant feeling. This is not the time nor the place to be thinking of things feeling sensuous, but it does take the mind off other things and it is a long time indeed since I have been this naked.

Once he finished I was issued with a phial of antiseptic 'pre operative body wash' and instructed to go into the shower and wash off any loose hairs and then rub it in carefully every where, but warned, "don't get any in your eyes!" The stuff is yellow, like iodine, and it splattered all over the place as I rubbed it in very carefully, rinsed it off and then did it all over again, and again. The stuff kept coming and coming from the little phial giving the impression it was bottomless, but I persevered until there was none left.

I've been told regular coughing, deep breathing and attempting to eat well are all important to aid recovery. I've also been warned that the first few days after the operation the patient is always very tired and visitors should be discouraged. Wives and families are OK as they are prepared to keep a lonely vigil while the patient sleeps and can offer quiet security and support if he awakes.

Several visitors arrived tonight and the phone has been busy with friends calling to wish me well. There are conflicting opinions about whether or not the early recovery I plan is possible. Some tell me it is possible while others say I may be too ambitious, time will tell, goals should be achievable, but can be changed if the circumstances dictate.

## 7/8/96 THE KNIFE:

The day has arrived. A sleeping pill I took at 10:00 p.m. last night sent me into a nice restful sleep. I always sleep naked, and as this is a private room it is nice to be comfortable and continue with the practice. Lying in the bed the sheets feel smooth and sensuous against the shaved skin and I quickly dropped into a very restful sleep. Several times in the night as I moved the plastic wrist I.D bracelets grazed against my chest and nipples, sharp as little chisel blades they jabbed into naked hair free skin and I awoke with a start. The feel of the smooth skin and prickliness of my legs immediately reminded me of the where I was and of the ordeal ahead, but each time my thoughts and fears were positive and my mind did not dwell on them, and each time I quickly fell back into a deep and soothing sleep.

I awoke at about 5:30am and soon after Lynne arrived to hold my hand. It is very encouraging to have some one you love just to be there. My night nurse, Regan arrived at the door.

“Are you ready for some breakfast?” she asked. Without asking to see the menu I ordered bacon and eggs. “Yes Sir,” she answered and within a few minutes was back with two beautifully cooked pieces of toast and a cup of tea. But her smile was worth two plates of bacon and eggs.

Sandy and Mark arrived soon after and we had a great family party before Mark decided he would have to go off to work.

Polly the physiotherapist arrived with her box of tricks advising me of the adventures ahead we would be sharing, I will need to learn to breath from lungs and a chest that will just not be all that interested in doing the job they do so well now. They will prefer to take easy shallow little breaths that cause no pain. That sounds sensible to me! She handed me a little gadget to suck to give an indication of the before and after effect and show me where I would need to get back to. I easily sucked the three little plastic balls to the top of their cages and without too much effort held them up there for some time. I want to go diving again as soon as possible and I feel I'll have a greater incentive to get my breathing going perfectly again than most!

11:00am Mary No1, my very helpful nurse from yesterday arrived at the door, “Shower time”.

“Yes Mam!”

I clambered back into the shower and soaped up very carefully with the second phial of yellow iodine based soap. I certainly don't want an infection and rubbed it in everywhere and when I rinsed it off took care not to wash it off too thoroughly, I figured the anti bacterial or whatever it is should have a very thin coating over the skin. As I scrubbed in the soap those bloody plastic wrist bracelets jabbed into my exposed delicate skin and after a few more jabs I figured it was because I'm left handed and mostly scrubbed with my left hand, the hand fitted with those viscous bracelets. Any normal, sensible right handed person would use their unencumbered right hand.

So now I await the premedication relaxing pills, a jab in the bum and will awake this evening in the intensive care hooked up to my own private TV show. This is your life!

Mary No1 just popped in to advise they haven't completed the other operation yet, I hope the guy is OK, he was in some distress last night and they took him down to the intensive care area to keep an eye on him.

**NOTE TO MY FAMILY:**

It's time to go, I'll be seeing you all soon and love you all so much and am very proud of you all.

## **POST OPERATION COMMENTS:**

I wrote the above while waiting in my room. I never watched the TV and the Nurses peeping in often chastised me for working, but when I explained this was just my way of getting my head around the operation ahead and preventing stress they were interested and some even asked if they could have a read of it when I'd finished, because it could help give them some insight of what goes on in a patients mind. I agreed, that would be OK. So that evening Lynne took the disc home and printed it out and it was in the intensive care when I came around the next morning.

### **8/8/96 DAYS 1 & 2:**

**Intensive care**, I'm alive, awake, and very alert. The pain really isn't as bad as I'd expected. Wires and tubes are draped every where, but that had all been explained to me and I soon learned that if I breathed too shallow a bleeping occurred, bringing a nurse running to my side with the instruction to breath more deeply into the oxygen mask.

*I'm filling these pages from my hand written diary entries made in the intensive care unit (ICU). What they warned me is true, the memory of the stay in this area fades very quickly from your memory and as I'm typing this up on day three, I am recalling important reactions that are already fading from my mind.*

I had been warned about the activities in this area, the bleeps, whistles and alarms from the monitoring equipment.

"Don't worry about them they are just keeping us constantly aware of your condition," the nurses advised.

I had set up my own agenda for this operation, and one part of it included taking in a tape deck radio and listening on an ear plug to a favourite speaking tape I have. The story is 'Wilt' written by Tom Sharpe and read by Dennis Waterman. A rather rude and naughty story about a little man beating the establishment, I know this story by heart, Wilt continues to win every time and the whole thing just appeals to my warped sense of humour.

The plan was great, until we turned up at ICU, where Lynne, obediently clutching my twin tape radio discovered there were no power points available for such equipment. She raced off and arranged for a small battery powered machine to use instead. This was OK and I used it a couple of times before the tape jammed. In desperation I borrowed the ICU telephone and called home to Lynne to report this dire emergency. She arrived soon after with Janice and my old faithful Ghetto blaster with batteries installed in it. I immediately calmed down as life returned to my control, and I settled in happily to continue my recovery.

Janice told me later that I "went ballistic" because of this unprogrammed deviation to my program and it was the ICU staff who had originally suggested to Lynne that my ghetto blaster was a bit large and couldn't she find some thing a little smaller?

So if you unsung and unremembered heroines who work in the hospital ICU area ever get to read this I'm sorry about that, and love you all and am sad to admit that my memory can only see you all as faceless, but fantastic angels.

In my diary I've noted 'the bleeps and whistles occurring from my control console actually gave me a great feeling of security and the staff responded immediately and confidently to the equipment.'

I remember having to sleep while wearing a plastic oxygen mask, it was purged with a fine mist of water and dribbled uncomfortably from my mouth and onto the pillow, and I worried about what my attendants would think of my untidy bed habits. Every so often I felt a squeezing on my arm, it was an automatic blood pressure testing device. There was no-one near me, but the regular squeeze only gave me confidence of familiar checks. Any cough or movement on my part brought a nurse immediately to my side. In the cubicle alongside but partitioned off out of my sight was my neighbour who had been operated on first in the morning. I heard him talking and was pleased to hear, he sounded to be OK. I called over to him to see how he was managing and we both agreed we were OK, but could think of more fun things to be doing and figured even mowing the lawn or doing the dishes would have been acceptable.

My brother Ian had warned me about 'Punishing Polly' the physiotherapist. Polly had got him walking again recently after he'd had both hips replaced, and arrived to see me looking disgustingly cheerful and ready to issue some torment onto my poor broken body.

She passed me her little toy with the three little balls and said "Remember these?"

I remembered them all right, and with my pride as a diver at stake sucked on the nozzle until it hurt, but the pain was well worth the great satisfaction I felt as I watched the three little balls shoot up and made a satisfying click at the top of their cages as they positively stuck up there! Did I sense a disappointment with Polly? No, I think it was a kind of pride as she called over the duty nurse team and had me do my party trick again.

"We don't often get as good a result as that in the intensive care," she said, "well done."

I felt so proud! What silly little things or comments can encourage and make you feel good.

I used the phone again and nonchalantly called Lynne, no problem. It is so reassuring, not only for me but for Lynne also to be able to communicate so easily and for her to enter into the sacred area of Intensive Care. The spouses and families also require great support at these times, operations cause them a great deal of stress and I could not help but notice Lynne looked very weary. She told me that she and the kids had been allowed in to see me immediately after the operation last night and the Doctor had spoken to them and reassured them. She said I'd looked dreadful, but was breathing, albeit with aid of a machine, and this, coupled with the Doctors confidence and support was enough to show I'd made it through the rough stuff and they all went home relieved and confident I was in good hands and would be OK.

On this visit and on the request of some of the nursing staff, she brought with her the first copy of this diary and gave it to the intensive care nurses to read. I could not see the faces but can clearly remember their reactions as they read of indignities I had suffered and chuckled together as they discussed my thoughts and

feelings. After they finished reading it one was kind enough to come over and console me as she assured me that Dr Sue O'Mally's comment about small pricks was purely a professional term, and added she was sure I would indeed be very well endowed. (or words to that effect). However, I can't help but wonder, if this is indeed the correct professional term, what does a female patient think when she is advised to, "hold still, you are just about to feel a little prick between your legs".

The 48 hours in ICU passed in a drunken blur with the awake periods being clearly in focus and quite lucid at the time and I was sure I would never forget my time in this busy place, but on day three, back in my room 212, I awoke to see a familiar smiling face at my bedside. I spoke to the lady and we knew each other very well, I knew this woman but from where? I racked my brains and as I spoke to her searching for clues of where and when we'd met.

The clue I needed arrived when she said, "my husband bought me that book you told me about the other day and I wanted to thank you for introducing me to this author, I haven't been able to put it down nor stop laughing since I started reading it".

The penny dropped – Tom Sharps book 'Wilt on High'- the Intensive Care Unit! – Martha. And suddenly the memory of the intensive care and its wonderful staff snapped back into place.

"So I'm not alone with a twisted sense of humour," I said.

And what were the experiences I remembered? I decided to write them down quickly before they fly away and the adventure will be forgotten.

Did it hurt? Not as much as I had expected, one needle, a catheter which had been stuck in the back of one hand hurt like Hell, I complained and they removed it.

"We can use another catheter," someone advised.

Everything else was relatively comfortable and when the ICU stay was completed I remember with surprise and interest rather than the pain when, like magic, lengths of plastic hose were removed from below my chest, and needles were removed from various places and bunches of goodies pulled out of my throat. Soon after the dressing was removed from my chest wound someone gave me a bed bath! Oh the luxury and pleasure of being washed and touched all over with soothing warm water. They helped me into my shortie satin shorts and took me on a quick wheelchair ride (which is now completely gone from my mind) and the next thing I remember was awaking back in my room.

**DAY 3: “Pain is inevitable, but suffering is optional.”**

I don't know who I'm quoting, but I like that saying!

Awake from a short sleep I tested the body. Had a steam roller hit me? I certainly knew the body had had a bit of a rough time.

But it still worked and to prove it I walked down the stairs to the front reception desk and back, I was sore but felt well! How is that possible? Several visitors arrived with enough food to last me for a week. My business partner Eddie, a veteran of many hospital stays, bought a bottle of wine to celebrate, so after checking with a nurse (“just one glass” she ordered) we drank a toast (mine from a big glass!) to a successful survival. Mary No1 settled me down into a recovery position and gave me a jab in the bum and I slept the night like a baby, except, as there was no longer a urine draining catheter fitted I awoke several times to pee. I had not realised just how trouble free that thing had made my life.

The shaven hairs are beginning to grow, and around the crutch area at the top of the leg wound from where the replacement plumbing was taken, they jab and rub like a wire brush into the wound. The pain from this has been excruciating, and I removed the satin shorts and packed them over the wound, the soft smoothness immediately calmed the pain and I dropped blissfully back to sleep. In the morning I pulled out a very soft Indian cotton lava-lava I wear in the tropics, if modesty dictates sleep wear is needed, I think a really soft lava lava (sarong?? Or what ever you call it) is ideal. Pyjamas, particularly thick winter ones, must be cruel to wear and in my humble opinion must significantly slow the healing of any open wounds.

**DAY 4:**

I notice my progress seems to be significantly faster than my peers and am constantly advised there will be bad days and feelings of depression. My mood has remained positive and buoyant and the nursing team keep advising me to take it slowly, let the body heal, so I'm taking it slowly, playing about on this computer to pass the time.

I popped in to see my neighbour with whom I had shared the time in the intensive care unit and spoke with his wife and relatives. I had seen them tip toe into the ICU not daring to look at me for fear of contaminating me or something.

Their eyes almost popped out when they saw me toddle on in and said with genuine surprise, “we watched them wheel you in and really we thought you were dead! We were so worried for you and look at you now, you're running about like a two year old.”

Today, Julie, my day nurse pulled off the long dressings from the leg wound, it looked good, nice neat internal stitches, and it felt so great to have it exposed to the air. She told me that I could wash the wound once the dressing had gone so I leapt happily into the shower, only to find Julie was supposed be there to supervise me.

“You're too impatient,” she said. “Slow down.” But she was in time to scrub my back, and the flowing warm water and that back massage was heavenly.

This evening for the first time I felt a little unwell. Low blood pressure, I dozed and awoke puffing and perspiring, the old heart seems to be a bit confused, it doesn't need to pump as hard as it used to and the controls are a bit out of whack.

The nurse told me, "that's normal, did you read the little book?".

"Yes", I said, "before the operation, but I've forgotten most of what I read. I'd rather you told me!".

I try to go to bed early each night and get to sleep. It is not always easy, I'm not really tired and for some reason if I do get to nod off, I can only manage to stay asleep for a maximum of about three hours at a time. Today the stitches in the leg are biting again. It is strange, they can be OK one minute, and then for some unknown reason will bite like a row of bee stings and hurt like crazy. I have experienced this before and get relief from knowing it occurs on about the fourth and fifth days and is part of the healing process, I just wish it wasn't so bloody sore!

Tonight when I went to bed early there was a magic feeling, the leg pain had finished, not completely gone but just a dull pain. I flopped onto the bed and luxuriated in the freedom of being able to spread out and move about on the bed. I could toss and turn and move about. I punched at the pillows and rolled them into every conceivable position but just couldn't get comfortable. I couldn't believe it! Here I was feeling almost 100% and I couldn't settle. Up to now I'd not really noticed the uncomfortable plastic covered pillows.

I tossed and turned all the night but my mind was working, thinking of the positive things, the sum of the nights thoughts being, "hey guys we are almost better, all we need now is to get home and into a decent bed and life will quickly return to normal".

I found one of the most uncomfortable things with this operation was the damage done to the throat installing and removing equipment down where ever they shove it, with the result that often when you breath you can get a tickle in the throat. It's like a Chinese torture as you await the tickle followed by an involuntary chest wrenching cough.

I took a sleeping pill, they are great, and quickly dropped off to sleep, but within about 30 minutes a tickle in the throat caused me to give a chest wrenching cough and I was awake again and couldn't get back to sleep and tossed and turned the whole night, until about 5:30am, when I finally dropped of to sleep again. At 6:00am some one (a male nurse – not one of my regular nurses) awoke me from a deep dead sleep to take a blood pressure reading. I was not incredibly impressed and from my semi-awakened state I testily asked if they were waking me to give me a sleeping pill (some one did that to me once in the Wellington Hospital "because it was on the card to have a sleeping pill at 9:00 p.m."). In my opinion the patients sleep should be sacred. Unnecessary tests should be aborted.

## **DAY 5:**

The weather outside continues to be cold and miserable but a busy day is scheduled, chest X-rays, cardiograph and blood tests.

Paul, the chief nurse popped in to advise I will be wheeled down to X-ray in a chair, "because it's a long walk and sometimes patients can arrive down there a bit grumpy," adding, "you can walk back if you want to".

"So if I'm grumpy when I get back to Julie that's OK?" I asked.

"She can handle you," he answered.

I dressed for this occasion. A very soft track suit and nice new runners. The walk back was of course a doddle, but the soft lining of the track suit trousers hurt the leg wound even though it was by now quite well healed and not normally sore. I again wonder at what sort of advice people should receive before coming in for an operation like this, I think I have got it right, soft silky and easily removable. Healing and comfort out weighs modesty anytime.

Mary too saw me all dressed up and suggested, "when you come in for checks in the future you must come in and say hello, now that we have seen you in clothes we'll be able to recognise you".

It's OK Mary, I'll just remove my trousers as I come into the ward, but I'm damned if I'll shave!

I don't think I was grumpy when I arrived back and Julie took great delight in removing the electrical heart restart wiring that hung from my lower chest. What a strange feeling, it felt as if she were pulling a worm from my chest. And at the instant it came out a sharp pain occurred, and lodged in my shoulder. I closed my eyes with the sudden pain, idiot, I didn't look at the wires, so can't imagine what they look like (Mary No1 tells me "They look like a loosely wound spring like the ones in a ball point pen").

Meanwhile the visitors kept coming. The visits, inevitably being fun and happy. The ward staff smile at our hilarity and some times the laughter has made my chest wound slightly sore, but I'm sure it's a very therapeutic exercise (and it doesn't hurt as much as the coughing that Polly wants me to do). I hope we don't disturb the other patients.

I actually feel a sense of joy at having successfully come through the operation and every little achievement has its own moment of glory and I revel in every little win. For an untrained computer operator I'm even getting great satisfaction at making this damnable machine work. By nature I'm very impatient and only when there is nothing better to do, do I spend much time playing about with it.

Paul issued an instruction tonight, "slow down, not to many visitors, you're going home the day after tomorrow, it will be a big day. If you wear yourself out it will take you several days to pick your self up again".

Trust me Paul I want to get back to 100% as soon as possible, I'll be doing every thing I can, thanks for your advice, I am listening!

## **Meals:**

A word must be said about the meals. Each day a menu was presented to be filled in for the following day, and the selection always gave me some problems. One day I ticked a number of selections that appealed and ended up with enough food to feed half the ward. Each course looks like a photo from a cook book. It always arrives nicely presented delivered by friendly helpful staff, but after the operation my taste buds were not easily excited, all food tasted bland and eating has not given me the great pleasure it may have. Even a bottle of wine lay open and untouched in my locker for several days until I returned home.

## **DAY 6:**

The day dawned in a splendid golden sunrise. I pulled open the curtains and looked out, it felt great to be alive.

Paul came by and spotting my mood waved his finger and advised, "take it easy!".

Polly came by told me to breath deeply and advised me to, "take a walk in the gardens and smell the flowers".

Lynne came in and we walked around the garden, smelled the spring flowers and trees. The fragrance of a macrocapa tree? I couldn't see one but it smelled like one.

My surgeon Dr John Reardon arrived and discussed medication and any methods we could adopt to lead a better life style or diet. We have been living the to these life style recommendations for quite a few years now, and the only useful thing I should have done 55 years ago was select different parents, but it's a bit late for that now and anyhow I love my old Mum and wouldn't trade her in for anyone!

"Any other questions?" he asked. There was, the big one.

"When can I go diving?"

"I'll see you in about six weeks," he said.

I made a mental note, that was not a "not today," but if the weather was good and I felt OK in the future! I may even be able to bring him in a crayfish, just to prove I can do it.

Mary too, arrived and set up a video to watch; a film made to give advice on what to do when back home and life style and the after effects from heart surgery. I hated it. There were several folks wandering around the garden, telling everyone how to slow down and take it easy. They also demonstrated a few sterile and boring exercises; I found it slow, I found it boring and negative, it certainly did not motivate me. I want to know the success stories of what people have achieved and the possibilities. Interviews with super positive people. Call up someone like 66 year old \*\*Mr George D Mann in the USA (ref. Phone call page 7). I gained 100 times more motivation from talking to him on a 2 minute accidental international phone call.

\*\* Please look at page 25 of this report re the FAX received on 18/8/96. Isn't this guy the greatest? He must be an outstanding example of what can be achieved. I will certainly be in touch with him again!

I personally know many positive people who have had this operation and are enjoying exciting and extremely high quality lives.

### **DAY 7: THE LAST NIGHT AT HOSPITAL**

I programmed another early night and crawled into a comfortable recovery position where I lay for a couple of hours and dozed in and out of sleep. The newly developed pain knifed into the core of my shoulder, and when Mary No1 poked her head in the door for the 10:00 p.m. check and pill run, I commented on the phenomena of removing a wire from down there causing a hurting up here. She gave me the prescribed pills including a sleeping pill, reset me into the recovery position and took to the painful shoulder with some magic ointment, Arnica. Within 10 minutes I was fast asleep.

5:00am. For the second time of this hospital stay I turned on the TV. It is not fair that a sick man like myself should have to provide assistance to 15 big strong kiwi men dressed in their sexy black costumes to carry a ball from one end of a cow paddock to the other while some dumb South African idiots seemed to mindlessly get in the way. It took significant assistance from me to get that ball safely to the far end of the paddock where it belonged (the NZ All Blacks won!).

Regan arrived during the half time rest period with a steaming cup of tea. I jumped out bed to have a nervous pee and leaping back into bed skittled the tea all over the blankets. Regan did the decent thing, remade the bed, remade a fresh cup of tea, but after that they decided it was time I went home. I called Lynne and she arrived to collect me at 9:00 am.

### **HOME: GETTING FIT AGAIN (STILL DAY 7)**

Lynne collected me and we went home via the local village shops (Kilbirnie) to collect prescriptions etc!

Our chemist Ken, is a personal friend.

He looked at the prescription for 30 only 20ml sleeping pills and said, "I'll give you 60 10ml sleeping tablets, so you're prescribed to take 2 of them to go to sleep, but I know you don't take much drugs and you may find just one is enough".

Can you believe your home of about 25 years can be an alien place? After recuperating in a hospital specifically designed to assist handicapped people your home can present a new challenge. Suddenly there are no emergency buttons to press should immediate assistance be required. Unfamiliar toilets, without the grab handles. Smaller shower cubicles without chairs. It can all be a little daunting.

Lynne tied a 'donkey' (a rope to pull on to help you sit up) to the end of the bed. I flopped onto the bed, at least it was familiar and comfortable and within a few minutes I fell asleep.

On awaking a walk around the block built up my confidence to handle the home life and I returned buoyant.

Mary No1 had escorted us to the door, and as I left advised, “don’t over do it, and I worry about this Hot Tub of yours”.

The Hot Tub registered 39 degrees C on the thermometer as I streaked out into the backyard and clambered into the steaming cauldron. The wounds stung a little as I slowly immersed myself but soon the weightlessness and venturi jets blasting bubbles onto taught sore back muscles massaged cares and pains away. I paid great attention to not getting over heated as I had been warned that over warm showers or baths could cause fainting. The problem was that nobody could put a temperature figure on what was too hot and what was acceptable. If any one wants a figure I would suggest 40 degrees C (104 degrees F) is a maximum – and care should be taken at that temperature, don’t stop in too long.

The sleep after that was two hours of pure ache free bliss.

Today is Lynne’s birthday and the kids brought over food and a bottle of Lindeaur NZ sparkling wine. Nectar, but after two glasses I was any ones.

Another soak in the Hot Tub. Under the stars with steam drifting through the trees and the bubbles working their magic massage. ‘Maybe I can’t go diving yet’ I thought ‘but it is good to be alive.’ I took one 10ml – half measure sleeping pill and had the best nights sleep since before I’d learned of the need to have an operation.

### **DAY 8:**

We awoke to a cold Southerly wind, preventing any sensible thought of walking outside. I wandered through the house and turned on the CD player. Ballroom music drifted through the house, Waltz and English Foxtrot. Like a big Wally I ponced through the house in dance stance, dancing alone the routines I know so well. Spin turns, Whisks, Feathers and Chasses. After a few moments my pulse rate rose. I can not believe how energetic these routines are and can feel all the muscles in my body working and moving to their familiar positions. If you know a dance routine I’m sure it will be better than the sterile exercises set in the “coming home after heart surgery” manual. I spent the day entertaining visitors, plunging into the hot tub, playing about with dance steps and messing around on the computer.

This evening is a dance lesson night and I wrapped up warm and went into town with Lynne to see the friendly crowd and prove I’d survived. Few people weren’t there yet and a Waltz played. I find such music stimulating and called Lynne over “Let’s just try to do a couple of steps”.

We took up the hold; Spin turn, chasse, lock, double reverse, it all worked. Our well practised dance routine flowed and before we knew it we had been twice around the floor and completed the fairly complicated routine. Fantastic! Rapt and lightly puffing, I rested on my laurels.

### **DAY 9:**

Not a nice day! The sort of day I guess that if you were going to feel let down this would be it. A Southerly and bitterly cold.

I love the Wellington coast and in a Southerly Kau Bay is always calm. I hate not being permitted to drive and bullied Lynne to take me to the Point Halswell light

house. Wrapped up warm, but wearing soft shorts to let the wind and sea air at the healing leg wounds we walked to the centre of the bay before Lynne walked back to collect the car. I carried on to the next point before turning back and we met at about the middle of the Bay. A nice little walk we measured on the trip meter as 1.8 km.

Then a disaster met us at home; neither of us had remembered to switch on the hot tub! It was quickly switched on but I had to wait for several hours before it was ready. Fortunately it was up to temperature just before bedtime and we slipped into the warmth and again it worked its magic. I rolled into bed and without a sleeping pill fell into another good nights sleep; That is until midnight. I awoke feeling a bit sore in wounds and body. Immediately out of hospital we had picked up a prescription of pain-kill pills, but I hadn't suffered much pain so had not bothered to take any of them. Now I took two with a sleeping pill and good night nurse, another great nights sleep.

### **DAY 10:**

Since getting back to my own bed I've slept very well, but unfortunately Lynne has not fared as well. My pattern of awaking after about 3 hours is also waking Lynne, and she is having trouble getting back to sleep, especially since she is afraid to move in case she hurts me.

I'm now into a pattern of two walks of about 2km per day and use the hot tub for short bursts about three times a day. First in the morning after my walk, then in the evening before bed, and often in the middle of the night, 4:00 or 5:00 am if I awake and can't get back to sleep. This is magic at removing muscle tensions and wound pain and back in bed I drop quickly back to sleep.

Since this is the final day report I intend to record in this form it may also be of interest to others to hear how the aches and pains are. The leg wound is looking very neat and healed. In many places the scab has gone but it can still be quite painful, especially if it has been left immobile for any time. The chest wound is well healed, also with most scab gone. Breathing is still not 100% and on taking a good lung full of air there is a sort of pain and restriction to full breath. Coughing continues to be painful, and is often necessary. Something I saw on TV the other day caused me to laugh and cough until I thought I'd break in half. Polly would have been delighted. Noel Edmonds House party should be banned from TV!

## **ROBS RECOMMENDATIONS TO POTENTIAL BY-PASS PATIENTS:**

**\*Hospital wear:** Don't buy a new pair of Pyjamas to take to hospital! Get something soft, smooth to the skin and easily removed. Silky, satin or very soft cotton, a lava-lava cloth is great. The wards (at least at Wakefield ) are always nice and warm.

**\*Dressing gown:** Not a big heavy woolly one. Light and short, and don't let it touch your legs.

**\*Laughter:** Laughter does not hurt as much as coughing, and Punishing Poll will want you to cough. If your visitors get too serious or negative ask them not to come back! You don't need anything negative.

**\*Indignities;** Everyone suffers indignities in the hospital system, don't let them upset you, talk and laugh about them! It's your getting well that counts.

**\*Attitude:** Remember this is not only going to save your life, but will also improve your quality of living. Plan your recovery, don't be too ambitious and savour every accomplishment you make. I'd prefer to spend my money and go to a Pacific Island somewhere and it's cheaper – but this is also an adventure in life. Twice I watched the All Blacks play, they get jumped on and kicked; their bodies must feel as beat up as I feel now – after every game!

Turn any negative thought around or they will make you miserable.

**\*Write it down:** Why you are doing it, what you expect to happen, what you are prepared to put up with, where you hope to be in several weeks time. Don't be over ambitious it's very encouraging to find you are ahead of your goal schedule.

- **Sleep;** In my experience the body mends it self best while it is asleep. Work at getting as much sleep as possible. Ask your nurse to help you to get comfortable in bed and settled at night. Learn how to get your self into a comfortable recovery position.
- **Cassette story tapes:** Well loved stories have helped me, some may prefer recorded poetry or music. I believe they are more relaxing than TV and it is easy to fall asleep while listening to them.

**\*Who is that asking about sex?** I can advise that my first meal at home included about 10 raw Bluff oysters (these are without doubt the very best oysters in the world! And they are regarded as having great aphrodisiac qualities; who needs Viagra?). To date they haven't all worked but I cannot be too critical of my system for sneaking off with some of them to help repair the body!

- **Body Shaving:** To many people this can be an indignity, and is, in it self, stressful. Every one knows hospitals shave off body hair, but although every other aspect of the operation has been explained, this practice has not. Regrowth of hair is at least uncomfortable and often painful, especially so near a wound.

The new type clipper hair removers used at Wakefield are a great improvement on traditional shavers as they do not shave as close and the patient does not suffer from ingrown hairs etc (as I have in other operations!).

**\*Plastic Wrist Bracelets:** Beware! Trim the sharp edges off the plastic wrist bracelets. They jab into the tender shaved skin.

**\*Use your strengths and assets:** Everyone has their own strengths and assets. Take stock of the things you do well and see if you can make a list of them and use them to assist your recovery.

**Mine include:-**

**\*\* A Desire to travel:** I'm going to Sakhalin Island (off Siberia Russia) at the end of September. The goal, the pinnacle of the mountain, trust me, I'll be there!

**\*\*Diving:** A desire to get back in the sea, and the use of deep breathing skills I have.

**\*\*Dance:** Dance disciplines are a very effective whole body exercise and is social.

**\*\*Playing about on a computer:** Not games, but things like writing this diary on a note book computer has kept my mind occupied and thinking positively. I also like to write travel and dive related stories (none published!).

**\*\*Hot Tub:** I'm used to it, I've gained huge pain relief and sleep assistance with careful use of it.

**\*\*Mountain biking:** Not yet, but very soon I'll have the bike out again.

**\*\*Fishing:** From the boat it is more energetic than it looks!

**\*\*Walking:** We have wonderful walking tracks all around Wellington. Around the coast with fresh sea air, and over the hills on cut tracks. I have done many parts of the short easy ones while convalescing.

## A POSITIVE MESSAGE FROM AN OLD TIME CHAMPION:

Following is a copy of the FAX I received on 18/8/96 from Mr George D Mann from Plainsboro. USA.

Don't you think this guy is just the greatest?

\*Note due to the NZ Privacy Act I've removed his personal details - and changed his name.

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**Dear Rob,**

***This is to encourage you. Of course you can dive again! Not in a few weeks, but in a few months for certain. I had a quadruple by-pass fifteen years ago. I dive over a hundred times a year. Last week I was videoing blue sharks off Rhode Island, water temp 45 Degrees F (about 7 or 8 degrees C - that is colder than Wellington water ever gets!). Last year I did a video of the Bonaire Windjammer alone. I dived seventeen dives in eighteen days each of twenty five minutes at 195 feet (about 60 meters - & that's bloody deep! Rob). Scares most young men shitless! ( Me too!) This involved going through surf with twin 80's (two big aqualung tanks) a 30 cu ft tank of oxygen, plus video camera - swimming out half a mile and videoing at 195 feet for 25 minutes. I recompress while swimming back underwater. Not bad for a 66 year old. I had a new girl friend and so made love at least once a day in Bonaire! I enjoy diving too! Walk every morning, slowly increasing the time and speed. Start with half a mile and chart your progress. I can remember that after the walks I would feel ninety years old, lie down on the bed and sleep. A by-pass is one of the most major operations you can have and recovery is a real bastard.***

***In about a month when your chest muscles are better start swimming. I started scuba diving about six months later. I soon discovered I was not as fit as I thought and was tired by the sun. It took nine months of exercise to bring myself back to a high peak of physical fitness. If you do; give up smoking, heavy drinking as I did. Change your diet. Oat meal and 2% low milk in the morning, salad and soup at lunch, avoid fatty meats, lower your cholesterol. Above all exercise. I do 1000m of hard swimming daily.***

***My cousin lives in Rotorua in NZ, and he also has a heart problem which he has cured with Chelation therapy. I understand there is a Chelation clinic in Broderic Road in Wellington if you are interested. I understand they do have good results.***

***Yours till the seas go dry:***

***George D Mann***  
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I did go to the Aquatic Centre in Wellington after my operation to exercise - but the staff were very unhappy about me swimming there, I guess they thought they would be in trouble if I died in the pool; and they more or less told me not to come back. In New Zealand today we do have problems with the political correctness of almost everything. Needless to say I've never been back to do my 1000 meters training per day, but at least in Wellington we do have the sea - it's all around us; and nobody can stop me getting in there!

## **THE ADVENTURE CONTINUES... WEEKLY UPDATES:**

### **GETTING STRONGER:**

I've decided to do a weekly update of progress and will add comments I think may be of interest each Wednesday, the weekly anniversary of the operation.

### **GENERAL COMMENTS:**

I'm convinced the mind is the most important part to maintain control over. With writing down my thoughts and feelings I have managed to avoid doubts and depressions.

The people, friends and family around have a huge influence on helping you to keep buoyant and focused on recovery. Their expressions of admiration at any achievements will prevent depression and encourage greater effort. Expressions of admiration at your speedy recovery, coupled with the advice to not overdo it can also be encouraging and positive.

The patient is living in a very emotional state during these times and the most positive and cheerful person can easily be changed into a depressed state if not encouraged and advised sensitively.

I have set my own agenda, after reading and being told the recommended best way to recover, I've added to it with strengths and assets unique to me. This is a big decision to deviate from the well trodden track and to have the initiative to take short cuts known only to yourself. Any insensitive criticism can strip the strength and direction from an otherwise strong and fast healing person.

An example:- a week ago, and one day out of hospital, I attended dance lessons, just to watch, but took gently to the floor to see if I could do it. It flowed, it felt wonderful and I completed a routine leaving me with a feeling of elation.

Comments I fielded several days later telling me I had looked dreadful and grey were like a punch below the belt and that elation turned into severe self doubt and for some hours created a semi-depressed state. Here I was deviating from the "Recovering from a By-Pass Operation" chapter of the official medical rule book and was ending up looking "grey and dreadful."

It takes some rethinking to regain the confidence that the best and most knowledgeable person about my feelings, health and body is ME!

I reread my previous report and find the recovery is still remarkable according to all other reports I've heard and the confidence returns.

We went to town and met daughter Janice for lunch, I wore long trousers for the first time since my walk to the X-ray dept and they were like sandpaper, very painful on the leg wound. I've discovered the most comfortable and painless trouser wear is brief underpants then satin boxer shorts with a warmer pair of shorts on top.

Breathing is still not up to full capacity and I'm thinking of going to the swimming pool to try snorkelling in the dive pool. This should give good lung, breath control, and exercise everything else without over straining damaged areas.

I've noticed I no longer need the 'donkey' (a rope tied to the end of the bed to pull on to sit upright) and last night slept through without a sleeping pill.

The hairs on my chest are beginning to grow and stick out like a crew cut. Firm fitting shirts press the hairs into the chest, it's not sore, but quite uncomfortable. We have just discovered a "Cardiac Rehabilitation Post Cardiac Surgery" programme to aid rehabilitation and I find my own programme is a long way in advance of the recommended. I note on 'week 2', the third week after surgery, one may do one hour per day?? or per week?? of non-stressful paperwork. I would attribute much of my successful recovery to the fact that I have continued to think about what is happening and recording my impressions and responses throughout this period.

**DIARY: Week ending Wednesday 27/8/96 - 3rd week after surgery.**

**GENERAL COMMENTS:**

I now take pain killer pills rarely and only a very occasional 10 MG Temazepam sleeping pill (not the 20 MG as prescribed). I'm sleeping very well. The wounds are now very itchy and regrowing hair is prickly and irritating.

Neck muscles are a little sore and Eddie is recommending I see a chiropractor to have a quick check over. Using the hot tub is still beneficial, but as the major pains have eased the relief of pain is not as spectacular.

**DIARY:**

**21/8/96:** Wednesday and I'm 55 Today! This is the end of the second week after surgery. Morning walk, from the Pass of Branda to Moa Point, 3km. Afternoon walk from Pt Halswell to Miramar Wharf - about 4 km. I think that works out at about 4km per hour.

**22/8/96:** Cold Southerly. We called the Aquatic centre and arranged to have a swim in the dive pool with mask snorkel and fins. I swam about for 15 minutes, dived to the bottom quite a few times (5 M deep) and went to the bottom and swam a width a couple of times (5 M down - 25 M across and 5 M up). Not bad for a cripple! I found breathing near the water has enabled me to get good lungs full of air. Feels good but has left my chest muscles feeling used.

As I left the pool crew were not too happy with me; apparently this is the sort of training a fit person may do! They more or less told me not to come back so in future I'll use the sea!

I have been advised not to over do it! so I called the hospital for clarification on what is 'over do.' There is no answer except if I end up depressed, very tired or with palpitations you are "over doing" it. I'm not! Tonight I went to dance lessons and spent about 25 minutes mainly waltzing, but also a couple of circuits of quickstep.

Tonight a lump at the end of the leg wound opened up and I found a piece of string and pulled about 4 inches (100mm) from the wound and with interest I note there is now a crater where it was a great lump. Again before bed the hot tub relaxed me and I quickly settled for sleep. It is great, I'm sleeping well.

**23/8/96:** Morning walk from Miramar Wharf to Scorching Bay, about 6 km.  
Went out to dinner at Paramatta Boat Club.

**24/8/96:** A morning walk from Kau Bay to Strathmore shops, about 5 km. This evening we went to Chiskas dance at the Rongotai College Hall. Had a good night, danced quite a bit. Waltz, Fox-trot, Viennese Waltz and a couple of rounds of the Quickstep. Arrived home at 11:00pm, hot tub and bed.

**25/8/96:** Morning walk from Kau Bay to Seatoun, about 4 km.

**26/8/96:** Morning walk The Southern Walkway from Signallers Grove. The hills were a bit tough and I exited at Sidlaw St and walked home, took about half an hour.

Tonight we went dancing and practised for about 40 minutes, the Waltz, Tango and English Fox-trot. Good exercise!

**27/8/96:** Southerly wind blowing so walked from Seatoun Wharf to just past Flat Rock - Shelly Bay, about 7km. This afternoon Walked from Seatoun Tunnel home via Cavendish Sq. and Bentinck Ave.

**DIARY:** Week ending Wednesday 4/9/96 - 4th week after surgery

### **GENERAL COMMENTS:**

Walking into the wind, especially a cold one, is not clever. I've learned to go with the wind. The hot tub has been a wonderful aid to recovery, easing sore muscles and massaging wounds in the water jet, but I find I'm not relying on it the same way now and use it only once or twice a day - before bed.

The re-growth of chest hair has become very itchy and causes significant discomfort. Each hair stands out like a switch, and when moved by clothing or what ever it feels like a small pin prick or electrical shock.

Each day I can feel an improvement in body and reduction in pains. I have been sleeping very well without having to use any sleeping pills, nor pain killers.

After effects noted:- Loss of short term memory, or lack of concentration. I some times don't remember some simple thing or don't hear what has been told to me.

Lynne has noted I have sometimes become more intolerant towards others, I'm aware that my whole concentration is focused at getting better and I can easily become frustrated and effect rapid mood swings when everything is not going as I plan. Forewarned, I'm now trying to concentrate on the wider world and am trying to be a little more aware of others around me.

The chest wound that has looked so well healed has opened up at the bottom and over the course of a few days become pussy and a small lump has appeared on the leg scar. I found some thing sticking out of the wounds and on pulling at them discovered they were pieces of thread. I pulled out a piece about four inches (100mm) long from the leg and a smaller piece from the chest. The wounds did not heal up immediately and remained pussy so I went to my local GP and he has taken a swab and given me some anti-biotic pills.

Chelation: George D Mann mentions this as a help, it seems many heart patients find this is a very useful method of removing blockages from arteries, I have not tried it and the medical profession don't seem to recognise it as a proven treatment. Some people swear by it, perhaps I'll think about it in the future.

## **DIARY**

**28/8/96:** Walked from Kau Bay to home in Miramar via Seatoun, about 6 or 7 Km. Chest wounds are very itchy tonight and driving me mad! Chest is still sore when I sneeze or cough, it helps to clutch onto chest when sneezing or coughing. I have used Aloe Vera oil on wounds, but don't know if it has helped.

**29/8/96:** Went to the local school and talked to the kids for an hour and a half about fish and fishing. This evening spent 45 minutes practising dancing, we dance full Gold routines, about 4 Waltz, 5 Tango, 4 Fox-trot, a couple of Viennese Waltz and a couple of Quickstep. A very busy and exercising routine!

**30/8/96:** Walked from Courtenay Place to Point Jerningham and half way back, about 3 Km.

The chest wound looks great, but today it opened at the bottom and some watery looking pus came out.

Had a meal out this evening with Eddie. Eddie had a bypass about 10 years ago and has severe heart damage and cannot be operated on again. It is interesting to note he has been having the Chelation treatment George D Mann speaks about in his FAX. He advises me there are quite a few people having this treatment and they have not advised their Doctors as the Medical profession really don't seem to accept this is a worthwhile treatment. Eddie has also advised I must go to a chiropractor to have my back checked and realigned if required. He will make an appointment for me with Richard Cheyne at Porirua.

**31/8/96:** Walked the Massys Memorial walk. Up to the memorial, over the hill and down into the centre of Kau Bay then back to the car around the coast; not such a long walk but more hilly. I managed very well with little puffing on the steep bits.

Chest is still very itchy and I've squeezed some vitamin E from a capsule onto it. Don't know if this helped or not!

Have cut the hot tub use to twice a day.

Note coughs and sneezes cause a deep pain in the centre of the chest and neck muscle feels quite tight.

**1/9/96:** Took the mountain bike out, very carefully, for a ride. Went to Miramar wharf and back, about 20 minutes, the weather was a bit cold and windy.

Poked about with the leg wound and pulled 4 inches (100mm) of cotton from a lump. Suspect this is the problem with the chest. Tonight I put some ichthammol ointment on with a plaster (in the morning it looked less angry, but still pussy).

**2/9/96:** Took the bike around the Peninsular, took about 45 minutes and I was pleased to get home, but recovered in the afternoon and rode over to Breaker Bay and back. The chest problem looks a lot better but hasn't gone away.

**3/9/96:** Frustrating day! Everything didn't go as I'd planned and I found my humour was not good. Lynne tried to help me on the computer and I couldn't accept the help! I took the bike around the coast a bit quicker than yesterday and eased the frustrations, I note the ride was easier although it was windier and physically I felt very well!

Went to see John (GP) and got some antibiotic for the chest wound.

Some one from the follow up cardiac care rang me today, it's a bit late for that, I'm all but better now. She will come and see me next week.

**DIARY:** Week ending Wednesday 11th Sept:- 4<sup>th</sup> week after surgery

**GENERAL COMMENTS:**

The joy of being able to drive the car again is great!

It has become tolerable to wear long trousers again, up 'til now I've been wearing shorts.

Chiropractors; I can not understand why the Medical people have not recommended attending a chiropractor! I have been "put back together very well" but a few sessions have relieved the back pains I have suffered since the operation and the massage of lesions in the wounds has made the leg wound in particular very free and broken down the scar tissue. I would recommend this as an important recuperation aid.

**DIARY**

**4/9/96:** Drive! I can drive my car again! I've been all over the place, including Paraparaumu. Not much other exercise.

**5/9/96:** Wore longs again today, they are not as comfortable as shorts and still rub. Had a dance practice for a solid 30 minutes and got a good sweat up, this dance is really very good exercise. The chest wound is still pussy.

**6/9/96:** Visit to Richard Cheyne Chiropractor. He has given me a very thorough check over and taken X-rays. He seems to think I am in fairly good condition but there is a kink in my back, I can feel it and he put his finger right onto it. I have an appointment to come back on Monday.

12 Noon appointment at Wakefield to see Dr John Reardon. More X-rays, he checked me out and has given me the all clear. I can go to work on the 18/9/96 and am OK for air travel and can go to Russia. He has given me a Dr's certificate for that.

**7/9/96:** A quiet day and I slept a bit. Not too much exercise. Went to a show at the Opera House tonight.

**8/9/96:** Walked the Southern walkway from Signallers Grove along the walking track to Terakina Bay and then around the coast road to Breaker Bay. This was very easy today, and is the walk I aborted because it was too tough on 26/8/96. In the afternoon walked along the beach at Raumati to Paraparaumu and back.

**9/9/96:** Chiropractor, on the x-rays I can see the back bone where it is out of line. Richard gave me quite a work out including a strong massage of the chest wound and I do feel better for it.

Tonight we spent about 45 minutes solid dance practice. Very steady exercise.

**10/9/96:** The chest wound persists in leaking, there is now quite a deep hole and I've managed to get some bits and pieces of string out of it, at least it is no longer an angry red colour. I must note that as each day goes by the aches and pains are getting less and there is a sign of relief in the back pains since it was worked on yesterday.

**11/9/96:** Back to the Chiropractor again, some work out, he gave my leg wound a very deep massage to "release lesions". It hurt like Hell, but has freed up the leg wound significantly. I'm supposed to continue to massage it myself to prevent the scar tissue from binding up.

Today I had my first visit from the cardiac nurse. It is a little late to see her as I feel I'm almost back up to speed, it would have been helpful to have had her visit a couple of weeks ago. The discussion we had was helpful, if a little late.

**DIARY: Week ending Wednesday 18th Sept:- 5<sup>th</sup> week after surgery.**

### **GENERAL COMMENTS:**

The book says it is OK to go fishing! Eddie called and we went across to the South Island from Paramatta. The crossing is about 30 Km of quite rough sea. There was quite a big swell running and it took an hour and a half to get there. We fished in very rough conditions for three hours during which time I winched in quite a few fish. That is hard work! Then we bashed our way home again through more heavy seas. I don't think this is exactly what the "How to recuperate after heart surgery" book means when they say "It is now OK to go fishing in someone else's boat." At the end of the day I went home with a sore back and felt quite stuffed!

Next day I felt dizzy; could this be because I had "over done" it?

I checked it out with my Doctor, he found everything was OK and confirmed my suspicions when he told me "you have just over done things a bit".

I've now noticed that when coughing or sneezing the pains are significantly less, there is still some pain, but no need to clutch at my chest at every cough.

Mental astuteness is beginning to return and I have more interest in returning to work and less concentration on health and efforts to exercise; the body is feeling quite good and I'm looking forward to flying out to Sakhalin Island - Russia on Friday the 20/9/96.

## DIARY

**12/9/96:** Eddie called, the weather report is good, we'll go fishing. I met him at Paramatta and we headed off to the South Island. A rolling swell made the trip a little sloppy. We fished in a rip tide for 3 hours, very exhausting keeping a balance and pulling in fish. The trip home was quite rough, the wind had come up and there was significant rip tide. We bashed our way home across the Cook Strait! The book says it is OK to now go fishing in some one else's boat - I think they mean to sit quietly in a placid lake, I don't think our type of fishing trips would be recommended after major surgery!

This evening we had half an hour dance practice and after the fishing trip I didn't concentrate too well and was very happy to get home and into the hot tub, and into bed.

**13/9/96:** On awaking I felt quite dizzy with a sore back. Went to the Doctor to check it out. "Have you been over doing it?" he asked.

"Who Me?"

Looks like dizziness can be a result of going for it a little bit hard.

I went to the Chiropractor again; Richard's daughter attended me today as he is at a seminar. She remarked on my chest scar, she recognises the work of individual surgeons and her comment is that in her opinion Dr John Reardon makes the neatest job of chest sewing in town!

I commented on the scar massage, and told her how well it had worked. She said that some times, if left for a year or eighteen months, the scar lesions become very difficult to remove.

*NB. When I arrived in Russia a few weeks later a couple of nurses saw the scar when I was at a beach fishing for prawns, they were very impressed!*

*"We sew up ours patients like a potato sack," they joked as they demonstrated their technique, sewing in great loops.*

Why didn't the health professionals advise me about the benefits of chiropractic help I wonder? When I asked they told me the operation was very expensive already and they didn't want me to worry about spending any more!

**14/9/96:** Wet and windy, no outdoor exercise today! Note no back pain and all other pains are almost gone.

**15/9/96:** Walked along the Southern walkway, massaged the leg and chest wound, the scar tissue is now quite well broken up.

**16/9/96:** Chiropractor this morning. Have suffered no pain over the weekend and his work is just to do some muscle tuning.

Have done a few chores around the place, the hot tub needed some maintenance so have been busy. Danced tonight a solid 30 minutes.

**17/9/96: BACK TO WORK!** Busy day, back to the world of work and stress.

18/9/96: Back to the Chiropractor, he remarked again my surgeon has made a good job of reassembling me, it has all straightened out OK and there is now only a bit of fine tuning work to do.

Have been to work today for a short time, and contacted most of my clients, it appears my staff have handled every thing very well and every one is very happy. Makes you feel a little redundant!

I must report the aches and pains are now all very minor. Lynne has packed my suitcase, and I find I can lift it with out too much difficulty. The trip is ON, I leave on Friday 20/9/96 and I feel confident and well capable of going!

I don't believe there will be any further reports from me, the job is done, the body is responding and there are more important things to do, interesting places to visit, fish to catch etc.

Good Luck.

## DIARY NOTE FROM NOVEMBER 1996:

**20/11/96:** Sixteen weeks from operation day! That is four months. The trip to Russia was fantastic: I arrived there six weeks and a few days after the surgery. The trip was another brilliant experience (this was my 6th visit) and although I must admit I did feel weary and tired at the end of each day, this did not prevent me from going salmon fishing (and avoiding the wild bears) and being on beach duty cooking, while my driver and a couple of his mates waded into the sea and netted buckets of prawns.

On the beach a couple of attractive Russian ladies sat admiring my legs, which was very flattering until I discovered they were nurses and not admiring the legs, but the healed wound. They gave me the thumbs up "very good job" they indicated as they admired the scar and proceeded to show me how their Doctors would have sewn it up - like a sack of potatoes!

The travel was relatively stress free, except three tins of acrylic paint I'd packed which had their lids pop off in the hold of an aeroplane and as a result redecorated much of the hold and several suitcases (*but that is a small part of another very long and different adventure, if anyone is interested in that story; contact me*).

Back home at work in New Zealand I found my body offered no pain of any description, but I still have some short term memory lapses, or perhaps I'm just not paying attention as well as I should. It seems to be much better now, and I'm probably no more absent minded now than I was before the operation.

After work I often feel tired and some times will flop onto the bed and sleep for between fifteen to forty five minutes, after that I'm OK again until about midnight. I do find my sleep pattern is still a little changed and I often awake after about four hours sleep and can have difficulty nodding off again. While in Russia if I awoke in the night I did take a half sleeping pill (10mg) to ensure I got a full night sleep, but back at home I do not take them at all.

I must admit to being less tolerant, when things don't go the way I planned them, or when someone disagrees with me in any way other than very sensitively, the fuse is set very short. Eddie had warned me, and it is helpful to know so that at least you can try to walk away from any conflict situations. Avoid conflict, it is not worth the stress!

Keep up the exercise! But the weather has been absolute crap! Wind and rain, and going out and walking or doing any thing outside is very unpleasant, it is so easy to sit in front of the idiot box.

I've been out diving quite a few times, the weather has been very windy and the water dirty, but I've still managed some scuba dives and have taken a few underwater photos and gathered a few crayfish. I've found snorkel diving to collect paua and spear a few butter fish has been more energetic and with deep breathing expanding the chest I can feel a healthy pain and am reminded that Dr John had been at it with his skill saw not that long ago.

## **DIARY NOTE FROM FEBRUARY 1998:**

I've just run into Punishing Polly. She tells me my notes above have been offered to most patients either just as they are about to go into surgery, or a few days out of surgery. She tells me that after reading it many people have been comforted and have felt better about the challenge ahead.

To me this is a great complement to learn the record of my experience can help others.

BUT:- Very sad -some one has run off with the hospital copy and they would like a couple more! And it is my pleasure to replace it.

It's now 18 months since my operation:-

In March 1997, just over six months after the operation, I went on a two week diving expedition to Whakatane and Tauranga. From these ports I daily pounded many miles out to sea in my small aluminium runabout and dived some fantastic areas. These included White island, Whale Island, the Raurimu group, Astrolab Reef and the Penguin Shoals. My old dive buddy, Willie Bullock, one of the very best divers in the country, came along with me and I was delighted to find I was able to keep up with him snorkelling deep water and spearing some mighty big kingfish. I also kept Mr Fuji happy by using goodness only knows how many rolls of film taking underwater photos. Isn't life a beach?

I remember asking the Doctor before this operation, if I would be able to race a mountain bike after the by-pass. He couldn't see a problem. I've been over the Rimutaka Incline countless times, but since the operation find I'm still the slowest person on two wheels! (just like I always was!).

So, what next? We have been invited to visit friends in Moscow and the next serious plan is to go and explore Moscow in about August '98.

To cap off - until now, for the past year or more I've never given the surgery a second thought. I'm just getting on with living, and it's a ball.

**Post Script 11<sup>th</sup> March 2001;** I had chest pain in the middle of the night. I've never had angina, so don't know what that feels like and we raced into the hospital. Safely on the hospital bed and sucking on oxygen, I had a small heart attack. A stress test revealed nothing, but again the angiogram found a blocked artery. They slipped in a stent, the artery blockage was cleared and within a week or so I was back in the sea diving again.

## **A FEW WORDS ABOUT THE HOME CAREGIVERS:**

February 1997 and I am rapt and delighted to find Wakefield Hospital has been showing this diary to some of their heart patients and the feed back I've received indicates many are gaining some comfort and inspiration from it, as I did from George D Mann's wonderful FAX. Feed back has come from various sources, Nurses, Doctors, my chiropractor and from the friends of patients recently fixed up at Wakefield Hospital, - but interestingly enough I've received no direct feed back from any of the patients!

Although I feel I've now returned to full health and vigour and have put the period of pains and convalescence from my mind this feedback does excite me and I must say it is very satisfying to find my writing can offer some comfort to others undergoing the same adventure.

But in talking to people I find the mental pain and stress affects the family and home caregivers as much or even more than the patient and I've asked several families for their comments.

***To The Spouses and the Families. May God Bless them all:  
And from me to Lynne and my family – thanks.***

Almost six months down the track and I'm learning more about this whole illness. Don't we feel sorry for the poor patient? Cut and sore he needs constant attention and nursing, he must take it easy and not over do it. The family must make allowances for this poor father of the family (where is this equality of the sexes? How come it seems to be always the men who get this damned problem?). Back home they tip toe quietly around the place, careful not to disturb him. Particular allowances must be made for his unreliable memory, and his shortness of patience. I've seen whole families change their lives to help these poor crippled sick people.

Some bypass patients seem to believe they have only received a stay of execution and must put a bag over their head and spend the rest of their life wrapped in cotton wool where they can be waited on hand and foot.

But! I'm here to tell you if you believe that, you are mistaken! The patient is NOT sick! He is injured, cut, physically damaged a bit. But that is all now healing and he will soon be in much better condition than he was before the operation.

My youngest daughter Janice appeared happy and relaxed when she visited me in the hospital. However she later admitted to me that throughout this time and particularly prior to the operation she was really very upset and uptight. But because every time she saw me my mood was always positive, my outlook gave her confidence and she was able to stay relaxed and positive whenever she visited me. This in turn helped keep me to remain strong and focused.

On returning home after the operation Lynne found I was far from back to normal! In bed at night she was afraid to move lest she hurt me. When I awoke at antisocial times in the night she would awake also. The result of this caused her great stress, loss of sleep and we soon found she was feeling more tired and distressed than me! So when I left for my work in Russia she received the break she needed to get her sleep pattern back and pull her life back together.

## **FROM A CAREGIVERS POINT OF VIEW:**

The patient is not the only one who gets stressed and suffers through this life saving operation.

Because of the interest in my diary notes Lynne and I have visited several others in their recovery stages and we have made an attempt to continue to record the recovery details and some problems arising from the home caregivers and their families point of view.

**SO WE TALK ABOUT THE POOR SORE PATIENT;**

**BUT WHAT ABOUT THE CAREGIVERS? DO THEY SUFFER?**

**THEY SURE DO!      AND WHO NOTICES?**

**LYNNE TALKS TO OTHER CAREGIVERS - AND THEY COMPARE NOTES.**

## **HERE IS LYNNE'S POINT OF VIEW:**

Four days notice! That's when it started and they were four long days to wait before Rob could receive a life saving operation.

We had tickets to attend the Scottish Ball on the Saturday night.

"Do you think I should go?" Rob asked.

Scottish dances are very energetic, and often done in groups, and once the group has started dancing the only excuse to get off the floor is for the music to stop - or to have a coronary on the floor!

I thought about it, "We'll give it a miss," I decided.

Those four days were the longest we had ever waited. Rob was uptight and restless, keen to get this problem fixed but not able to concentrate on anything. Each night he slept restlessly tossing and turning he destroyed the little sleep I was managing to get.

During that time I also had problems getting to sleep. After all, Rob was going into a serious operation and although I was aware by-pass operations have an incredibly good success rate, the thought that my husband, friend, lover, and I guess the primary income earner of our team for over thirty years may go into an operation and not wake up after it, gave me and daughters Sandra and Janice, a great deal of stress to deal with.

## **PATIENT RISK:**

On the big day and just prior to the operation the Registrar came in to advise there was a risk, albeit very small, of not surviving the operation. Rob did want to know nor even think about this, but it didn't affect me too badly as we had spoken to numerous people in the past and were aware the risk was very small. The fact that my poor brother in law, Graham had found out that he needed this operation and although it was programmed to be done within the week he had tragically passed

away while awaiting made me realise the importance of getting it underway as urgently as possible.

Mrs P told me later that when she received the registrars warning it had affected her very badly. They had waited for about 15 months for the operation day to arrive and she said when she was reminded that there was a risk and that he could die on the operating table she felt as if she had been kicked in the stomach. This added to the stress and when Mr P was wheeled into the operating theatre the wait for his return was interminable.

She told me, "that warning certainly gave me little comfort, and the fear and stress while he was in there was certainly higher than it needed to be".

Mrs J read my first draft of this report and added some very constructive comments. She looked at the hospital advise from a very different and much more positive perspective than we had. She was already well aware there was a risk, after all there is a risk with very insignificant operations, and when advised of how very small it was she was indeed comforted. This is a very sensible way to look at it as the risk is indeed very small for the miracle of being able to not only to extend a life, but also to restore it to a high quality of living.

**Perhaps it is in the way the warning is put that is important.**

After all we all know being alive is a risk, there is risk involved getting out of bed each morning, and a bigger risk driving to work and an even greater one crossing the road, so I wonder if the wording of the warning should be looked into, to comfort rather than alarm the people involved. After all if the job wasn't done, or done in time, look at what happened to brother Graham! So where is the greatest risk?

**AWAITING SURGERY:**

Most of the people I spoke to had waited many many months for the operation and after hearing of their apprehensions and stresses our four days wait seemed very trivial indeed and now we really appreciate the urgent attention Rob received.

"Mr P had a heart attack about 15 months before surgery and that waiting time was terrible," said Mrs P. "He was afraid to do too much and as a result his physical condition deteriorated and he went into the operation rather run down physically and mentally".

When I met them Mr P was four weeks out of surgery and was looking and feeling good. He and his wife obviously pulled together and if there was any significant depression, neither showed it.

An interesting observation they did make was, "recovering from his heart attack had been much more difficult than recovering from his by-pass surgery".

Mr J also waited 15 months for the operation.

"This was a terrible time," said Mrs J, "Much too long to wait, Mr J would not dare to do anything too energetic and withdrew into his shell. At home he passed the time sitting in front of the TV or reading books and the news papers. He was morose and

barely spoke to me or the kids. I feel angry now to remember this long painful wait. Over this period he lost a great deal of his zest for living."

### **IN THE INTENSIVE CARE RECOVERY ROOM:**

Once the operation had been completed we were permitted into the hallowed ground of the intensive care area. Rob was unconscious and looked dreadful, but we had been warned about that. He was breathing, steadily and regularly, and they told me it was a machine doing the work.

"He's doing very well," the nurses advised.

It was all very reassuring. We returned about 4 hours later, the breathing assisting machine had been turned off and he was now breathing unaided. In the next cubicle the first patient of the day was awake and we heard him talking. This was all very comforting and I went home and that night I slept soundly, confident all would be fine.

Mrs J was delighted to get into the intensive care area and see for herself that all was OK.

She had been advised he would look pale and grey but it looked worse than she had expected and she reported, "it was a real shock and I just felt stunned." Mr J looked pale and fragile and the breathing pump was still in use.

"The nurse said 'we are just about to switch off the oxygen and we'll see if he can manage' and when they switched it off everything stopped. He didn't breath and went a terrible deathly colour and I had real fear that he was going to die. But after what seemed to me an eternity of time he made several pathetically small erratic breaths then he began to breath again. That was very scary!"

### **HOSPITAL, HOSPITALITY AND SUPPORT:**

I got great support from the Hospital staff, even down to cups of tea when visiting. With the exception of being told of the risk of the patient dying under the knife just before the operation, everyone I spoke to was very pleased and reassured by the information and support they received from hospital staff, both in Wellington and Wakefield Hospitals. Phone calls requesting information and briefings before and after the operation were all very helpful and supportive.

The hospitals in Wellington all give wonderful support to the relatives. Mrs J reports that over the first night she worried and called three times during the night. Each time she was immediately put in touch with his personal nurse.

"They were wonderful".

Everyone we have spoken to have made similar comments.

## **OTHER VALUABLE SUPPORT:**

Others who have been through the operation are the best support of all! They have been there, done that and have the matching scars to prove it. These people are the real role models. Their families have already been through the worries and stress's and from them can be learned that the problems are not unique to you alone. Healing patients can get to be very frustrating (if not obnoxious) from time to time; and it is reassuring to know it's part of the process in getting back to normal. And everyone goes through it! The most important thing to learn from these people is how well the patient can recover. Rob has friends who had been in quite a bad way before their operation, even having difficulty with activities using low energy output such as walking. They have returned to activities as active as competitive squash, tennis and deer hunting! (not to mention Robs favourite role model - 66 year old George Mann).

The Wellington Hospital runs a weekly coronary patients rehabilitation class. Here people who have suffered heart attacks or are recovering from surgery can meet and compare notes. Some find this very beneficial and motivating.

Although Rob found the hospital videos on recovery slow and boring others have found them very worthwhile, helpful and informative. But Rob has been very fortunate to have received motivation from several friends who have recovered from various stages of disability who are now living and enjoying very active lives. These people have been very caring and sharing and buoyed by their enthusiastic support he follows along in their footsteps. It must be remembered that the longer the wait for the operation, or if there has been a heart attack causing heart damage, then the longer the recovery time can be expected to be.

Never hesitate to contact someone who has been through this operation; everyone we have met has been more than delighted to share their experiences and offer support and encouragement.

## **SHORT TERM MEMORY LOSS: It Drives Caregivers Crazy!**

Short term memory loss! I sell real estate and once Rob settled in at home I resumed my work and appointments. This work allowed me to cruise home in between jobs and keep an eye on him. It was good to get out and about again and should he need any thing the mobile phone was always there for him to call me. Each morning before I went out I'd tell Rob where I'd be during the day and at what time he could expect me to be back home. This information he promptly forgot!

Often within about five minutes he would come to me and ask, "what's on your agenda today?"

We had been warned there would be short term memory loss and there certainly was, and from my point of view this was incredibly frustrating! I swear he often asked me the same question as many as three or four times within half an hour. And he did hear what I'd told him!

I think if I went through this again I'd use a white board to write down a list of the day to day things for him. I have found I am not alone with my frustration of the short term memory. Every caregiver I have spoken to has experienced this same problem.

For example, I'd say, "I'm going to the Supermarket and will be back in an hour!"

"OK."

"Did you hear what I said?"

"Yes, you're going to the Supermarket and will be back in an hour."

In an hour's time I arrive home and he asks, "where have you been?"

This sort of thing drives me and all others I've spoken to, nuts!

### **MOOD SWINGS:**

The day before Rob was due to leave the hospital and come home his business partner, Eddie warned us;

"This operation leaves you easily frustrated and makes you grumpy! If things don't go right, the Adrenaline can flood through your body and you can get very angry - very quickly."

He warned me, "when I was first able to drive someone cut me off at an intersection and like a flash I fizzed and was ready to go and punch his lights out. This was Crazy, here I was still stitched up and weak as a baby and that guy was about seven feet tall, covered with tattoos and had a gang patch on his back. You both should be aware this can happen."

This was very valuable information for us and we were both able to look out for these adrenaline surges and defuse them. It really is very important for both patient and caregiver to be aware this occurs so both can make allowances until his system returns to normal.

An example Mr J told me about was when he was leaving hospital. He was packed and ready to go and sat impatiently waiting for Mrs J to collect him. Unbeknown to him she was running a few minutes late and got caught in early morning work traffic causing her to arrive half an hour late to collect him.

"I was fuming," he told me "and unreasonably angry."

This did not lead to the happy relaxed home coming it should have been and the comment must be made, if they had both been aware that this anger can unreasonably flare up, both would have made allowances and helped to defuse this unhappy home coming. Time reduces the adrenaline / anger rush, but can still be present many months and maybe years down the track.

**RECOVERING AT HOME: "Take it Easy" Please describe 'over do it.'**

Rob is a typical 'A' personality. Always on the go, never slows down and lives life to the maximum.

He was very active in the hospital and when he left for home was instructed, "take it easy and be careful not to over do it".

This was very difficult! He took off determined to get himself fit for his keenly anticipated trip to Russia.

"I'll get some hand cuffs and cuff you to the bed," I threatened.

"Promises, promises," his flippant answer, and he kept resolutely to pushing his recovery.

I worried about what would happen if he 'over did it' and made enquiries from everyone who was prepared to listen to me but no-one seemed to be able to give a clear answer of what 'over doing it' was.

Would his chest open up? Or the grafts fall out of the arteries and flood his lungs with blood? Or what??

The best answer appears to be if you get tired or sore, stop! However, I did learn:

- 1 His chest won't split open, it's wired together.
- 2 His grafts won't fall out, they are sewn in.
- 3 His head won't fall off!

But:-

- 1 He may become very tired.
- 2 He may become depressed.
- 3 He may get the shakes.
- 4 He may get grumpy.

And he did; look at his entry on 13/9/96 - Dizzy with a sore back.

A later explanation we both could understand was, "the heart is like a finely tuned car. When you have this operation the tuning goes a bit out of kilter and it will take some time to bring itself back to normal".

In Robs case he was quite well recovered in about six to eight weeks, but everyone is different and especially if there is damage to the heart due to a previous heart attack, or after a long inactive wait the body will become physically run down and it is not unreasonable to expect full recovery to take significantly longer.

As a guide the patient (and caregiver) should be aware that the patient is his own best judge of what his limit is and how much he can or cannot do. Be guided by pain, if it hurts very much, stop! Strive as hard as you wish, but just don't be silly about it.

**What the patient DOES NOT NEED** is friends or family who try to draw limits for him, or to be negative. If friends arrive who talk in a negative manner, - don't invite them back! The quickest way to pull the patient backwards is for someone to tell him "you look awful" or "You can't do that" or "you're stupid to attempt to do the other!"

Rob has a little quote he often trots out when he is behaving like an adolescent - it says:

*"Most people say that as you get old, you have to give things up.  
I think you get old because you give things up."* -Theodore Francis Green.

After a lot of questioning of Doctors, Nurses and other care givers I believe the patient is the best judge of the quickest way to rebuild his strength. Everyone is different and will progress at different rates (never judge yourself by others).

My husband is hyperactive and completely enthusiastic about life. It was very difficult to try to slow him down. But I now understand I did not need to. He was, and still is, the best judge of how to pace himself and how much he can push his own body. On the one occasion when he did over do it he became very tired and his body slowed him down until he slept. Fortunately he never did 'over do it' to the extent of going into any depressed state.

Others I have spoken to had a similar initial reaction as me, they told their patient to take it easy, and not to overdo it. Some patients seem to have taken this literally and after months or even years are still 'taking it easy' believing they are doomed to a lacklustre, unlively, geriatric type of existence.

But this can go the other way too, and when speaking to Mrs McC she told me about a friend of her husband who had followed the recovery plan to the letter but he was not strong enough to handle the pace, and had ended up by doing more than his body was capable of and they carted him back to hospital in an ambulance.

There is little doubt the need for the operation reminds every one they are not immortal, and this does have an effect on the patient, but Rob was quick to work out we are here now and this operation offers an extension of life with no lowering of the quality of life. In fact in most cases the quality of life can be significantly improved!

Rob's motto's "**don't worry, be happy**", "**grasp the moment**" and "**do it now!**"

### **ONE LITTLE LIFE QUALITY BONUS:**

Some men report a bonus! A couple of chaps Rob spoke to had waited many months for their operations. He told me of a comment they had both made to him of how hard it was for them soon after the operation.

I bit, "what do you mean it was hard?" I asked. "I mean," he said patiently, "It was as hard as a rock, as in erect! Think about it - all that extra blood pounding around their system had to go somewhere. Pumped It up very nicely erect for them. The guys were delighted about that, and their wives were impressed too - or so they told me!"

### **SLEEPING TOGETHER:**

Most people I spoke to were cleverer than I. With their patient safely home they slept their first few nights (or weeks of nights) in separate beds and often different rooms. Rob wanted to cuddle up. But his body was tender and sensitive. A tender sensitive man, isn't that every woman's dream man? No! It was not that sort of tender, he was fragile type tender and I was afraid to touch him in the night for fear of hurting his wounds, his leg in particular was very 'sensitive and tender'. So I lay still and unmoving and had difficulty getting to sleep. Then, when I did get to sleep he would wake up. His sleep pattern was to sleep a maximum of three hours at a time, and it was not until he returned from Russia about ten weeks after the operation that he began to sleep the whole night through and by then his tenderness and sensitivity had returned to normal.

### **COPING AT HOME:**

I coped very well while Rob was in hospital and remained strong and supportive, but when he arrived home and I saw that he was coping and on top of it all, I relaxed; and the stress of it all caught up with me and I fell into a semi-depressed state for a couple of days. Then a negative comment someone made to him pulled him down and without my support he also fell into a depressed mood. It required several hours of hard work discussing and communicating before we managed to pull our selves back on track - optimistic and happy.

### **DOWN THE TRACK: The REAL Cure!**

By going to work in Russia just 6 weeks after this operation Rob declared himself cured. When he returned home family and friends accepted him as better, cured, and the operation has been put behind us and is mostly forgotten. Four months after the operation Rob had returned to his normal vigour, doing his normal activities, fishing, diving, mountain bike riding, walking and dancing and all with an enhanced zest and enthusiasm for living and enjoying his sports to the same physical level as before the operation. The family make no allowances nor even mention the surgery in any manner other than you may mention an unpleasant visit to the dentist. Inspired by an article he read in Readers Digest he made out a list of "50 things to do before I die" some are very ambitious adventures and others quite trivial goals. I must report one year later he had achieved most of these goals but keeps adding to the list and I believe it is up to about 70 now. Many of the caregivers I've spoken to seem to have sacrificed their own interests to be there and nurse and encourage. Rob tells me many patients he has spoken to **don't want all this attention**.

I sell Real Estate and for relaxation learn and teach Ballroom and Latin American dancing. I did not stop lessons, nor even restricted my dance hours. I did restrict my Real Estate hours for the first month until he was permitted to drive the car again.

Rob is interested in dancing but wants to do about a hundred other things as well. We both get plenty of healthy exercise of mind and body.

We had coffee with Mrs J and after our short talk she recommenced swimming, an activity she has always enjoyed doing, but had put aside to care for her husband. After only a week she reported to me an immediate feeling of stress relief and well being. She is now fitter and stronger both in mind and body and is surprised that it

seems to have had an indirect beneficial effect on her husband and their relationship.

### **THE EFFECT ON CHILDREN:**

Mr D, at age 40 was put into hospital and underwent a triple by-pass. At this time his youngest daughter was aged 7. She was admitted into the intensive care area wearing a gown about four sizes too large for her and it scraped along the floor. She looked like Dopey, one of the seven Dwarves, and the impact on her was traumatic. During a recent counselling session it was discovered that the seven year old child, now well into her teens, had suffered significant stress. Aware that her Dad was sick she had spent many hours worrying about him.

It appears children, not fully aware of the effects of the surgery, being told to 'shush' and "Don't disturb your father, he's not very well" can have a traumatic effect on them. Many children can dwell on what life would be like should their father die. Most recovering patients seem to benefit from being treated not as sick people, but as newly reconditioned and prefer people to realise that once healed will be fitter and healthier than they were before the surgery.

**REMEMBER, THE HEART IS LIKE A FINELY TUNED CAR AND WHEN YOU HAVE THIS OPERATION THE TUNING GOES OUT OF KILTER AND WILL TAKE SOME TIME TO RETUNE IT SELF.**

**THE PATIENT IS THE BEST JUDGE OF HOW TO PACE HIMSELF AND HOW FAR HE CAN PUSH HIS BODY TO RECOVER.**

**DON'T JUDGE YOUR RECOVERY BY OTHERS!**

## CAREGIVERS SUMMARY

### SOME OF THE THINGS CAREGIVERS ARE NOT PREPARED FOR:

- 1. Changes in sleeping patterns:** Rob had a maximum of 3 or 4 hours sleep time.
- 2. Sore eyes:** Rob's eyes got very sore when watching T.V. or working on the computer which further prevented some of the active things he could do while recovering.
- 3. Hallucinations:** Some people report having bad dreams & hallucinations, luckily Rob didn't.
- 4. Coughs:** After the op Rob had a nasty deep cough (I worried about the flu) and the coughing hurt (Eddie split the stitches in his chest while coughing, got blood every where!).
- 5. Sore back:** Rob had a sore back. He thought it was pulled muscles but this went away after several visits to the chiropractor.
- 6. Healing wounds:** Scars, were hard and tight, I was afraid to touch them because they hurt him. The chiropractor vigorously massaged them and broke up the lesions.
- 7. Mood swings:** Usually he was good but sometimes the smallest or most trivial thing could change him and within a minute he could be down in the dumps. The most trivial thing could cause this, as simple as not being able to find his glasses.
- 8. Depression:** On the odd occasions Rob did feel down, it took time, communication and a lot of positive talk to pull him out of it.
- 9. Cold:** Rob got very cold, especially at night and couldn't warm up. The Hot tub worked to warm the body. Perhaps a hot bath or shower will also work. Others reported feeling hot and awoke at night sweating so profusely they needed to change the bed clothes.
- 10. Short term memory lapses:** Rob often asked what I would be doing or where I was going, and within 3 minutes would ask again, and again. Perhaps a note book or white board by the phone would be helpful. He also often forgot where he put things. This did not help his frustrations!
- 11. Pills:** Because of his forgetfulness I worry how others manage with their medication. Rob didn't have to worry as I controlled the medication.
- 12. Sleep:** He would get very tired and needed to sleep often and in short bursts. Probably to do with the healing process.
- 13. Pains:** I slept lightly, afraid to move least I hurt his wounds. His leg caused the most problems. This was the sorest part of the operation. Odd things like re-growing chest hair along side the wound caused unexpected pains.
- 14. Walks:** On his walks a mobile phone proved to be of great value. Insurance if he got into trouble. On the first day he took off for a walk and I couldn't find him. He was OK he knew where he was but I didn't and I worried.  
Don't walk into the wind; While convalescing everyone suffers walking into the wind.
- 15. Leg Swelling:** Others suffered with leg swelling. The hospital provided special surgical stockings to take home (NOTE: These should be worn on long plane flights even if there are no swelling problems).
- 16. Sensitive:** Rob was, and still is, very, very sensitive to comments that people make to him or about him. This is a very common complaint / comment made by most caregivers.

**Note on Anaesthetic:** We have been told it can take up to 18 months for residual anaesthetic to flush completely from a body system. Some people can have side effects from the anaesthetic. Rob has not had any obvious side effects.