

## Surviving Breast Cancer Mistakes and All

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### INTRODUCTION

I was diagnosed with breast cancer and didn't know what to do. Cancer was an unfamiliar topic for me and it was an unknown illness that happened to someone else. Where would I turn for the information, the comfort, and the support that I so desperately needed? I leaned on many people during my battle with cancer and I would like to take this opportunity to thank them. My struggles would have been harder, lonelier, and more uncertain without them in my corner.

To my daughter, Michelle, who visited me every day even though she had a family of her own to take care of and college courses to maintain. She always found the time to drop by and read to me or massage my weakened legs. Her unwavering support was a constant source of strength for her father and for me. Michelle also brought my then two-year-old grandson, Michael, in for visits so that he would not forget who I was—which was very important to me.

To my son, Scott, who visited me in the early morning hours on his way home from work as a deputy with the Sheriff's Department. He worked the midnight shift and, though he was exhausted, he would quietly wait in my room until I woke up. The mornings were our special time together though few words were spoken. Even without communicating, we shared our feelings, our doubts, and our hopes. I was also thankful for the times he brought my granddaughter, Darbee, in for visits. She was born just two months after my diagnosis, and she was always a precious reminder that life continued.

To my brother, John, who brought Mother in to see me as she no longer drove. And for the many meals he delivered to the hospital from his deli when he came to visit so that Michael could have a break from hospital food.

To my brother, Dave, who rarely missed a day visiting me and always found ways to keep my spirits up. And for the laptop computer that he loaned Michael so that he could correspond with the outside world while he stayed with me in the hospital.

To my brother, Tim, for the courage and patience it took to feed me despite my anger and refusals. For him, no challenge was too great. And for the humor he portrayed throughout his many visits no matter what went wrong.

(Was I imagining it or did the nursing staff have a difficult time telling you guys apart when you were wearing your face masks?)

To my sister, Patricia, who dropped by for visits and took dirty clothes home to wash. And for the many card games we played to keep my mind distracted but alert.

To my sister, Jan, who brought homemade meals for Michael to enjoy when John couldn't and for the tasty health drinks she made me to supplement my intake. For the many times she questioned my medical care and helped Michael sort it out.

To my mother, Marjorie, who called everyday (whether I could answer the phone or not) and visited whenever she could. I was always reassured in her presence and felt stronger after her visits. For all of her financial support as well. It helped not having to worry



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about where the additional money would come from when it came time to purchase special clothing, a much-needed wig, or life-enhancing drugs.

In addition, to my family, I want to acknowledge two very special friends from church. To Jody, who assisted me every step of the way as I went through this anguish. She unselfishly called or came by to see how I was doing while offering encouragement and hope. Her knowledge and experience with hospice was a great comfort and resource. I could tell her what I thought and how I felt without being embarrassed. She empowered me when she stated, “There is no such thing as a wrong feeling or a stupid question.” Whatever feelings I experienced were right for me “at that time.” And in being reassured—I could be truthful to myself.

To Sister Maureen, who brought me Holy Communion most every week while I was hospitalized. She knew how much my faith meant to me and was always available to pray with me or to just talk. She encouraged me to record my thoughts and feelings and gave me a journal in which to do so.

To my coworkers, who donated sick time when my hours ran out (it didn’t take long to go through four-hundred-plus hours). To be guaranteed a check each week was one less burden for Michael and me to contend with as the bills piled up. (Too bad there can’t be a time-out on bills while there is a time-out on living.)

To the members of my parish who delivered meals to my home each evening during the first weeks of my recovery.

To the people I didn’t personally know, but who kept me in their prayers. These included a prayer group in Detroit, an Indian prayer lodge in Arizona, and a local Buddhist Temple. I firmly believe in the power of prayer and sincerely appreciate the numerous prayer chains and novenas offered on my behalf. And, to leave no stone unturned, added to this mix of petitions was an Indian power shield that my friend, Nancy, gave me. In Native American culture, a power shield is used to help promote and protect a person’s good health and serenity. I consider all beliefs and intentions worthy of consideration.

Last but not least, I want to thank my husband, Michael. No matter what written words I use to describe all he did for me, it wouldn’t come close to the truth. He was my constant in a world that suddenly changed. He was my provider and my motivator. He literally saved my life, and if not for him, there would be no story. For without him, there would be no me.

These are just some of the ways in which my family, friends, and coworkers offered me their love and support. Their help made all the difference, and I achieved what I did because of them. A strong team is essential in any battle, and cancer is no different.

It is my wish that in reading this story you will find solutions where there are questions, encouragement where there is doubt, and hope where there is hopelessness. You are not alone.

## PROLOGUE

When I am asked to talk about my experience with cancer, I’m never quite sure where the story begins. It seems a lifetime ago that I was fighting for my very existence. Many times I wonder how it all happened. I was forty-eight-years-old and going through life

doing what I considered all the right things to stay healthy. I exercised everyday, ate fruits and vegetables, and had quit smoking for over twenty years. Suddenly this disease overtook me from the inside and it was all I could do to stay ahead of it. It became a struggle just to remain a functioning person. All the daily tasks that I had taken for granted were no longer possible.

Stop for a moment and think about how you would feel if tomorrow you couldn't tie your own shoes or get dressed without help, you could no longer feed yourself or take a drink of water without assistance, but most of all, what if you were unable to walk or communicate? Even after all this time, I can see myself in that wheelchair envying others and wondering if I would ever be normal again. The feeling of desperation I felt every time I couldn't feed myself or sit up on my own was overwhelming. It was a nightmare from which I didn't know if or when I would ever wake up.

This is not a story about right or wrong. It's not a story why I survived and someone else didn't. It's a story about coping with life and what it throws at you. It's about staying on the right path through hardships and disappointments. It's a story about surviving cancer.

I am not in the medical profession and therefore may have some of the terms and descriptions wrong. I am not a mind reader and, therefore, may have misunderstood peoples' true motives and thoughts. But I am the survivor in this story and it's a story I need to tell.

This story was written to help people understand that no matter how hard life's journey has become, it is worth the fight. There were times when I wanted to give in to the exhaustion and the pain; I would feel sorry for myself and want to quit. But then I would be reminded of all I had to live for, such as a husband who counted on me, children who needed me, and grandchildren who deserved to be spoiled. In the end, I ultimately picked myself up and pushed forward again.

This story is also a resource for those who may find themselves traveling a similar path. When I first learned I had cancer, I had no one to turn to. I had only known two people with cancer and neither one talked about it. I wasted a lot of time and energy lost in a maze of confusion. I didn't know where to direct my doubts or my questions. I realized that it was up to me to search for the answers that would help me make the right decisions. I quickly sought out survivors and talked to them about how they handled the nausea, the hair loss, and the emotional turmoil. They taught me that the grief and fear I felt was normal and that someday the panic would dim. I was searching for a reassurance that I could believe in a future with some degree of hope.

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“THE BIOPSY SHOWED A MALIGNANT CANCER”

“The results of your mammogram showed a small cyst on your left breast. Come back in six months,” my doctor said. I was frantic. Deep down, every woman fears those words and I was no different. I could barely breathe as I sat on the examination table letting the words sink in. I was only forty-eight-years-old and I was healthy. There had to be a mistake.

I felt frozen and empty as I heard the news and went into denial mode. I falsely convinced myself that the doctor had to be wrong and there was no reason for worry.

After more discussion, I reluctantly agreed to additional checkups, but I would put any thoughts of cancer and death out of my mind. I would get on with my life as normal and not look back. This thought process was proven correct when my next two mammograms over a twelve-month period showed no change in the cyst. There was no reason to worry.

On May 17, 1999, I went for my next annual checkup which included the mammogram. As my last mammogram had only been eleven months earlier, I wasn't too concerned. This was a routine procedure and would soon be behind me for another year. However, that thought quickly changed when I received a telephone call later that same day from my doctor's office. I was asked to make an appointment as soon as possible with a surgeon to go over the results.

Somehow, I had missed a step. Wasn't I supposed to go in and see the doctor first? Wasn't he supposed to inform me of the findings and offer suggestions? Why was seeing a surgeon suddenly so urgent? As these thoughts ran through my mind, I started questioning the nurse and asked her if the cyst had grown or changed in any way. She explained that she could not give me any information over the phone and I was left with no choice but to make an appointment for my surgeon's earliest availability—two weeks away. As I hung up the phone, the fear started to build and spread like wildfire throughout my body. It was a different feeling from before, more desperate and real. What if something was really wrong and this wasn't another false alarm?

May 17 is also my husband's birthday and we always celebrated with family. Michael and I discussed the doctor's phone call and decided there was no reason for anyone else to worry. Best case scenario, it was another false alarm; at the worst, we would have plenty of time to tell people. Ignoring reality, we agreed to believe that this would be another benign cyst and nothing in our lives would change. In fact, we convinced ourselves that it couldn't be anything else. How could there be a more serious problem when everything was fine just eleven months ago? There was no family history of cancer and I always took care of myself. I was too young and too healthy for cancer.

June 1 found Michael and me at our first meeting with the surgeon. As she explained the need for a biopsy, I questioned why she kept referring to my right breast as the problem. The left breast had the cyst. The surgeon explained that the right breast was the area of concern and the cyst in the left breast was unchanged. This couldn't be, I thought, because cysts don't jump around or grow that quick. I tried to tell her that she had the wrong film and that she needed to talk with someone else about having cancer, not me. But she continued to explain the test results and realization finally sank in. I needed a biopsy.

I fluctuated from thoughts of the biopsy being a waste of time to thoughts of it couldn't be done soon enough. I found it hard to contain the fear that consumed me or the panic that was gaining control of my emotions. Every breath I took was one of desperation. How could anyone possibly understand what I was going through?

On June 15, the biopsy was performed. We arrived early and checked in with the hospital outpatient area. Michael was asked to wait while the staff directed me to a small curtained-off room filled with shiny equipment and unfamiliar faces. I was told to lie on my stomach upon a long, cold metal table. Designed into this table was an open area where I placed my right breast. This hole made it easier for the pathologist and/or his

technician(s) to manipulate my breast and insert a needle to remove a sample of the suspicious tissue. Though it seemed like hours, only a short time had passed before the biopsy was completed, and Michael and I were told to come back the next day.

Within twenty-four hours of the biopsy, we headed back to the hospital and received the results. The moment I saw the pathologist, I sensed something was wrong. He had walked into the room, looked around, and left without saying a word. There was no eye contact or communication of any kind. I felt like a shadow on the wall—invisible and unimportant.

Within a few moments, the pathologist returned with his nurse and asked me to lie on the examining table. He stood by my side and started patting my leg as he informed me the biopsy showed a malignant cancer. From shell-shocked eyes, I frantically looked for Michael but was unable to find him. The news had been delivered so fast that Michael was still behind me and unable to reach my side. We both felt disconnected and alone.

After a brief explanation about the malignancy, the pathologist informed me that he had already talked with my surgeon. An appointment had been made for me to see her the following morning for some baseline tests and to discuss my options. His manner was cold and unemotional. There was no compassion or empathy of any kind. It was business as usual as he abruptly left the room. There was no time for “I’m sorry,” or “Do you have any questions?” As I got off the examining table, I became aware of the silence that hung in the air. I cautiously turned toward Michael and saw that he was in the same state of shock and disbelief that I was. This couldn’t be happening. Someone had made a mistake!

I had driven my own car to the appointment because I had planned to meet Scott for lunch (the report was no big deal, so why interrupt my life, right?). As I drove home, I called Scott to cancel our lunch plans and told him that I just didn’t feel up to it. I was doing okay until he started asking about the biopsy results. I realize that there was no easy way to tell my children that I had a life-threatening illness, but I wish I had waited to tell them both in person. Instead, I started to cry uncontrollably and then blurted out that I had cancer before hanging up on him. He proceeded to call Michelle, and again, the news was delivered over the phone. Soon they were both calling to ask what they could do to help. I explained that I needed time alone and would see them later.

Once I arrived home, Michael greeted me at the front door and said he was going to stay home with me instead of going back to work. I asked him to also give me some time alone so that I could come to terms with having cancer. I knew that I had to face my emotions honestly before I could talk about it with anyone else. After some hesitation, Michael left for work but emphasized that we would get through it together. I knew our love was strong and I could always count on him, but at the same time I felt very isolated and alone. I was filled with an overwhelming sense of dread and desperation as I struggled with the belief that I was going to die. I didn’t see much of a future and prayed that I would be allowed three more years—just three years to get my life in order.

I tried to calm down and get control of my fatalistic thoughts. I knew I needed to think beyond the present moment and believe in a future. I filled the tub with hot water, lit fragrant candles all around the room, and put on some music, something soothing and without words. I went over everything that I had ever been told about cancer and tried to

make sense of it all. I spent most of the afternoon in that bathroom crying, thinking, and crying some more. I still had a difficult time believing that this had happened to me. I had doubts about being strong enough and I didn't know if I wanted to try. I questioned everything I had heard about cancer. If I had to have chemotherapy, how bad were the side effects going to be? Was I going to lose my hair? Would I lose my breast? What lasting effects was all this going to have on me? How I was going to tell my mother and the rest of the family? I saw my life shattered before me and I didn't know how to put the pieces back together. There seemed to be no answers.

**TIPS TO CONSIDER:** Take the time to question your doctor, your surgeon, or your pathologist as you are going through the biopsy and the results. Questions unanswered can cause unnecessary frustration and unwanted baggage. Don't keep quiet with your doubts and confusion. Ask for explanations and help.

Your comfort level is more important than the doctor's; insist on having your support person with you at all times and don't be rushed.

Faith is the realization of what is hoped for

And evidence of things not seen.

—Hebrews 11:1

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## NOTIFICATION

The next morning, Michael and I were back in the surgeon's office. We discussed the benefits of a lumpectomy versus a mastectomy, we learned what happens if the lymph nodes were positive versus negative, and we scheduled the surgery. There were many decisions that had to be made and we suddenly had to rely on someone else's opinion instead of our own. We were the novices with no expertise and no time to research. But what was the rush? Would a couple of weeks really make a difference? Once these basic medical decisions were made, we started dealing with the insurance company to learn what oncologist, radiologist, and/or hospital our insurance allowed.

The next day I had planned to meet with my siblings. In the last few months, we had all started seeing signs of age-related problems with mother and knew steps had to be taken soon. We had scheduled this get-together before my biopsy appointment had even been made and it seemed like fate that I would now use this opportunity to tell everyone about my cancer. Although I had doubts that I was emotionally prepared to discuss this so soon, the time was now—like it or not.

Everyone was there: John, Dave, Tim, Patricia, and Jan. We casually sat on the floor eating pizza and drinking beer. I tried to concentrate on the issues being discussed but not much was sinking in. After a couple of hours, the discussion came to an end and someone asked if we needed to discuss anything else before leaving. I quietly spoke up and stated, "There is one more thing we need to talk about. How are we going to tell Mother that I have breast cancer?" I saw the tears and disbelief on their faces as I shared the news. They all asked what they could do and offered their support. Little did I know how much I would come to rely on their love and support over the next nine months (how appropriate for a new life).

The next order of business was to tell Mother the news (my father had passed in 1997). Michael and I made arrangements to meet my sisters at Mom's house on Saturday, June 19. The plan was to tell Mom I had cancer and what decisions I had made, and then leave Patricia and Jan to handle the questions and the emotions. I knew I wasn't strong enough to deal with any more tears, hers or mine. As I left the house, I heard Mother crying and realized again how thankful I was for my family who was already doing so much.

The following Monday, I informed my workplace of my illness and filled out the necessary paperwork to secure my job under the FMLA. Because cancer is a life-threatening disease, the FMLA (Family Medical Leave Act) would hold my job in case I had to be away from work for an extended period of time. I had no expectations of being away from work and using the FMLA, but it was a necessary precaution in case something went wrong. After all the paperwork was completed, I sought out a friend who worked in the office. I needed to talk to someone who wasn't a family member and someone I didn't have to act for. This was a convenient opportunity. Terry and I didn't talk long however, because I quickly became too emotional. Having cancer was still very hard for me to discuss. I left work knowing that word would soon spread about my illness, but I didn't have the energy to care. I needed to concentrate on what was right for me and what lay ahead, not what was in the past. It was now time to prepare myself for surgery.

**TIPS TO CONSIDER:** Share your insights and feelings with whoever is your support system. Help them to feel important to you and what you are going through. Don't be afraid to ask for assistance.

Put yourself first.

For then you shall forget your misery,  
or recall it like waters that have ebbed away.

Then your life shall be brighter than  
the noonday;  
its gloom shall become as the morning,  
And you shall be secure, because  
there is hope;  
you shall look round you and lie  
down in safety.

—Job 11:16–18

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### COVERING THE BASES

For the next two weeks, my life went on as normal—or at least as normal as I could make it. But no matter what I was doing, I couldn't get the word cancer or death out of my mind. I felt it with every fiber of my being and with every breath I took. The depth of desperation that I felt went beyond words. It was like being in a pit of endless black and



not knowing which way to turn. In the absence of light, it was hard to stay focused on the right path.

One afternoon before surgery, I arranged to have lunch with Scott. I wanted him to share his thoughts and feelings about my cancer and how it was affecting him. I knew he was having a difficult time accepting the news and he was angry. At one point during the lunch, Scott looked at me strangely and asked how I “would ever go to church again because of what God did” to me. I was shocked by this statement and that his thinking had taken that route. It never occurred to me to blame God or that anyone else would. I tried to help Scott understand that cancer happened to me for a reason and I was determined to win. In helping him to accept this belief, I also helped myself.

I had always been an introverted person, and it was very hard for me to ask for advice or assistance. But I knew early on that only a cancer survivor could provide me with the information I needed. I hoped that in learning from their past I guaranteed my future. I forced myself to make uncomfortable calls and attend support-group meetings. I continually strived to reach outside my comfort level and it became easier over time.

My need for knowledge and answers quickly expanded to the Internet and to books. Much of the information was helpful, but distributed between the good was the bad. Some of the material was so disturbing that a feeling of hopelessness would cover me like a heavy blanket that never went away. It was all about complications, hardships, and death. I became so afraid that I wanted to give up before I had even begun. If I was going to survive, I needed information with a positive message. There was enough negativity within me; I did not need to keep reading about it.

I talked openly about my cancer when people asked questions. There was nothing to be silent or ashamed about. I knew that most people were genuinely concerned and wanted to understand. And the ones who stared at my baldness or made cruel comments were soon ignored. I didn't have time for insensitive people, and what they didn't understand was that someday they could be wearing my shoes. Cancer didn't discriminate.

I explored many possibilities for coping with cancer. I was open to anything that brought me hope. I attended healing Masses and wore a medal of St. Peregrine (the patron saint of cancer) that my sister, Jan, had given me, and I hung a Native American medicine wheel on my wall that my friend, Nancy, gave me. I tried to cover all the bases and provide myself with not only the mental and emotional health but the spiritual as well.

As word got out that I was sick, people started sending me cards and letters of support. At Michael's suggestion, we displayed each card on the dining room table to be read and reread. Soon, the top of the table was covered. I couldn't believe the number of people who cared enough to take the time to send a card and wish me well. Whenever I was in a low mood, I would go into the dining room and read one of the cards, letters, or e-mails. I found encouragement in each message, and many times it was just what I needed to keep going. I was not in this alone!

**TIPS TO CONSIDER:** If you are the friend, family member, or coworker, take the time to send a note. Make it cheerful or funny. You would be surprised at just how much that small gesture could mean.

If you are the survivor, display your messages of love and support wherever you can. Openly remind yourself that you are in people's thoughts and prayers.

Prayer to St. Peregrine

(Patron Saint of Cancer):

O God, in Saint Peregrine You gave us an outstanding example of faith and patience, we humbly ask You that by imitating him and by the help of his prayers, we believe more fully in Your healing help, bear the suffering of this life without wavering, and come with joy to the peace of heaven. We ask this through Jesus Christ Our Lord.

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#### ADJUSTING FROM SURGERY

July 1, 1999, my surgery date finally arrived. I had decided to have a lumpectomy with node biopsy because it was less radical than a mastectomy and I had been assured that the survival rate was the same. I knew I would have to have radiation if I chose the lumpectomy, but I felt that it was an acceptable trade-off. I convinced myself that because a lumpectomy was less invasive, it wasn't as serious.

Michael and I drove to the hospital where we met Michelle. I was so absorbed with conflicting thoughts that my walk became slow and awkward. One minute I would be optimistic and believe everything would be okay and then the next second I would spiral downward and believe my luck had run out. It became difficult just to put one foot in front of the other. I was a bundle of nerves with no immediate relief in sight.

Scott as well as other family members arrived throughout the day to join in the long, tedious wait.

Before going into surgery, I had to have a "wire local." This is where the doctor inserts a very thin wire into the cancerous breast to pinpoint the exact location of the tumor. This procedure helped the surgeon get as close to the tumor as possible and not take any more of the breast than was necessary.

I was back on the same table as when I had the biopsy and the memories were not comforting. My recollection was crowded with images of doom and gloom. Before I knew it, I was given a shot to numb the breast and the procedure began. The pathologist had barely started to place the wire into my breast when the nurse noticed that I was in pain. Everything then stopped in order to administer more drugs.

The second shot did very little to relieve the pain, but there was no choice but to continue. The wire was again slowly inserted into the area of the tumor. At the end of the wire was a tiny metal clip that would be deposited into the affected site once the goal was reached. This clip would appear on a monitor during surgery to direct the surgeon's hands and minimize the guessing. Once this procedure was completed, and before the clip was dropped, I was given a mammogram (on the breast with the inserted wire) to ensure that the wire was where it was supposed to be in relation to the tumor.

Michael, Michelle, and I waited in stony silence for the film to be developed. There were no words to ease the fear. It hung stagnant in the air around us. "I don't think I can go through with this," I said honestly.

The mammogram results brought more bad news. The wire was not as close to the tumor as the doctor desired and he wanted to reinsert it. I repeated to the pathologist what I had said a few moments earlier in the waiting room. "I can't go through that again. It was too painful." He told me that the choice was mine, but the closer he could get—the better for surgery. He promised to give me more drugs to numb the area even further. I reluctantly agreed and the procedure was done a second time. Now it was time for surgery.

I don't remember much as I waited for surgery to begin. But I do remember being surrounded by people, yet feeling alone, and being afraid to get started but wanting it over with. I couldn't see beyond my own curtained-off area, but I could hear other patients being reassured as they were taken to surgery. Soon it was my turn and sleep came easily.

While I was in recovery, the surgeon told my family that all had gone well. We would know the next day if there were any positive lymph nodes (positive lymph nodes would mean that the cancer had spread outside the breast into the lymph system). She reassured them that she was able to get a "clean margin" and believed that she had gotten it all. Everyone felt relieved and thankful.

I was relieved, as well, when I heard the news. The cancer had been caught early and I was going to be fine. There was no reason to think otherwise. I held on to this thought because it kept me in Stage 1, and I wouldn't have to go through chemotherapy. My surgeon had told me that the decision to have chemotherapy or not would be mine if there were no positive lymph nodes. My answer was no.

After I checked out of the hospital, I went home to wait for a phone call that determined my future. The hours stretched by endlessly as Michael and I paced the floor and waited for the phone to ring. It was late afternoon when the surgeon called and informed us that I had positive lymph nodes. I was Stage 2. In an instant, my world changed again.

On July 6, Michael and I again met with the surgeon to see how things had progressed and to have the drain tube removed from the surgical site. Needless to say, I was still in shock. I had walked around in a daze for five days and needed answers. This was my opportunity to ask how all this happened so fast. How could I have a clean mammogram in June of '98 and now have a two-centimeter tumor with positive lymph nodes in May of '99? My surgeon picked up the mammogram film from 1998 and closely reviewed it. She pointed to an area and said, "Here it is, right here." For the first time since my ordeal had begun, I was angry. If the infected area was that obvious, why hadn't the doctor, the pathologist, or whoever read my film caught it in '98? Did they see the cancer and neglect to notify me? If there had been any concern, no matter how slight, couldn't they have monitored the area and ask me come in every six months to check for changes? Someone had carelessly overlooked the cancer and, in doing so, changed my life forever, and I was being forced to deal with their carelessness in a serious, life-threatening way.

A week after surgery, I went back to work and started exercising again. I wanted to stay as healthy as I could to face what was to come. Besides, for my own peace of mind, I needed to get back into a routine and exercising an hour a day was something that I had always done. If I acted normal, maybe my life would be normal.

For quite some time after surgery, it was hard for me to raise my right arm or to reach behind me. This caused getting dressed to be become difficult and my wardrobe to become limited. Nothing could be pulled over the head or fastened in the back. Very few of my clothes buttoned down the front, so I was quickly forced to shop. New clothes used to be fun, but now they became scary and limited. Desperation led to frustration which led to reality. And the reality was that nothing looked right or felt right. Women's clothes were feminine and I felt alien to that concept. I wanted to mask what my body had become, not display it. I soon found myself in the men's department for my purchases and didn't look back.

**TIPS TO CONSIDER:** While waiting for the call after surgery, keep your mind busy. Don't wait around for the results in a growing panic. Occupy your mind with something fun or distracting.

Review your wardrobe prior to surgery to make sure you have appropriate and comfortable clothes to wear. I found loose clothing and soft cotton made me feel better.

Oh Great Spirit,

Whose voice I hear in the wind,

and whose breath gives life to all the world,

Hear me, I am small and weak,

I need your strength and wisdom.

Let me walk in Beauty

and forever behold the red and purple sunset.

Make my ears sharp to hear your voice,

and my hands to respect the things which you have made.

Let me see the lessons which you have hidden in each leaf and rock.

I seek wisdom, not to be greater than my brother or sister,

But to overcome my greatest enemy, myself.

Let me walk a straight path with clean hands,

So that when life fades, like the fading sunset,

My spirit may return to you without shame.

—HOPI PRAYER

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## LIFE BEFORE CHEMOTHERAPY

Two weeks after surgery, I slipped into my first depression. I didn't want to get out of bed and I didn't want to do anything. I walked around the house in a daze, experiencing one emotion after another. It had been less than a month since my diagnosis and I had now succumbed to denial, panic, anger, fear, grief, and depression. What was next?

To get through the day, I focused on a baby shower that I had planned for my son and his wife at our house. My being tired and emotionally spent was no reason to deny them this exciting time. This was a celebration of a new life and it was an important time for so many people. I knew depression was not the answer, but what I told myself and what I managed were two different things. It was a constant fight to stay involved.

On July 14, I met with my oncologist for the first time. Along with Michael and my sister, Jan, who used to be an oncology nurse, we talked about the different protocols. It was decided that I would take Adriamycin and Cytoxan every three weeks for the first four treatments and Taxotere every three weeks for the last four treatments. We discussed the chemotherapy and its possible side effects. I found it difficult to keep my emotions in balance as I listened to what was being said about the hair loss, the nausea, and the exhaustion. I didn't want to appear weak and cry in front of everyone, but it was hard to fake a bravery I didn't feel. Allowing my emotions to run wild didn't help anyone, but I had slowly reached the end of my bravery and needed a release. Besides, wasn't it healthier to vent than to keep everything bottled in?

Before any chemotherapy could be given, I had to complete a MUGA scan which would test my heart to see if I was strong enough to withstand the drugs. This test was scheduled for the very next day.

The machine is totally enclosed and very confining. At first, the technician told Michael that he could not come into the room during the test, but quickly changed his mind after seeing how agitated I had become. Because of my fear of enclosed places, I was allowed to stick my hand out through a small opening on the side. Michael held on tight and quietly talked to me about anything and everything. I concentrated on his words and the procedure was soon completed. My heart passed the test and I was scheduled to start chemotherapy on July 29.

On July 20, just a little over a month from my diagnosis, I attended my first breast cancer support group. A lot of information was presented by nurses who attended and by individuals who shared their stories. But for me, something was missing. I didn't feel part of the group, but like an outsider with nothing in common. These women shared so much and I had only just started.

The next week, I checked with my church to see if they offered any type of cancer support group. They did not, so I kept looking. I eventually found a support group offered by another local church that was open to all types of cancer at all stages. The group offered an atmosphere of faith as well as support. I knew how important the power of prayer would be in the healing process and this group met my needs. Michael and I felt at ease and welcomed from the very start.

I took advantage of the group's bimonthly meetings and learned a lot from the experiences of other survivors. After I learned how traumatic it was for them to watch their hair remain on the pillow after they had gotten out of bed, or how frightening it was when it fell out in chunks after a shower, I made the decision to shave my head. After I learned the need for supplements and extra protein, I planned my diet accordingly. When I learned that ginger tea helped the nausea and peppermint candy helped with the metal taste after the treatments, I incorporated that also. Going to a support group confirmed

that I was not alone with this illness and that any question I had, had already been asked and answered

Later, when things went wrong with my care, I recalled the different comments made by survivors about the care they received from their oncologist. But I had been so busy concentrating on the side effects of cancer that I failed to hear them discuss what they liked or disliked about their oncologist, or maybe I heard them but didn't pay attention.

On July 27, I was once again in the hospital. It was time to have a port placed in my chest to help administer the chemotherapy drugs. These drugs can be very erosive and a port would help in containing any complications. The port looked like a bottle cap that stuck out of my chest. It was a little uncomfortable and a noticeable addition to my body, but I felt having a port was better than getting an IV each time.

With the MUGA test completed and the port inserted, I started chemotherapy on July 29. Between the mental turmoil of receiving chemotherapy for the first time and the prospect of possible physical discomfort, I didn't want the day to start. It was not an easy day. It was a terrifying reality that I couldn't escape. Chemo had started. Had I prepared enough?

Once we checked in, a nurse escorted us to a large room toward the back of the oncologist's office. There was a designated work area in the middle of the room for the nurses and then, surrounding that, in a semi circle, were numerous recliners with an IV stand next to each one. I picked out the closest empty chair and soon the nurse brought over the first two bags to be administered through my port. The first bag was a drug that helped with the nausea and the second bag was the actual chemotherapy drug. Over the next three hours, these drugs slowly dripped into my body with the purpose of killing cancer cells.

Michael and I took our minds off what was happening by reading books and playing games. When I got too tired to concentrate I would listen to soothing music on a tape player that Jan had brought me when she joined us for the first treatment. Being occupied with distracting books, challenging games, and calm music helped pass the time in an otherwise stressful situation.

The treatment room was filled with all types of survivors. There were different cancers in different stages. There were young and old alike. And there were bald people and people with peach fuzz. There was no privacy and no secrets. We were all going through the same thing; yet individually, I'm sure we were all uncomfortable and embarrassed. It wasn't so much that our lives were exposed for all to see but that, in witnessing the suffering of others, we saw ourselves.

**TIPS TO CONSIDER:** Take time to research your choices for oncologists. Your oncologist will become a major player in your quest for survival. Choose wisely. Ask other survivors for their opinion and why they feel that way.

Support groups offer important and vital information. Look for a support group that is right for you and your needs. Take advantage of other survivors' experiences and learn from their hard earned knowledge. (Some things are worth hearing more than once.)

The favors of the Lord are not

exhausted,  
his mercies are not spent;  
They are renewed each morning,  
so great is his faithfulness.  
My portion is the Lord, says my  
soul;  
therefore will I hope in him.  
—Lamentations 3:22–24

6

### COPING WITH SIDE EFFECTS

Chemotherapy kills both cancer cells and healthy cells. Each week, whether I was scheduled for a treatment or not, a lab appointment was made to check my blood counts. Then, when my next treatment arrived, another blood count would verify if I was strong enough to withstand the next bout of drugs. If my blood count was not where it was supposed to be, my next treatment would be delayed. It was hard to sit and wait for my turn while worrying if my count was high enough and hoping that there would be no delay. The last thing I wanted was to be sent home.

I always scheduled my chemotherapy for a Thursday afternoon and took the following Friday off. A survivor once said that this was how she arranged her treatments in order to have three full days to recuperate before going back to work. It sounded like good advice and I found it worked well for me also. By Monday, though, my stomach was still queasy, I wasn't as exhausted, and while it was always a relief to have a treatment behind me, it didn't keep me from worrying about the next one. I was in a constant state of terror and despair.

I had heard that the nausea from chemotherapy usually started as early as the day after treatment, so I always tried to eat a good meal before my appetite lessened. As recommended, I also increased my protein level and stayed away from unpeeled fruits and vegetables. There were many days I ate very little. I was often too tired to eat and food just didn't sound good. The day after chemotherapy, all I usually did was lie on the couch and pray for my strength to return. I remember one afternoon being so weak that I couldn't even muster enough energy to get up off the couch and peel some carrots that I was craving. I mentioned this to my mother in passing and she started peeling carrots for me on a weekly basis. Such a simple thing, but it meant so much to me. So far most of the changes were minimal and easy to accept, not like the complications and the baldness to come.

Handling hair loss was a whole other story. Although a shallow concern when faced with a life-threatening illness, it became one of the worst things that happened to me. My hair was part of my identity and the loss would change who I was, or at least who I thought I was. How much loss was enough?

Secretly I hoped I would be one of the lucky ones who never lost their hair (I had heard of that happening about 2 percent of the time), but I prepared nonetheless. In early August, Michael and I visited a local wig shop and looked through endless pages of real-hair wigs. Surprisingly, it was Michael who picked out the best match to my color, texture, and length. The wig was then sent directly to my hair stylist, Erin, who, in turn, fashioned it after my own style.

Arrangements were made to have my head shaved on August 3 at Erin's house. As clumps of my hair fell to the floor, I started to cry. In my devastation I heard Michael comment on how this "GI Jane" look complimented me, but it didn't matter. All I saw was pieces of me floating to the floor to be thrown away.

After my hair was finished, I slowly turned toward the mirror and saw someone similar, yet different, staring back at me. It reflected a lost soul who was as scared and as lonely as I was. I was determined that no one would ever see me bald, not even Michael. I would keep this stranger within covered at all times with a wig, a turban, or a baseball cap.

I went through chemotherapy in the middle of summer and it was very hot. Wearing a wig 24-7 was not realistic, and because of the discomfort of any covering on my head, I soon found myself going bald around the house. Michael had no problem seeing me bald and often reminded me of how lovely I looked. To my disbelief, I soon became comfortable with my new self and with being bald in his presence. This was an outside-the-box attitude for me and I was proud of this accomplishment. But the house was my safe haven and I would go no farther.

But my best laid plans quickly went wrong. Within days of my newfound freedom, I was in the kitchen cooking when the doorbell rang. My daughter and grandson entered before I had the chance to go upstairs, and before I knew it, my two-year-old grandson walked into the kitchen and there I was with no hair. He walked toward me and suddenly stopped. His eyes opened wide and he looked puzzled. Although I was in a panic, I spoke to him in a calm manner and he soon realized that I was still his T (T is what my grandson always calls me instead of grandmother). He silently shrugged his shoulders and went on his way. How easy it was for him to accept this change once he realized it was still me behind a different look. If only I could have done so with such ease.

Advice on what foods to eat and how to handle hair loss were only two of the many suggestions I received from cancer survivors. There were discussions on supplements that would help strengthen my immune systems such as CoQ10, Vitamin D, and Selenium, and discussions on what would help an upset stomach such as crackers and ginger tea. And I was again reminded to keep a supply of peppermint candy on hand to help ease the metal taste received after treatments.

My place of employment unquestioningly accommodated my changing work schedule for the times I needed to be home. After each chemotherapy treatment, there is a down time. This is when the blood count was at its lowest and you had to be very careful not to get sick. In my case, this occurred the tenth day after every treatment and lasted for seven days. During this down time, there are safety measures to abide by such as staying away from sick people, eating the right foods, and washing your hands continuously throughout the day. I also started taking my temperature on a daily basis to monitor any infection that



may arise. I wasn't taking any chances. I had already mapped out my entire treatment schedule and I did not want any interruptions. The plan was simple: No delays, no way!

Once I made my decision to stay home during my down time, I started to think that it would be fun to lounge around the house, get on the computer, and catch up on some reading. But I was wrong. I failed to realize how often I normally left the house. Not just to go to work, but to buy groceries, visit friends and family, attend church, go to softball games, or just general errands. After the first couple of days, I felt trapped and isolated. I couldn't wait for the seven days to be over and I could return to work. I also found it very difficult to stay away from my grandson whom I saw five or six times a week before I got sick. With being so young, I'm sure it was hard for him to understand what had happened and where I had gone.

On August 16, before I received my second chemotherapy treatment, my daughter-in law gave birth to our granddaughter, Darbee. It was a joyous time, but it also happened during one of my down times. I had previously been warned not to go around hospitals because of all the germs, but I wanted to be a part of this big event. I decided the risk was worth the possible consequences and compensated by wearing a mask over my mouth and nose, which helped minimize any risk of infection.

My second treatment was on August 19, and my thirtieth wedding anniversary fell on August 20. Michelle invited all of the family over for a celebration. She put together a scrapbook for her father and me that held pictures from the beginning of our marriage to our thirtieth year. Included were letters from family and friends that contained their most cherished memories. It was a very special evening, but I couldn't help but wonder if it would be my last anniversary.

On September 9, I had my third chemotherapy treatment and somehow managed to maintain a relatively normal life. I got together with family and friends whenever time permitted and I still enjoyed watching Michael's softball games. I even started riding a bike when my energy level allowed. But, no matter what I did, I was always aware of my health and searched for anything that would help in my recovery.

During this time of research, I scheduled an appointment with a nutritionist to go over my diet and supplemental needs. I felt it was necessary for my physical and emotional well-being to speak with a nutritionist and incorporate different ideas into what I hoped would be a well-balanced program. The nutritionist explained the benefits for each new supplement she suggested and confirmed what I was already taking. I eventually took thirty-plus pills a week, and though it was an added expense, I felt I was worth it. (I often teased Michael that I would spend all his money rather than leave it for his next wife, but he didn't find that very amusing.)

After my third chemotherapy treatment, I experienced an unexpected side effect to having cancer—I was thrust into menopause. Being forty-eight, I knew that going through menopause was on my horizon, and I had dreaded the thought of mood swings and night sweats. Suddenly it happened, and it was quick and painless. I remember when friends and I used to collectively moan and complain about how hard the change of life was going to be and now I just laugh. I had worried a lot over nothing and realized that what they say is true—it can always be worse.

On September 30, I completed my fourth chemotherapy treatment. I was halfway through. I actually looked forward to my next set of treatments because I had heard from other survivors that this last set of drugs was a “walk in the park” compared to the first set. The worst was behind me. Again, I was wrong.

I received my first Taxotere treatment on October 21, 1999. Because there were only four easy treatments left, Michael and I had decided to celebrate. We made arrangements to go away for a three-day weekend that started on Saturday (October 23). We hoped to return home relaxed and with a new focus.

Shortly after we started the trip, I began to feel sick. I assumed it was just a reaction to the Taxotere because this was a new drug to my system and I didn’t know what side effects to expect. However, by evening I had a high fever and diarrhea. I called my oncologist long distance and she said to “take a cold bath, take some aspirin, and get back to town the next day.”

First thing Monday morning, I went to the oncologist’s office. They quickly hooked me up to an IV because I was dehydrated. After three hours of fluids, I was sent home. I was still worried about how I was feeling and if the fluids were enough, but the medical staff did not seem overly concerned. By Tuesday morning, I was no better. I was back on the phone to the oncologist and was told “it was just a reaction to the Taxotere and not to worry.” By nightfall, in addition to the fever and diarrhea, I had started to vomit.

I was too weak to even step outside the bathroom and Michael had to call the on-call oncologist for advice. He was told to take me to the emergency room right away. As we tried to get to the car, I made it as far as the front porch before I started having dry heaves and numbness in my hands and arms. Michael urged me to keep going because he needed to get me to the hospital as soon as possible, but I couldn’t go any farther. I told him to call 911 because that was the only way I was going to get there. Before long, there were numerous emergency vehicles parked outside my house. Not only had the requested ambulance arrived, but there were police cars and fire trucks. Thankfully, I was too sick to wonder what my neighbors thought.

**TIPS TO CONSIDER:** Before scheduling chemotherapy, map out your calendar for convenient treatment dates and times. Notify your employer and/or other responsible parties as soon as possible of your needs.

Establish any diet and hair needs early on. Don’t wait until you’re too tired to deal with the issue.

When I call, answer me, O my just God, You who relieve me when I am in distress;

Have pity on me, and hear my prayer.

—Psalm 4:1–2

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**WITHOUT WARNING—LIFE TAKES A TURN**

I soon arrived at the emergency room of a nearby hospital (I originally chose this hospital for the convenience rather than skill, and I later regretted not doing my research). After

the normal long hospital wait, the emergency room doctors ran tests to determine what the problem was. Hours later, as the family gathered, I was admitted.

Because of the lumpectomy / lymph node removal, I no longer had any needles or blood pressure taken with my right arm. In no time, my left arm and port were loaded down with IVs, some for antibiotics and some for liquid nourishment. I silently prayed that the veins in my left arm would hold out because, if they failed, the next step was to put IVs in my foot. (And that was not a place where I wanted to have needles inserted.)

I was in the hospital from October 26 through November 12. Michael stayed with me every night and slept on a mattress on the floor. He was my own private nurse who unselfishly took care of me no matter what it entailed. There were many times he changed my soiled clothes, fed me my meal, or refilled my water container when the nurses couldn't be found. He quickly learned where the hospital supplies were kept, in order to provide clean linen, cold juice, or light snacks. If I had waited for a nurse to assist me, I would have been uncomfortable for a very long time. My needs, like those of an infant, were demanding and messy, but Michael never complained.

I saw most of my family daily and I was thankful for the time they set aside to visit me. Many families grow apart over time and allow space to widen between them and we were no different. Being diagnosed with a life-threatening illness, however, soon pushed aside any pettiness or indifference. The arguments or disagreements we had suffered because of the death of our father or in the decisions of Mother's care were suddenly unimportant. Everyone pulled together and focused on a unified goal, my survival.

Although much of that first week is foggy, the night of November 2 stands out very clearly in my mind. Michael was asleep on the floor as usual and I was lying in bed, not quite awake and yet not asleep. It was almost trancelike. I started seeing images of people interacting with each other. The setting was familiar, yet different. It was like watching an old family movie of generation after generation being acted out in reverse. After each time period was completed, the previous era would unwind. Throughout the unfolding of my ancestral story, I recognized no one in particular, but I knew they were family.

I suddenly saw myself in a vast, open area with rocks and caves as far as my eye could see. It was clear, and bright, and colorful all at once. Within moments, my father's presence was with me. He was wearing an outfit that I had often seen him wear when he was alive and there was an angel over his right shoulder. No words were spoken, but we "talked" for a long time. I remember how calm and comforted I felt being there. I was at peace and no longer afraid, almost like coming home after a long and hard separation. Could this have been an out-of-body experience? If so, where was the tunnel?

When I awoke the next morning, I was surprised and disappointed to still be alive. I had no doubts about my death and crossing over. My father, in the presence of angels, had been there to greet me and welcomed me home. The next day, as I struggled to describe what had happened to my brother, John, I was still too weak and confused to find the right words. Though my inner thoughts clearly recalled every detail and message that Dad had spoken, it was impossible to adequately describe it. But I was content in the memory of my visual and sensory experience from the other side without having to share.

My oncologist later confirmed how very close to death I had come. She credited my prior good health and exercise as one of the reasons that I survived. I was thankful that all the hard work and diet had paid off, but I knew it was more than that. It was luck and prayer and not my time to go. I also knew that it was more important than ever to get back on track and reestablish my good health. There was a reason I was left behind and it was up to me to fight back. But after three weeks of lying flat in a hospital bed, I had a long way to go. On November 12, I finally left the hospital in a weakened but determined state. I was usually exhausted after just five minutes on the exercise bike, but I knew my life depended on being healthy and I couldn't lighten up. My illness had a long way to go and I had to be prepared.

It was hard to get an answer from the oncologist about what had gone wrong. She blamed it on a reaction to the Taxotere. However, it is my belief that there were two major mistakes made that led up to my being hospitalized and my condition deteriorating. The first was the failure of the medical team (by now my oncologist had called in numerous doctors for consultation) to run simple, routine tests which would have determined the cause of the problem before the infection got out of hand. They had been so focused on the one cause that they failed to continue the search for what was really wrong.

The second mistake was not heeding the advice given by the developer of the Taxotere. I remember my oncologist told me during one of her many visits that she had spoken with the developer of the drug. She related to me that he had cautioned her about the side effects I was experiencing. He stated that my complications "had never been noted before" and that she should look elsewhere for the cause. I also saw my oncologist's handwritten note in reference to her phone conversation with this developer and she notated his exact words as "would suspect other toxic." This she failed to do and I paid the price for her oversight.

I will never fully understand how much this failure by the doctors played in my getting so sick, but I know that things would have turned out much differently, for the better, if the team had done their job right.

**TIPS TO CONSIDER:** Mend bridges now. Don't wait for the right time because there may not be one.

Don't choose your medical staff or hospital based on convenience. Make an informed decision early on and notify all responsible parties of your decision.

Blessed be the Lord,

for he has heard the sound of my pleading;

the Lord is my strength and my shield.

In him my heart trusts, and I find help;

Then my heart exults, and with my song

I give him thanks.

—Psalm 28:6–7

## RELEARNING LIFE

Prior to being released from the hospital, arrangements had been made for an outpatient nurse, an occupational therapist, and physical therapist to make home visits two to three times a week. The nurse took my vitals and blood samples each visit while the occupational therapist helped me with my daily routine, such as getting dressed on my own, eating, managing the stairs, etc., and the physical therapist worked with me on an exercise program that helped me regain mobility.

Another arrangement had to be made before I could go home. Because of my weakened condition and lack of control, it was suggested that we place a hospital size Porta Potty near the bed that had already been moved to the main level. This was an unexpected purchase and a temporary one at that (hopefully), so we weren't sure what to do. Michael made contact with a local cancer organization to see if they could help. Cancer Action could not do enough. Not only did they provide the Porta Potty, but they sent informational booklets, small pillows for after surgery, tension balls to squeeze, and much more. We appreciated not only the items they provided but the upbeat and helpful attitude they portrayed whenever we called.

Contacting a national or local cancer agency is a resource that I had not thought about in my search for assistance until the need hit, but it is one that I would strongly recommend. They are here to help, and they can provide some of the answers.

It was a slow process as I gradually gained enough strength to do some laundry and light cleaning around the house. After a few weeks of this routine, enough progress was made that the home visits stopped. I was both encouraged and fortified by my improvement. I was suddenly a functioning adult again and Michael didn't have to work all day and come home to work all night. I pulled my own weight for the first time in a long time.

Mealtimes, however, were a different story. I barely had the energy to make a sandwich for lunch, let alone an entire meal. I quickly became exhausted whenever I stood for too long, and my hands were still too weak to open jars or grip handles. Michael and I would have found ourselves hungry most nights if not for the thoughtfulness of others. Within days of being home, members of our church prepared and delivered dinner each evening. It was a very considerate gesture and I was thankful beyond words.

The only drawback for me was seeing the look on people's faces when I opened the door. It was a daily reminder of what had happened, and though most covered their shock quickly, it was not quick enough. For already implanted in my mind from those first few seconds was their look of sadness and disbelief. In their eyes, I saw doubt that I would survive. One evening this became more evident when a friend of ours arrived with his wife to drop off dinner. As soon as he saw me, he started to cry. In fact, he cried the entire time they were at the house, and by the time they left, I felt quite depressed. It was hard to comprehend that I looked so bad I made a grown man cry (especially someone who had once been a priest and was used to being with sick people).

I rarely left the house during my early recovery except for doctor's appointments. I didn't have the energy or the desire to go out in public. I felt disheartened enough with visitors to my home without the stare of strangers. But in a short time, I felt confined by the living space that had become my life. Due to my limitations and the lack of strength in

my legs to climb stairs, my life consisted of the four rooms on the first level of my house. It was just too hard to go upstairs, downstairs, or outside.

The only exception to this was when I attended the funeral for the husband of my friend, Terry, who died of pancreatic cancer. He was diagnosed after me and yet there was only eight weeks from diagnosis to death. To attend his funeral was very hard on me: physically, mentally, and emotionally. His death reminded me of how fragile my life had become and how uncertain my future was. I had just been closer to death than most people ever got (and survived) and I was scared. I know I did the right thing by paying my respects, but I paid for it in motivation and hope. The drive home became filled with despair and doubt.

On November 22, I had an appointment with my oncologist and she decided that I would receive no more chemotherapy. Odds were that I would not survive another bout of what I had just gone through and she sent me home to recuperate. Radiation was scheduled.

Each day I became more concerned about my health. I still had the daily fever and diarrhea. I continued to call the oncologist's office (almost on a daily basis) to tell them how bad I felt. They insisted, "It is a reaction to the Taxotere and it will take time for the drug to get out of your system." Personally, I had doubts because everything I had ever read said to consult a physician if a fever persisted after so many days, but I couldn't get anyone to listen.

On Thanksgiving, Michael, the children, and I prepared a great feast. We celebrated life and all that we had been given. I was still very ill but tried hard not to show it. I was determined to enjoy every minute of the day. If that was going to be my last Thanksgiving, then I wanted all the special moments I could squeeze in.

After everyone left that evening, Michael and I started to put up the Christmas decorations. It was a tradition for us to decorate on the Sunday after Thanksgiving and we were not going to let cancer change that. But we only got as far as the Christmas tree and a few ornaments before I felt much worse.

**TIPS TO CONSIDER:** Recovery takes time and whether you are at home or in a hospital, be patient and give yourself time to mend.

You know your body better than anyone else does; listen to what it's saying. If you are not feeling right, insist on getting answers.

God indeed saves me;

I am confident and unafraid.

My strength and my courage is the

Lord, and he saves me.

—Isaiah 12:2

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## A FIGHT FOR LIFE

By Monday, November 29, I again exhibited every symptom that caused me to be hospitalized in October: daily fever, diarrhea, and vomiting. After I called the

oncologist's office with the updated developments, I was advised to see the doctor as soon as possible. As before, Michael rushed home to take me.

My oncologist immediately sent me to the hospital and I was apprehensive about being readmitted in fear that I would never leave. I was terrified and couldn't stop the tears. Since the doctors didn't fix what was wrong the first time, why would this be any different? I desperately needed to trust my doctor's abilities, but it was difficult after what I had been through. I quickly made the decision that nothing extra was to be done to keep me alive and I would leave my health in God's hands. If the doctor(s) messed up again, I didn't want to be hooked up to a machine for the remainder of my life.

For the second time within five weeks, I again filled out the necessary paperwork. I had barely arrived at my assigned room when a nurse came in and moved me to another room. This was my last conscious memory until December 23.

I don't remember walking to the other room or having tests the next day. I wasn't aware that, on December 2, I had trouble breathing and was taken to ICU, which would be my home for the next twenty-four days. I don't recall being on a respirator for eighteen days or the fact that I was hooked up to so many IVs that you couldn't see where one finished and the other started. There is no memory of December 7, when I had emergency surgery to remove most of my colon (from C-diff) to save my life. It was an important date, but I can't remember it. In fact, it was long after my recovery that I was told the doctors had warned Michael that I wouldn't survive and he should prepare himself.

When Michael received the prognosis, he was distraught and shattered beyond reason. He selfishly made the decision for my immediate surgery and decided to ignore my earlier wishes. Death was not an option to him. He felt burdened and alone but kept the news to himself rather than worry everyone else. Michelle soon picked up on her father's mood, however, and he shared his concern with her.

On this night (December 7, 1999) as I had my second brush with death, my blood count dropped to 4, my fever hit 104.8, and my heart rate pounded away at 244 beats-per-minute. This is a fact in my life, but not a memory I own. It is just a brief moment of time in a continuous blank space.

The only memory I have during this time period was of me on a gurney in an elevator. My husband was there with our parish priest and they talked very quietly. Suddenly I became agitated. For unexplained reasons, I had convinced myself that Michelle had been in a car accident and our priest was there to give her last rites (when he was actually there for me). I remember, even now, the strong sense of paralyzing fear before everything fades into blackness. And I have been told that Michelle had to be called in before I would calm down.

On this second brush with death, Michelle was at home asleep when she suddenly awoke around one o'clock in the morning and felt something was wrong. She immediately called the hospital and was told by the night nurse on duty that I was not doing well and would (probably) not make it through the night. She informed the nurse that she would be right in and was told that it was against hospital policy for anyone other than medical personnel to be in ICU after eleven o'clock at night. Michelle, in turn, told them, "You would be there for your mother if the roles were reversed," and that she would be there

for hers (I will forever be grateful that she was intuitive enough and cared enough to be there). Michael had gone home at eleven o'clock when ICU hours were over and got some much-needed sleep. Michelle, for her own reasons, decided not to wake him up and would handle it on her own.

Michelle arrived in ICU at about one thirty and stayed throughout the night. She was determined that I would not die alone, if it came to that. She also knew that her father would arrive by eight o'clock and she would sleep then. She solemnly held my hand and talked nonstop as she waited for morning to come. Her original intent to sit quietly by my side but this quickly changed when she noticed that her voice seemed to calm my restlessness and, in turn, dropped my heart rate.

As I stated earlier, one of the most difficult and stressful decisions Michael made during my illness was to sign the consent form for my emergency surgery on December 7. He knew I wanted nothing done to prolong my life and he agonized over what my reaction would be when I realized that I had a colostomy. After the necessary forms were signed, someone asked him if he had discussed the options with my family. "No," he answered. "This is not a democracy." He took the blame or the thanks upon himself. Although the surgery ultimately saved my life, the decision to gamble on the operation weighed heavily on his mind for quite some time.

After surgery, things went from bad to worse. I was on a respirator for so long that I was scheduled for a tracheotomy to get me off the machine when I unexpectedly started breathing on my own. My kidneys started to shut down and I was scheduled for dialysis when suddenly they started working. As I got over one hurdle, another would arise, such as the additional surgery to have my port removed when it became infected and the blood transfusions to replenish what I had lost. Is it any wonder that everyone waited with bated breath to see what would go wrong next?

It was a constant (although subconscious) fight to keep functioning. My will to survive was being tested by an inner force that fought to take control. Unknowingly, I accepted this battle and fought hard for a future. But being absent for the biggest fight of my life is a scary reality. The doctors have said that I wouldn't want to remember everything that I went through and that my mind has blocked it. I have finally accepted this as truth, but the questions have never stopped.

One of my sisters later told me that as she prayed for things to go right, things always turned for the worst and she was afraid to keep praying. The family was split on how they handled my illness; some prepared themselves for the worst while others refused to give it any thought. There was no right or wrong way and they understood this.

The blood transfusions I received felt almost alien to me. I had never given much thought to donating blood because it was always someone else's duty or problem. But as I watched someone else's blood slowly drip into my own veins during recovery, I suddenly understood this unselfish act of strangers who donate their own blood to save others—to help save my life.

As my family watched me struggle in ICU, they looked for ways to help each other deal with the stress and tension that filled the air. Humor and laughter were one of the ways.



Sharing stories that broke the ice or helped a person briefly forget the pain and suffering was not as funny in hindsight, but they were essential at the time.

One such amusing incident was when my brother, John, brought Mother into ICU to see me and she walked right past my bed. “There’s Therese,” he told her. “No, it’s not,” Mother replied, “That’s just a little old woman.” It took him quite awhile to convince her that this thin pathetic creature in the hospital bed was really me. I guess when you’re bald, weighing only eighty-five pounds, hooked up to several machines and on a respirator, it’s hard for even your own mother to recognize you.

Another funny story was about the flasher who occupied the cubicle next to mine. It seemed he never wanted to be covered up especially if a female walked by. The nurses continually went over and covered up his exposed limbs.

There was also much banter about what to watch on the TV next to my bed in ICU. Michael always wanted to put on wrestling and Michelle wanted something else, knowing how much I hated wrestling. I think Michael felt that if I hated wrestling enough I would wake up and tell him to turn it off.

It is difficult to hear these stories and realize I was so sick. To be so out of it that life passed me by. Someday I hope to have the blanks filled in and recall what happened during those twenty-four days in 1999. I want to remember every visitor, every comment, every emotion, and every minute of what could have been the last moments of my life.

**TIPS TO CONSIDER:** Some rules need to be broken; don’t let yourself or your family be talked out of what’s right for you. Be strong in your convictions because you may not get a second chance.

Make sure your family knows your wishes and your preferences. They may have to act on your behalf.

The sun shines equally both on  
cedars and on every tiny flower.

In just the same way God looks  
after every soul as if it had no  
equal. All is planned for the  
good of every soul, exactly as  
the seasons are so arranged that  
the humblest daisy blossoms at  
the appointed time.

—St. Therese, the “Little Flower”

10

#### IN THE BLINK OF AN EYE

My first memory, which seemed like only seconds after I arrived at my assigned hospital room, was one of panic. I later learned it was December 23, and I had been out of it for

about twenty-four days, but at the time I didn't know where I was or what had happened. Suddenly my surroundings were different and it was dark and I was alone. I moved my eyes from object to object and saw that I was in a small curtained-off area and straight ahead of me was a nurse's station. It slowly registered that I was in a hospital, but my anxiety only increased when I realized that something was wrong.

Things quickly went from bad to worse, when I attempted to get someone's attention and realized that I couldn't speak, and I couldn't move my arms or legs. Nothing "outside" worked. On the inside, my mind could still think and my emotions could still feel, but the only movement I had was with my eyes. A blackness overcame my entire body, and in one fleeting moment, I questioned who I was, where I was, and what I was. Those few seconds, before the nurse became aware and came over to my bed, were the longest moments of my life. Before my experience in ICU, I would have said that cancer and possible death were the worse things that could have happened to me. But then, without warning, I knew that being trapped in a nonfunctioning body was worse.

As I lay quietly in ICU, I became aware of all the Christmas activity. I saw the festive decorations and beautiful ornaments on a Christmas tree. I heard bits and pieces of conversations when the nurses talked about their Christmas luncheon or what shifts they were working and what they were doing for the holidays. I soon realized that the holidays were upon me and I had missed most of the season. I was grateful when my children, grandchildren, and other family members snuck into ICU to visit me on Christmas Eve, but I felt envious and jealous at the same time. Everyone was dressed in their finest, celebrating life, and I was weak and immobile in a hospital bed.

I am convinced that the prayers my family offered that night, as well as the prayers throughout my illness, helped pull me through. I was deathly ill, and medically, I should not have survived. I am convinced that there was a higher power looking out for me and what better time for a miracle than during the Christmas Season.

Because of my foggy state of consciousness while I was in ICU, I was not always aware when people visited. I remember being disappointed that Michael rarely seemed to be there when I woke up. When the nurses saw that I was agitated, they responded by saying that Michael had just left or that he would be back any minute. My conclusion was that they were hiding something from me and that they were covering up his absences.

What I didn't understand was that only medical personnel can be in ICU between eleven o'clock at night and eight o'clock in the morning. And whenever the doctors or nurses had to examine me, Michael was asked to leave. For some unknown reason, these absences are what stuck in my mind, not his many visits. I later learned that on most days, Michael was in the lobby by seven in the morning, ate a quick breakfast while he waited to talk with my doctors to get an update on my condition, and then as soon as eight o'clock arrived, he came back to stay with me for as long as he was allowed. Crowded in between all the hours of the day that he took care of me, Michael also tried to keep up on his work duties by receiving faxes from work (at the hospital) and being on the phone.

Patricia likes to remind me that it was a good thing I didn't die thinking that way (doubting Michael and his commitment), because not only was he there physically for me day in and day out, but he was also there monitoring my care each and every day. I had as

many as eight doctors (not counting their assistants) and Michael constantly talked with each of the doctors to let them know what everyone else was doing. More than once, this communication changed the course of action a doctor was going to take. (I have often wondered if they ever really read my chart.)

Many of the memories I have while in ICU, like Christmas Eve and waking up, are vague. They are like black shapes in a heavy fog. I can recall bits and pieces but not the whole picture. One such fragmented memory was my attempt at communication. My mind was still somewhat alert, and I found it very frustrating not to be able to express my thoughts.

Communication was almost impossible during this time of my recovery. To help me communicate, Michael and Jody used an alphabet board whenever I became agitated and tried to speak. They would point to the individual letters on the board and I attempted to make them understand by blinking when they were on the correct letter. I don't know if it was the illness or the drugs, but it was very hard for me to focus on the word(s) that expressed what I was thinking. I could spell the words in my mind, but I couldn't relate those words to the letters on the board. Sometimes the words would come, but before I could spell it, the words would be gone from my consciousness. No matter how many attempts were made to make this system work, communication remained limited. I remember thinking at the time that, I didn't want to live the rest of my life as a shell not being able to communicate or move my body. Not improving was not a choice.

I had some really weird dreams (or maybe nightmares would be more appropriate) while I was in ICU. They all had one theme in common—I was lost deep within myself where no one could reach me. Abandoned and forgotten.

In one dream, I am in a room that was decorated for Christmas. There are many windows surrounding the room in glorious light. I was lying on a bed and saw my family outside trying to get in, but all the doors and windows were locked. Someone was in the room with me, but I couldn't see who it was because I was unable to move. I could only feel an ominous presence behind me as it tried to keep the love and the warmth of my family away from me. I could feel danger, but I was helpless to do anything about it.

In the second dream, I'm on a gurney in a restaurant, but I am behind a screen. Michael was having a dinner meeting with his military unit, and because he didn't want to leave me alone in the hospital, he brought me with him. After what seemed like many hours, I somehow asked the waitress to get Michael, but I am told that he had already left. They told me that he was now with my brother, Dave, but that they would turn around and come back for me. Again, after what seemed like hours, they finally arrived. But when they attempted to load me into the van, there was no room and I was left behind again. I remember feeling as though I was crying, but no one heard me.

The third dream took place in a department store. I was on surveillance, lying on a bed pretending to be sick. The person that I am to rely on ends up being the person we are trying to expose. There were images of murder, theft, and wild animals. A sense of danger and hopelessness permeated the air and there was nowhere to turn for help.

In the last dream that I remember, which is the least clear, I was in the Orient and I was trapped inside a building. I was in a small, dark room and there were people outside

trying to save me, but I was again being held inside by a force I couldn't see. I continued to get very sick, but this force did not want me to get better. My surgeon was an integral part of this dream but her role was unclear. I am also unclear if she was there to guide my way or to block my path.

I believe the dreams at night only reinforced what I felt during the day. I was becoming more and more aware of my limitations and it was hard not to become disheartened. Such routine, simple habits, like how I fell asleep at night, became impossible. Try to imagine yourself going to bed at night and what you do to make yourself comfortable. Do you huddle under the blankets or do you rest your arms on top of the sheet? Maybe you roll on your side or place your arm above your head as you lie on your back. Or maybe you sleep in a fetal position with your knees bent. I couldn't do any of these simple things. I could only lie straight on my back with limp legs and useless arms, wishing for things to be different. And one of the worst parts was the uncertainty that I would ever get better.

Many nights my mind was in overdrive as I contemplated on where I was in life and what more I could expect. I felt alone and desperate. I continually asked God for help. Even as a child, I had always believed in the power of prayer, and I relied heavily on that belief. In the dark of night, if I concentrated hard enough on the prayers, I forgot about my condition for a little while and was able to sleep. Through prayer, I allowed the exhaustion to overcome the fear.

**TIPS TO CONSIDER:** No matter how many times you hear it, make the most of your life. What you have today can be gone tomorrow.

Keep your faith at all times, through the good and the bad.

Know that

I am with you; I will protect you wherever you go.

—Genesis 28:15

11

## IN MY CORNER

As in all professions, some of the nurses I encountered were great and some were not. I had nurses that treated their position as a job and others who regarded it as their profession. I suffered long-term complications from the deficient care I received from the nurses who were only there to work their hours. And though my memory of ICU is cloudy, there were many mistakes made.

One such mistake was the failure to place a certain type of “boot” on my feet right after surgery to keep them from bending over or developing “foot drop.” This is basic procedure—Nursing 101. Each time my sister, Jan (who also used to be a critical care nurse) or Jody (who worked at another hospital) asked the nurses why these boots were not being used, they were ignored. It was two weeks after surgery before the nurses finally put the appropriate boots on my feet, but by then the nerve damage had already been done.

It's hard for me to understand why something so simple was not done. Maybe, at the beginning, the nurses thought since I wasn't supposed to survive anyway they wouldn't

bother with the inconvenience. Or maybe they lacked the care and skill it takes to be an ICU nurse. I may never know why, but I will always live with the results.

One of the ICU nurses commented to Jan (who is only eighteen months younger than I am) that she was “sorry about your mother.” This comment concerned Jan and she called Patricia right away to talk about what they could do to set things right. They both felt that if the nurses started thinking of me as a middle-age survivor instead of an elderly victim, maybe I would receive the proper care.

Patricia brought in a picture of how I looked before I got sick with long, dark, curly hair, and a healthy complexion. She wanted to show the nurses that I was a relatively young person, who still had a lot of life left to live. The earlier statement made by the nurse only reinforced what Patricia had already been told by a doctor friend of hers who said, “Once ICU nurses adopt an attitude that you’re old anyway or that you’re not going to make it, you may be in ICU, but you won’t get ICU care.” I firmly believe this is what happened to me. The nurses had already written me off as a lost cause and they had other younger patients to help who had a better chance at survival.

Because of this nerve damage (or “foot drop” as it has been called), I live with pain 24-7, just in varying degrees. For example, there is one type of pain whenever I take a shower and the water hits the top of my feet, and there is another type of pain whenever I wear anything snug against my toes. I can’t lean back on my heels or forward on my toes. It is also very difficult get up or down from a sitting position on the floor without holding on to something. In the cold winter months, I experience a different type of pain when my feet feel like they have frostbite (with that burning/tingling sensation) and each step I take hurts. At night it often takes me a long time to fall asleep because it’s hard to get beyond the discomfort and the pain, but the mornings are always worse.

Another limitation due to the foot drop is not being able to run anymore. Think how vulnerable you are when you can no longer run, either from trouble or for fun, about the times you run for cover when you’re caught out in the rain or you’re hurrying to your parked car at night. Imagine being unable to play sports or run after your child or your grandchild. Whenever I was out with my young grandson, I always panicked if he got too far away from me because I knew that I would be unable to catch up to him in time if there was any trouble.

When I first got home from the hospital and rehabilitation, my grandson continually asked me to sit on the floor and play with him like I used to before I got sick. I explained that I could no longer play some of the games we did before and that we needed to invent new games. After hearing this statement so often, he started responding by stating, “Cause of the braces, right?” And though Michael was only two years old at the time, I could tell that he tried very hard to understand my limitations. But it was hard on both of us.

The pain, discomfort, and limitation that I live with on a daily basis were caused by nurses who did not do their job. By nurses who were careless and irresponsible. I was reminded of how bad the original prognosis for my recovery had been during a recent hospital stay for a severe viral infection. The neurologist from the rehabilitation hospital checked me over and realized that I looked familiar. I reminded him who I was and that he had evaluated me in January of 2000 because of foot drop damage. He looked at me,

pointed his finger and said, "You were almost a quadriplegic." (It was true, but I had never heard of myself being described in that manner before.) The neurologist was shocked by how far I had progressed and that I even had some reflex. Michael told him that my doctor and parish priest considered me a miracle, and after a short pause, the neurologist replied that although he was a "skeptic and couldn't say that," he agreed that I was "almost a miracle."

Another problem or mistake by the nursing staff was when the nurses dropped me in ICU. Two nurses had come over to my bed and moved me into a chair so that I was in an upright position for a while and they could change the sheets. After a short period of time, one of the nurses came back to put me in bed. I remember thinking to myself (as I was still unable to communicate) that she couldn't move me on her own. I was dead weight and unable to even put my arms around her shoulders for support. As the nurse proceeded to lift me out of the chair, she turned toward the bed and dropped me. She then yelled for the second nurse to help her lift me off the floor and back into the bed.

For a long time after that incident, I was terrified whenever someone tried to move me. Twice a day when the physical therapists arrived to start my exercises, I fought them as they placed the belt around my body. There was deep-rooted fear as I constantly struggled with their efforts to help me. This lack of trust not only caused delays in my progress but also caused a lot of unnecessary turmoil and anguish.

Another problem I experienced was when I went for tests in another part of the hospital and was forgotten. One of the nursing staff wheeled me down to the examining room and left me outside in the hallway as she went to inform the technician that I was there. I sat in the wheelchair and waited and waited. Eventually, someone noticed that I had been there for a while and went to get help. I had been forgotten, and because I couldn't speak or get out of my wheelchair, I had been abandoned.

Incidents like being dropped or forgotten were not problems that my family could prevent or help with. However, whenever Michael or any of my family could help with my care, they did (we were learning the hard way not to count on the nurses). There were many times that a member of my family had to turn me so that I wouldn't get bed sores. They also fluffed up my pillows or pulled me up on the bed after I had slid down. If I had had to rely on the nursing staff to do their job, it would have been an entirely different story.

There were many doctors involved in my care and I was lucky enough to have five great doctors: my surgeon, my pulmonary doctor, my kidney doctor, my rehab doctor, and my radiation oncologist. But I was also unlucky enough to have three poor doctors: my oncologist, my infectious disease doctor, and my internal medicine doctor. The biggest problem, however, was that my oncologist made the final decisions on my care and she was one of the worst.

If I had spent as much time learning about the doctors as I had about chemotherapy when I was first diagnosed, I might have avoided a lot of grief (this is also another reason to go to support groups right away). The different doctors (especially oncologists) were discussed and second opinions were encouraged. In hindsight, I remembered that at my first support group meeting, the oncologist I used had some very negative things said about her from more than one person. But I was so focused on hearing about cancer,

chemo, and a future that I didn't pay attention to what was being said about different doctors.

If I had it to do over again, I would talk to a lot more people and get references, just like I would have done for any other need. If I had it to do over again, I would not let the overriding emotion be "emergency" and "quick" when making decisions, just because I was suddenly faced with a life-threatening illness. I would instead search for competency and trust.

This was reinforced during my first stay at the hospital when the nurses often complained about one of the doctors because he got so angry with them. In fact, they stated that they tried to avoid him whenever possible. After I listened to the nurse's talk about his treatment of them, it was easy to side with them and concur that the doctor had an attitude.

However, I soon saw the other side (the true side) of this doctor when he became my kidney doctor. He came into my room each day and patiently went over my counts and explained what he expected. During one of our visits, he asked how I was doing with the nourishment and liquid requirements that he had ordered the day before. "I don't know what you are talking about," I said. He abruptly went out to the nurse's station and asked why his instructions had not been followed. I could clearly see the problem firsthand. He actually used my chart for what it was intended and then actually expected the nurses to do their job accordingly. When they didn't, he got angry. Although this doctor was one of the worst for the nurses, he was one of the best for me.

**TIPS TO CONSIDER:** Do your research. Take the time to learn about the oncologist (or possible hospital) you will be using. Don't close your mind to what is being said about your choices. If someone tells you about their complaints or that they "wouldn't send their dog" to that hospital, listen to them; find out why.

Driving farther to a medical facility does not constitute bad. Teaching hospitals in your area are also an option and would have up-to-date information on new procedures.

Let nothing

dismay you:

all things pass:

God never changes:

patience attains all.

—St. Teresa of Avila

12

## CLIMBING BACK UP

By the end of December, I was moved to a private room. Michael again stayed with me each night. His mattress on the floor was a familiar and comforting sight. His daily routine consisted of getting up early each morning to feed me breakfast, rushing off to work, returning around noontime to feed me lunch, rushing off to work again, and then getting back in time to feed me dinner. If he ran late, my dinner tray always sat on the

stand untouched until he arrived. I'm not sure how the nurses thought I was going to feed myself without their assistance when Michael wasn't there. Maybe they felt that hospital food, hot or cold, was about the same and it didn't matter when Michael fed me. There were times Michael was unavailable at mealtimes and he invariably made arrangements for other family members or friends to assist. He quickly developed a routine that helped him manage my care as he was reluctant to rely on the nursing staff.

Before he left for work each day, Michael always reminded the nurses that when the buzzer went off in my room, they were to go and see what I needed. They were not to wait for me to answer them over the speaker because I was unable to do so. I was lucky to be able to signal at all, let alone speak. Because of my limitations, I had been equipped with a large buzzer that was placed next to my hand on the bed. All I had to do was lean the back of my hand against it to initiate a signal for the nurses. However nine times out of ten, when I buzzed, the nurses failed to come. They inevitably buzzed back and asked what I wanted. When I didn't respond, they didn't respond. And this failure to assist me usually meant that Michael arrived at mealtimes to find me in desperate need of some assistance, such as cleaning up vomit or other messes. As an unspeaking and immobile patient, I was at the hospital staff's mercy. Michael grew very frustrated with this careless lack of attention, but he never gave up trying to improve my care.

Another example of thoughtless medical care was the many times I had to have my blood pressure checked and the nurse or assistant would automatically move to my right side to put the cuff on. There was a big sign above my bed that read "No blood pressure or needles taken in right arm," yet countless times, it was ignored. It made me wonder how many times things were done wrong when I was unaware of what was happening or Michael wasn't there to correct them. I guess it was a hit-and-miss situation. Again, I don't mean to imply that there were no good nurses. During my long hospital stay, I had many nurses who cared, but the nurses who were indifferent or incompetent were the ones that made the biggest difference, negatively.

A week after I left ICU, I discovered I had a colostomy. I had been told that I had to have surgery to remove most of my colon, but it never registered that I would be wearing a bag. This realization was quite a shock to me. It was such an unexpected event that the necessity was lost on me and I only felt embarrassment each time the nurses came in to replace it. During one of my visits with my surgeon, she informed me that she had left enough of the colon to reattach if it remained healthy. Not taking the entire colon was a gamble, but one she willingly took because she knew how I would feel. She said that when I was better, possibly six to nine months down the road, I could have additional surgery to remove the stoma if I so desired. That was a no-brainer to me.

Learning how to adjust to wearing a bag (or pouch as it is called) that hung from my body and learning how to change it, disguise it under clothes, and mask the noises it made was no easy feat. It was hard enough to feel presentable and feminine with all the battle scars, short hair, and leg braces that I had to contend with when suddenly I had a new and even more devastating defect to cope with. I remember how apprehensive I felt (actually I think the words were scared out of my mind) about going home and having to clean the stoma and change the bag by myself. I wasn't sure if I was capable of taking care of it. But over time and with a lot of practice, I learned to become more comfortable with the



colostomy, but I could write another story about the accidents (when the bag would burst or the adhesive came lose) and the frustration that came with having a colostomy.

Sleep was hard to come by, whether I was in ICU or a regular hospital room. Every few hours, throughout the day and night, someone was always in my room to check my vitals, take my blood pressure, draw blood, change an IV, or to give me medicine. As soon as I got to sleep, if I was fortunate enough to do so, it was time for another visit from the nurse or lab technician. And if it wasn't a visit from hospital staff, then it was the constant noise or pages heard throughout the night that hindered a good night's sleep.

One night while I waited for sleep to come, I decided to count the interruptions. It was about ten forty-five when the evening nurse came in to finish my paperwork and she finished up around eleven fifteen. At eleven thirty, she was back to draw blood. At midnight, my vitals were taken. At one, the night nurse came in to introduce herself and check my lungs, my heart, etc. Then there was a break until two twenty when the nurse came in and gave me a Motrin 800. At four o'clock, it was time for vitals again. At four thirty, they were there to take a stool sample and at five o'clock, more blood was taken. Finally, six thirty arrived and it was time for breakfast. So much for a good night's rest.

One of the funniest-looking contraptions that I encountered while in the hospital was the scale they used to weigh me. Since I was incapable of standing up, the hospital staff brought in this large hoist (that's about the only way I can describe it). They placed a pad underneath me that went from my knees to my neck and I was then fastened in real tight. Once I was bundled up, they attached the bindings to a part of the scale that electronically lifted me up off the bed and an approximate weight was recorded. If you have ever seen a horse being lifted up out of the mud by a helicopter using a strap around its belly, then you have an idea of how I looked and felt. And because of previous mishaps, I was always nervous during this procedure that the strap would break and I would fall to the bed.

Shortly after getting out of ICU, my therapy began. First on the list was learning to speak again. I was never told why my voice wouldn't work but, in layman's terms, I assumed it was because I had been on the respirator for so long that my throat and vocal cords forgot how to function. It took time for me to relearn how to pronounce all the different sounds and to get my volume back, but that was okay because I had nothing but time. Progress was slow, but gradually my whisper became a voice that was heard.

Along with learning to talk was learning how to swallow. It was not a reflex action anymore but one that I had to acquire again. To accomplish this part of my recovery, the technician gave me very small amounts of different substances and then monitored not only if, but how well I consumed them. Gradually I conquered the swallowing motions and worked up to liquids. This light liquid diet didn't do much toward any weight gain, but I had no appetite anyway. There was time enough for solid food and calories when I got better.

Once I was able to eat solid foods, the nurses kept track of every bite I took in order to keep a tally of my daily calorie intake. They often threatened me that if I didn't get the appropriate amount of calories each day, I would never be well enough go home. But food did not appeal to me and it was a struggle to eat, so four or five bites each meal was all I usually managed. To compensate, I was encouraged to consume three high-calorie

drinks each day to help get my calorie intake higher. These drinks didn't taste too bad at the beginning, but after a while, the only way I drank them was to have them served over ice. But even then, I got tired of them quickly.

One of the reasons for my struggle with food was that it was humiliating to be spoon-fed. Food was a constant reminder that I was helpless, and because my system was so frail, many times after I ate, I vomited everything back up. What was the point? Psychologically, mealtimes did very little to improve my well-being and, in fact, probably had the opposite effect because I felt so defeated.

As I learned to talk, swallow, and eat again, I also learned to move my legs and arms. Physical therapy started each day with a therapist strapping a belt around my chest and pulling me up off the bed and into a chair. While I was seated, the therapist manually moved my limbs up and down. They began with my arms and slowly moved down to my legs and feet. These exercises were completed twice a day and the therapists constantly offered encouragement and hope that my limbs would soon show signs of movement. For me, it was an endless wait that quickly turned to discouragement when nothing appeared to happen. I was impatient to be a whole person again and I desperately wanted my life back. So I concentrated harder, hoped stronger, and prayed more often.

After fifteen minutes of physical therapy, I was left alone to sit in a chair for thirty to forty-five minutes before the therapist returned to put me back into bed. I believe the idea of being in a sitting position for long periods of time was to gain body strength, and for this purpose, the amount of time was increased each day. But whether it was ten minutes or forty-five minutes, I found it exhausting and difficult to be in an upright position for very long and was always relieved when it was time to lie back down. Because of this weakness, I often doubted my chances for improving and wondered if I would ever have the strength to walk when I didn't even have the strength to sit.

Routine is very important in a hospital and therapy was no different. Therapists were like clockwork: they came in at the same time, did the same exercises, and turned on the same channel everyday before they left. I could set my clock with my therapy being over ten minutes after *The Price Is Right* started, and then over the next half hour, I would get caught up in the sights and sounds of life, of people who enjoyed life, and for at least a few moments, had no worries.

Before I knew it, time had passed and it was New Year's Eve. For the first time that I could remember, I celebrated this holiday by myself. There were no parties, and no friends or family at my bedside. Michael had to work all night in case there were problems with Y2K, and friends and family had their own lives to celebrate. I watched television all night long as the New Year arrived with each time zone. It was an amazing display of fireworks and glamour and though I would have missed it had I been home, I was still saddened by the fact that I had missed Halloween, Christmas, New Year's Eve, and New Year's day by being in the hospital. I was tired of missing out on life and wanted to start living again. And I soon got that chance because January 12 was moving day for rehab.

The director of the rehabilitation hospital had periodically visited me and checked my progress as I completed the different therapy programs at the first hospital. The plan was for me to be moved by ambulance to the rehab center as soon as the director felt I was

able to withstand their program. Everyone going into rehab had to keep a certain schedule: up early for breakfast before completing forty-five to sixty minutes of occupational therapy and then forty-five to sixty minutes of physical therapy (included in this, for me, was speech therapy also). After lunch there was a second round of occupational and physical therapy. To a healthy person, this may not seem like much, but after a long period of illness and almost three months in a hospital bed, it was all I could do to keep up.

Only a year prior, my typical day included rushing off to work, running errands, exercising for an hour, and maintaining my house. Then in December of 1999, my typical day included struggling to eat, desperately trying to move my body, and rarely leaving a bed. What a difference a year made.

**TIPS TO CONSIDER:** Be insistent and forceful when it comes to your care. If something isn't right, make changes.

When battling obstacles, no matter what they are, be patient and take pride in each step of your progress. It can be a long and strenuous road back, so don't give up.

Happily may I walk

May it be beautiful before me,

May it be beautiful behind me,

May it be beautiful below me,

May it be beautiful above me,

May it be beautiful all around me.

In beauty it is finished.

—Navajo Chant

13

## WRESTLING WITH REHAB

January 12, 2000 (the day before my forty-ninth birthday) finally arrived and I made the trip to the new hospital for rehab. I had previously been told that, with a lot of hard work, I could possibly leave rehab in six weeks with the use of a walker. Before even starting the program, I was determined to push myself as hard as I could so I could get home as soon as I could. Hospitals were getting old.

To transport me to rehab, the ambulance driver physically moved me from my bed to a wheelchair and then wheeled me outside where the ambulance waited. Once I was inside, the wheelchair was bolted down to the floor of the vehicle so that there would be no movement during transit. I remember the cold winter weather and being bundled up in a lot of blankets. I felt snug and warm physically, but I felt lost and helpless at the same time. I was glad to leave the problem hospital behind, yet I was apprehensive about going to a new one. Everything was different and I had to rely on a whole new group of people for everything I needed. I had made enough progress to advance to the next level of rehab, but I was still very limited in what I could do for myself. Leaving familiar surroundings for an unknown had suddenly filled me with doubt. Was I ready for the

move? What if I never got any better? What if this was my last chance to improve and I failed? Should I have stayed where I was for a little longer and not pushed myself?

By the time I settled into my room, it was dinnertime. Michael and I found a table in the hallway outside the main dining area. The table overlooked an inside courtyard and it was very quiet and peaceful. It was away from everyone else and we could focus on each other instead of being constantly reminded of age differences and limitations. And, though we didn't understand why it happened, we were lucky enough to enjoy this special privacy throughout my entire stay in rehab.

My first full day at rehab started at seven in the morning when one of the nurses came in to make sure I was up. She handed me a warm wash cloth to wipe my face and left the room. At first, it was difficult for me to do what was required, but the nursing staff expected all of the patients to do as much for themselves as possible.

If Michael had not already done so, a nurse helped me from the bed to the port-a-potty. It wasn't too difficult for them to lift my full weight off the bed because I only weighed about ninety pounds, but it was still awkward and embarrassing for me to need such assistance. The nurse then placed me in a wheelchair and wheeled me down the hall for breakfast.

As with most hospitals, meals were ordered the day before and breakfast arrived between seven and seven fifteen. It was always a struggle to use utensils, and although I had made progress on feeding myself, it was awhile before I could open containers. So each morning Michael opened up my milk carton, peeled the foil off the juice, and cut up my food before going down to the cafeteria to get his meal and join me. I tried to eat a little bit of everything on my plate, but I still had no interest in food. It was too much effort for too little enjoyment. Michael got very frustrated trying to coax me to eat, but he knew calories were still being counted, and I had to make the effort.

When breakfast was finally over, Michael left for work and I waited for the occupational therapist to either give me a sponge bath (in the beginning) or help me take a shower (as I gained enough strength). She also helped me with my clothes as I was still unable to raise my arms or handle buttons.

From there we would go to the exercise room. I wrestled through numerous dexterity exercises such as the arm-pulley, throwing a ball, putting pegs into the appropriate holes, playing cards, and even playing with a glob of clay to try and remove all the nuts and bolts hidden inside. The ball we used for tossing back and forth was like a soft beach ball. I only had to be coordinated enough to catch it when it was thrown to me, and I didn't have to be accurate when throwing the ball back. It wasn't painful because my hands were more numb than sensitive, but it was awkward. With the pegs, the cards, and the clay, determination and concentration was what mattered. There was no strength involved or real physical labor. It was just an intense focus on one object at a time.

Once I started standing with the use of a walker, the therapist added other exercises to my occupational therapy routine. One such exercise was a large board secured on the wall that had numerous small, round buttons placed strategically around the board. Once the timer was set, the buttons would start lighting up at random locations but for only a few seconds at a time. Each time I touched the button while it was red, I received a point. The

goal was to get as many points as possible in a certain amount of time. This test of speed and reflex both mentally and physically challenged me.

At the beginning, I was unable to reach the outer row of buttons with either hand because it was difficult to maneuver my hands across my body to reach the buttons on the opposite side. I also had trouble maintaining my balance while standing up at the board and had to brace my walker against the wall and then lean into it for stability while pushing the buttons. But no matter how I felt, once the therapist said go, I forgot everything but the lights and beating my previous time. It was exercise, but finally, it was something fun, something challenging. This was a test of my ability, and it was a definite high as I continued to beat my previous time with each attempt. When the therapist stated that I had the highest score of anyone, I felt like I had received a gold medal. This one exercise did more for me than any other toward my believing that I would get better. I could finally see some progress.

As I went through occupational therapy each day, if I was asked to throw the ball five times, I pushed for ten. If I was asked to do twenty repetitions with the hand-pulley, I went for thirty. I constantly told myself not to give up and that I could do it if I tried hard enough. And, even though I understood that all of the exercises were designed to help me regain the use of my hands and fingers, it was a very slow and frustrating process. I had to continually remind myself about baby steps.

With unwavering purpose, I had found new energy to keep improving. I began to believe that the use of my arms and hands would come in time and that I would soon be able to shower on my own, dress myself, and feed myself. (Of course, my arms were only weak from the long hospital stay and not from any negligent care. My legs were a different matter.) I still had trouble with button holes and with putting on my shoes, braces, and support hose, but I eventually got there. With each new accomplishment, I got closer to my goal, which was going home.

Sometimes when I was alone, I analyzed my accomplishments and believed that I was going to make it after all. But then my telephone would ring and I was reminded that I was still very limited in what I could do, that no matter how determined I was or how far I had come, I was still unable to pick up the receiver to see who was calling, a simple task that was still beyond my reach.

**TIPS TO CONSIDER:** Start with short-term goals and work up. Your aim needs to be attainable.

Believe deep within yourself that nothing is beyond your abilities.

I command you:

Be firm and steadfast!

Do not fear or be dismayed,

For the Lord, your God,

Is with you wherever you go.

—Joshua 1:9

## BACK ON MY OWN TWO FEET—

### WITH A WALKER

Shortly after I arrived at rehab and before I began physical therapy, I was given an EMG test that determined the damage done to my legs and feet. For this test, the neurologist stuck needles into my legs at various points and then touched the tip of the needle with an electronic device that sent shocks into the nerve. My response to this shock was monitored and recorded. After the results were compiled, the neurologist gave Michael and me the news. His exact words were fuzzy, but the message was loud and clear. “It is doubtful you will ever walk again,” he told me. My world seemed to stop. It was hard to concentrate on what he said next because all I thought about was life from a wheelchair. It was like a bad, slow-motion movie that didn’t make any sense.

The neurologist had gone on to explain that the effected nerve was the same in both legs. The damage started behind each knee where it traveled down the backs of the leg while twisting to the front of the leg near the ankle and then spreading out along the top of the foot into the toes. I was warned these nerves were slow to rejuvenate and if they improved, it would be years before I saw any improvement. The director of rehab agreed with the neurologist and his damage estimation, but held out hope that I would walk again, even if it was with assistance such as a walker or a cane. It wasn’t promising, but it was enough to keep me going. Determination was the name of the game.

After occupational therapy came physical therapy. I would wait in my room until the physical therapist arrived to take me back to the exercise room. With some assistance, I lay down on a long, flat bed. There were seven or eight of these large beds and they were always in use by patients that arrived in all types of conveyance and for all types of rehabilitation. Some were trying to recover from a stroke, some from automobile injuries or, like myself, from the effects of cancer. During my entire stay in rehab, I only encountered one person younger than I was.

After the table exercises, came the wheelchair. One of the hardest things I had to learn was how to lift and lower myself out of a wheelchair. Using my lower legs and arms was not an option, so I had to use whatever stomach muscles and upper leg strength I had left. I was always scared when I had to back up sight unseen and feel the wheelchair with the back of my legs before I sat down. Each attempt caused me great anguish as I questioned if the lock was on or if I would miss the seat completely and fall to the floor.

Parallel bars were another fear for me. Each day when it was time for me to grip the bars and pull myself up, I sat in my wheelchair and contemplated on mind over matter. I knew the only way to conquer those high, unattainable bars was through a strong determination and a will of steel. I still had doubts that I would ever stand up again, let alone grip the bars for any length of time, but I didn’t quit. I finally achieved a standing position, but it was another struggle to learn how to put one foot in front of the other. Then, after I learned to walk in a forward motion, I had to learn to take steps in a backward and sideways motion. The therapists were always patient, but they were determined to push me to the limit. They knew it was the only way I would get better and they didn’t take no for an answer. Overcoming the parallel bars was the first step against all odds to becoming whole again, and I had to accept that fact before I went any further—one

obstacle at a time, one step at a time. However, the daily pep talk of “you can do it” wasn’t always enough and the frustration sometimes became debilitating.

Shortly after physical therapy began, I was fitted for leg braces. A soft mold was wrapped around the lower portion of each leg and along the foot to ensure an exact fit. These braces had to be as one with my leg if they were to work, and each brace was individually formed. They arrived in two days and my life quickly changed. I wore shoes over the braces, and between the two, I gained more balance. The combination not only enabled me to work harder and stronger but with more purpose. I suddenly felt all was within my reach, whether it was the parallel bars or anything else they put in front of me. I was finally going in the right direction.

After a week of wearing the leg braces, I put the wheelchair aside and started using a walker. Twice a day, I slowly shuffled from my room to the exercise room and the therapist walked alongside of me with the usual belt strapped around my chest in case I fell. Using the walker was slow going, but it was good to be mobile, and I didn’t care if it took me thirty minutes to get to my destination, it was progress. (Pardon the pun, but it was finally a step in the right direction.) With the use of a walker, I was also able to negotiate sitting in a chair and climbing stairs more easily. I even started getting to the bathroom on my own, and that felt revolutionary. I felt independent for the first time in months. It didn’t matter to me that I still wore leg braces or that I wasn’t totally self-sufficient. I had accomplished what the doctors said I would never would. It was a high beyond belief.

As I conquered the table exercises and the parallel bars, I moved on to other equipment. One such advanced exercise was a wooden platform that looked like stairs going into a house. My assignment was to painfully climb each step to the top. Out of breath and feeling weak, I would reach the top, turn around, and maneuver the steps back down. Over time, as I gained more strength and mobility, new exercises and more repetitions were added to the program. Slowly, I relearned everything that I had once taken for granted.

After a second week of seeing my motion and endurance improve, I graduated to a four-pronged cane. My walk was still unsteady, but I was excited about the continued improvement. With the improvement, came the exercise bike for a few minutes every day and negotiating the hallway stairs. Although it was much easier to climb the stairs with the cane than it was with the walker, I still relied mostly on arm strength to pull myself up each step.

As good as my progress was, I knew I still had a long way to go before I could go home. One necessary task that I had yet to perform was sitting up from a prone position on my own. Whenever I was in bed, someone was still needed to pull me up to a sitting position before I could attempt to get out of bed. I remember worrying about how would I ever go home if I couldn’t even get out of bed.

As my arm strength increased through physical therapy, I used my elbow to dig into the bed and slightly raise my upper body up before using stomach muscles to pull myself the rest of the way. After a lot of practice (and a lot more strengthening in my hands and arms), it got easier to roll to my side, grab the bed railing, and pull myself up with my

arms. I was exhausted and winded after each effort, but it was another successful hurdle on the long road to recovery.

After completing the morning sessions, I waited in my room for the speech therapist. During our hour together, we repeatedly went over the different sounds and pronunciations of the alphabet to improve both volume and clarity. My voice soon became a soft, weak, scratchy whisper that sometimes failed to have sound, but I had much to say and I didn't stay silent for long.

There was always time for a short rest before Michael arrived for lunch. If there was enough time after we finished, Michael wheeled me around the hospital floor looking for any sunny area where the sun shined in through the window, and I would gloriously basked in its warmth. It had been so long since I had felt any fresh air or sun on my face that it was a treasured treat. It was a bright spot in an otherwise gloomy day, and I was always disappointed on the days that Michael had to rush off to work and couldn't spare the extra time. Within minutes of Michael's departure, the afternoon sessions started all over again. By late afternoon, I was exhausted from the exertion of trying to function within my body again. Since dinner wasn't scheduled until early evening, I always had time for a much-needed nap before Michael arrived again.

After dinner, Michael would wrap me in a blanket and gently place me in a wheelchair before we again toured the hospital. But this time, we explored every nook and cranny. Sometimes we visited the chapel or we went to the cafeteria to get something to drink. Many times, Michelle and little Michael joined us for these treks and then added to our exploration was any and all play areas. My grandson loved to push my wheelchair as we traveled on these quests and, with just a little help, he did a great job.

On the few evenings that Michael and I found ourselves alone at the end of our tour, we would search for a secluded area away from all the noise. I had always been an avid reader and missed not being able to read. But until I was well enough to hold my own book and turn the pages, Michael filled that void by reading to me. During these quiet nights when just the two of us sought solace in each other's company and the mystery of books, I felt normal. His constant strength and patience, whether he read to me or fed me, surrounded me in a cocoon of love that continually restored my will to live. He was an important part of my recovery.

After we returned from our "travels," we often put on a movie. Michael always tried to make my hospital room feel more like home and had hooked up a VCR, brought in a CD player, hung pictures on the wall of my family, and placed knickknacks from home all around the room. With very little effort, we had our own mini apartment and it was more conducive to my healing than stark white hospital walls that remained bare.

The whole family went along with this illusion. One evening while Michael worked late, my sisters came over with food, drinks, and more movies to have a girl's night. It was a lot of fun and only being home would have been better. I still get emotional when I stop and think of how much my family put their lives on hold for my benefit. I was so wrapped up in my recovery that it was easy to forget that they had put their lives on hold.

My stay in rehab was no different from my stay at the first hospital as far as getting enough sleep. There were constant interruptions throughout the night. I couldn't seem to



replenish myself before the next exhausting day arrived. The nights were again filled with blood tests, neurology tests, chest X-rays, blood pressure checks, etc. However, this time we felt more comfortable with the nursing staff, and Michael asked them to lump a few of the tests together so that there would be less interruptions and therefore, more uninterrupted time for sleep. They gladly complied.

Almost every day but Sunday, the director came by to check on my progress. He took an interest in everyone going through rehabilitation and was always aware of each patient's status. He and his staff met every Monday morning to discuss and reevaluate each patient in case changes were needed. I knew that, no matter who I talked to, from the nurse to the therapist, they were aware of my progress and what was expected of me. This team effort and consistent communication made for a more conducive atmosphere in which to achieve. Not having to question if the right hand knew what the left hand was doing allowed me more energy to concentrate on getting better instead of worrying.

Only once during my entire stay in rehab did I refuse to do the daily exercises. I woke up very depressed that day, and I just couldn't take it anymore, mentally or physically. I felt sorry for myself and defeated. Normally, a patient was not allowed to skip any sessions, but what were they going to do, kick me out for just one transgression? Wasn't everyone entitled to a bad day? I didn't really care at that point, but my rebellion didn't last long because the following day I was back at work with a new attitude. I guess I just needed a break.

**TIPS TO CONSIDER:** Ask that your nightly tests be combined as much as possible to allow for better sleep.

Realize that you have to take baby steps before you can start to walk.

Blessed are they who mourn,  
for they will be comforted.

—Matthew 5:4

15

## FEELING ALONE AND ABANDONED

At the end of my second week in rehab, Michael took a much-needed break away from his hospital duties. And though it was a much-needed break for him, it was a dilemma for me because, other than my time in ICU, this was only our second night apart since my ordeal had begun. Michael was always the one who was there to do what needed to be done and I relied on him for my very survival. Not only was he kept busy by his responsibilities to me and to his job, but there were household duties as well. Every day dogs had to be fed and messages had to be answered; bills had to be paid or dirty clothes had to be washed. In fact, the only thing I think he forgot to do was water my plants, which was quite obvious once I finally returned home.

It was a Saturday night and a group of his friends got together for cards and asked Michael to join them. He planned to go home, do some laundry, and then drop by for a short visit. However, since there was a chance he would be out late, Michael decided to go back to our house for the night instead of coming in late and disturbing me. All day long I knew that this was his plan, but I never believed he was actually going to leave me.

When it came time for him to go I tried my best to make him change his mind. Not only did Michael take care of me, but I had become so dependent on his being with me that I was afraid to be alone. He was my anchor and my support system. When he actually walked out the door, I felt terrified and abandoned. I convinced myself that he didn't care anymore and that it was too much for him. The next morning when Michael arrived at my room, I had a hard time forgiving him.

I had been unaware of the tremendous amount of stress Michael was under. If I had been, I might have been more understanding. But I had been preoccupied with surviving while he watched from the sidelines in anguish and hopelessness, feeling as though he was never doing enough. In hindsight, I can see that he suffered physically, mentally, and emotionally from the effects of cancer just like I did.

Many of my nurses commented that they were in love with Michael. I was continually told how lucky I was to have Michael by my side, and some even went as far as to say that, if I didn't want him, they would take him. One of my night nurses gave me (or I should say Michael) the highest compliment when she said, "In my next lifetime, I want a husband just like yours."

I have found that strength of character can show itself in many ways and when you least expect it. Recently, while I waited to check out after an eye exam, the lady behind the counter noticed in my file that I was a cancer survivor. She was also a cancer survivor and we started to share experiences. She told me that after she was diagnosed, while she was losing her hair and being sick from chemo, her husband left her. He explained to her that he just couldn't deal with it. A few weeks later, as she waited for her next chemo treatment at her oncologist's office, feeling alone and lost, she found herself talking to a man who was there waiting for his mother to complete her round of chemo. Each week she ran into this same gentleman while having her blood work done or receiving treatments, and their friendship grew. And, if you haven't already guessed it, they got married. She stated to me that, "having cancer was the best thing that ever happened" to her because she lost a selfish man and gained a caring one. Things do happen for a reason. We just have to wait and see what it is.

**TIPS TO CONSIDER:** Encourage your support person(s) to find ways to help relieve their stress. It will be healthier for both of you.

If you are the support person, look beyond the anger and the hopelessness of the situation and see a future. In believing, so will you be believed.

If God so clothes the grass of the field,  
which grows today and is thrown into the oven tomorrow,  
will he not much more provide for you,

O you of little faith?

—Matthew 6:30

16

HOME AGAIN

Toward the end of January, I started hearing talk that I would be going home soon. I had only been in rehab for about three weeks, and I felt I had a long way to go toward being independent. Just the thought of being home alone after Michael left for work caused panic, and I silently questioned the doctor's decision. I had started to dress and feed myself again, but wondered how I would ever cook an entire meal or do laundry by myself. What if I fell and couldn't get back up? What if something went wrong and I couldn't get to the phone? I remember thinking that meeting all of the goals set by my therapists wasn't the smartest thing I ever did. I was about to face life on my own and didn't know if I was ready.

On February 3, 2000, my husband's company had a Y2K dinner for all the people who had worked throughout the night on New Year's Eve. The restaurant chosen for this celebration was blocks from the hospital. I had assumed that I would not be going but that Michael would. However, two days before the dinner, the director came into my room and said that he wanted me to attend also. This outing would be a trial run to see how well I did, and if I handled it okay, it was possible I would leave the hospital the next day. I was excited but terrified at the same time. I desperately wanted to go home, but didn't know if I was ready to present myself to the public. The hospital had become a safe environment for me, and to walk outside took a big chance.

Michael went along with the director and persuaded me to give the evening a try. He promised we would leave as soon as it got too tough or if I got too tired. Suddenly there was a lot to do to get ready, and I gave Michael a list of everything I needed from home. There wasn't much to choose from as far as clothes were concerned because I only weighed about ninety-five pounds instead of my before-cancer weight of one hundred thirty pounds and not too many of the old clothes fit.

The night of February 3 arrived and I was a nervous wreck. It was difficult to steady my hand long enough to apply makeup again, and it was a challenge to cover all of the facial hair I had because of the steroids I had been given. After that task was completed came the wig. I had decided to wear the wig because, even though my "peach fuzz" had started to grow in, I was still uncomfortable with my baldness, especially for a first time out. I didn't want to feel separate by being almost bald, and I wanted to blend in, not stand out.

The nurses had made me promise that I would ring for them as soon as I was ready to go so that they could see the end result. A few minutes after I rang, three of the nurses walked in and didn't see me. I guess they were so used to seeing me bald, washed out, and with only a hospital gown or sweats on, that when they first entered my room, they thought I was a visitor. They assumed I was in the bathroom because they couldn't see me anywhere. After I spoke up, they were pleasantly surprised at the change. They went on and on about how good I looked and that they hadn't recognized me. True or not, their encouragement gave me some much-needed confidence. They wished me well and reminded me of the rules and when I needed to be back. Before I had time to leave the room, however, the nurses asked that I remember everything that happened. They wanted to hear all about it when I returned.

I hesitantly used my walker to get to the lobby and out to the van. It was a dark and cold February night, but it was beautiful to me. Except for the trip by ambulance to rehab, I had not been outside hospital walls since the previous November. I had forgotten what

fresh air felt like. It was not the stale or bleak image that came through my window. It was welcoming and alive. Suddenly, the walls were gone, and I saw beyond my limitations. It was my first breath of new life and I couldn't get enough.

Once inside the restaurant, I put the walker aside and used a four-legged cane because of the limited space between tables. The room was crowded and noisy but fell silent as soon as Michael and I arrived. Everyone at the party was aware of my situation and went out of their way to make me feel welcome. I went from the doorway to a couch and stayed there while people came by to say hello and wish me well. I didn't stay for the entire evening as I tired quite easily, but I felt it was a success. I didn't trip down the stairs, miss my mouth when I ate, or spill anything. When I returned to the hospital, the nurses were waiting as promised to hear all about the evening, and I felt like Cinderella coming home from the ball.

I greatly appreciated the interest and concern that the rehab nurses always took in what I thought and in what I did. In turn, I always felt comfortable with them and trusted in their abilities. I know that feeling valued and part of a caring team was an important element in my recovery. That night was no different.

The next day I was told I could go home. The day had finally arrived.

Throughout the morning there were mounds of paperwork to sign, future appointments to be made, supplies to be ordered (because of the colostomy), and packing to be done. Before I left, I was also given paperwork to take to the Department of Motor Vehicles to get a handicap placard. It felt strange being classified as handicapped.

After saying my good-byes to the hospital staff, I was wheeled to the front door where Michael anxiously waited with a loaded van to take me home. It was a brisk, winter morning and the air felt crisp and new. I was reminded of what daylight smelled like and how it felt on my skin. It was a completely different experience from the night before because now I knew that I was part of the world again and had left the hospital behind me. It wasn't a test, it was a bright and new beginning. Even now, I can remember that first taste of freedom.

Within moments, my feelings of exuberance dimmed. Reality checked in and I remembered where I was. How could I have forgotten (even briefly) that I was sitting in a wheelchair waiting to be loaded into a van? What good was daylight or fresh air when my future was still so uncertain? Yes, I was elated to be going home, but I was still afraid that something was going to go wrong and I would end up back in the hospital. Going home was almost too good to be true.

Before going home, however, there were errands to be run. We had to stop and purchase long cotton socks for me to wear under my leg braces so that they wouldn't rub against my skin, and we needed prescriptions filled. We also had to stop by a medical supply store for an arm pulley to continue my exercises and a four-legged cane to use in conjunction with the walker. There was also the motor vehicle department to get the handicap placard, and on to the grocery store to get food. Michael busily took care of all these errands while I waited in the van.

At long last, we pulled into the driveway, and I was greeted by a sight that at times I never thought I would see again—home. The garage door opened and our two dogs ran

out to greet us. At first, they were hesitant to come up to me, but soon realized who I was and started wagging their tails.

Michael handed me my walker and I very slowly made my way to the garage stairs. Even with the leg braces on helping me with balance, it took a lot of energy and time to lift each leg up each step. I was relieved but exhausted when I finally reached the landing.

As I opened the door to the house, I immediately saw that it was colorfully decorated with balloons and banners to welcome me home. Michelle had gone over the day before and decorated the lower level for my return. The second thing that I quickly noticed was our Christmas tree. It was still in the living room in front of the window where we had placed it months ago. Walking into my home that afternoon in February was like stepping back in time to the holidays. It was still Christmas.

I took all this in, and the tears flowed down my cheeks as I “walked” from room to room. I had traveled such a long and hard road to get where I was. The memories of all that I had been through came rushing back like a tidal wave over a solitary stone. The images were so vivid and I felt so many different emotions. In quick succession, I remembered the hardships and the struggle, the love and the support, the despair and the fear, and so much more. It was such an overwhelming feeling that all I could do was cry as Michael held me. Neither one of us had to say a word to know what the other one was feeling. Our emotions had become so entwined over these last few months that we were almost as one. I remember long ago when we were dating, I wrote a saying for Michael—“Love is more than one, but less than two.” It was even more true now as we held on tightly to each other and shared our tears.

**TIPS TO CONSIDER:** Vitamin T, the element of touch, is imperative for good health. It is essential that your family and the medical personnel provide this.

Be proud that you are accomplishing so much. Don’t give in to embarrassment.

He took away our infirmities

and bore our diseases.

—Matthew 8:17

17

## LIFE’S A ROUTINE

Once Michael and I calmed down from our emotional homecoming, it was time for me to get settled. After months of sleeping in a hospital bed, I was determined to sleep in my own bed in my own room, no matter how long it took me to get there. With Michael’s help, I slowly climbed the stairs and made it to our bedroom where I sat on the edge of the bed and relished the feeling of home.

Michael had gone downstairs to unpack the van, and he asked that I wait until he got back before doing anything. I was to sit and relax. But I was tired of being an invalid and I wanted to get ready for bed on my own. So I cautiously took off my leg braces, but as I tried to get to the bathroom I accidentally snagged my left foot on the rug and fell. I knew that my feet and toes would have a tendency to drag because of the foot drop, but it took numerous falls to the floor before I was willing to accept the fact that my leg braces were

necessary to maintain any type of balance and that I couldn't do it on my own. That night was just the first of many that would remind me of how quickly I could get hurt if I wasn't careful, and how weak I really was. To try and describe the desperation I felt that night as I sat on the floor unable to stand up or even crawl to the bed and pull myself up would not do justice to what I was feeling. Helplessly waiting for Michael to help me was a crushing blow of hard reality.

Michael and I, with Scott, Michelle, and their families, celebrated Christmas on February 12. The presents were unwrapped, Christmas music played, and we gathered together in thanksgiving for our holiday meal. After we ate dinner, the rest of my family joined us for dessert. It was a time to laugh, and to share and to be part of life again. It was a night that I will never forget because my life had changed forever. I knew that I would never take my family or my health for granted again. And I also knew that while I will never get my old life back, I was happy with the way my new life was taking shape. There was a lot to be thankful for.

Although I was home, life was not any less complicated for Michael. He was still the one who managed the house, did the laundry, and prepared the meals. Each day I gained a little more strength, but I was still unable to do much. I couldn't stand for any length of time, and I still had very little strength in my hands to open containers or hold utensils. We were soon back to the same routine of Michael fixing breakfast before he went to work and then returning to help me with lunch. Thankfully, our dinners were once again being prepared and delivered by various church members each evening, which left time for Michael to catch up on other chores.

Due to the continued lack of strength in my hands, I was still unable to twist the caps off any medication bottles or jars. One dilemma was easily solved by leaving the bottles open so that I didn't have to try and turn the cap four times a day. It was a little more difficult with the jars of jelly, peanut butter, and pickles, etc., because I couldn't very well leave them open all day. The result was that when I wanted to get something to eat I usually called Michelle to come over and open the jar(s) for me. Other than getting the bread out, there wasn't much else I could do toward feeding myself. Coping with being so helpless was harder than I thought it would be. I thought just being home would be enough, but it clearly wasn't.

Another chore that Michael had to contend with was the mounds of medical bills that arrived each day. Michael had set up individual files for each of the agencies involved. There were different doctors and different hospitals; there were personnel to run the tests and personnel to read them; there were anesthesiologists and consultants; the list went on and on. Before we knew it, there were eighty-eight files and counting. Michael closely reviewed each statement and determined what the insurance had paid and what we owed. Some of the agencies were in network, which meant we only paid 10 percent of the total and others were out of network, which meant we paid 30 percent. It was always mind-boggling to me to watch how hard Michael worked to keep everything straight and dealt with it in a timely fashion. He never seemed to get frustrated and handled it like he did everything else, patiently and thoroughly.

**TIPS TO CONSIDER:** Routine is good, but don't get lost in the normalcy of it. Enjoy the unexpected.

Be as organized as you can. The paperwork alone can overwhelm you.

Trust in the Lord with all your heart,  
on your own intelligence rely not;  
In all your ways be mindful of him,  
and he will make straight your paths.

—Proverbs 3:5–6

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## UNWELCOME TATTOOS

Even though I was out of the hospital, life didn't get easier for Michael. Not only did he have the same responsibilities as when I was hospitalized, but now he was taking me to doctors' appointments and X-rays. It seemed that I was always going to doctors' appointments. If it wasn't my oncologist, it was the pulmonary doctor, rehab doctor, neurologist, kidney doctor, or surgeon. And then a new one was added to the mix as I started seeing the radiation oncologist.

Normally, radiation is given right after chemotherapy, but because I had been so sick, my treatment was delayed. Now that I was better, my appointment with the radiation oncologist was scheduled for February 24. I felt comfortable and at ease with him right away. He was very patient and took the time I needed to explain the procedure. He described how I would be tattooed to mark the areas in which the radiation beam would be directed. My protocol was to have two separate beams of radiation, one directed from the top of the breast and the other one from the underside of the breast. He continued to explain that each blast of radiation would only last for about sixty seconds, but during that time, I would have to lie perfectly still. The doctor warned me that I would get progressively tired as the treatments continued and that there was a good chance I would get a radiation burn. I was also told that I would receive these treatments every Monday through Friday for thirty-three straight days.

Because of everything that had previously gone wrong, I wasn't convinced when I met with the radiation oncologist that the benefits of radiation outweighed the possible complications. I was trying to take a more active role in my care and not just let the doctors decide for me. It would be my decision and my decision alone. I had too many questions and concerns that needed to be answered before I could decide. The doctor again took his time to go over everything very carefully. After I listened to his advice and weighed the options, I decided to do the radiation. I was then scheduled to be tattooed on Wednesday, March 1, and the treatments would start March 2.

The tattoo procedure took approximately an hour. I somehow maneuvered the small stool in front of the table and lay very still while listening to the technicians talk about angles, measurements, and what was going to happen. I was bombarded with words and descriptions of things that I didn't understand and I prayed that they knew what they were doing. I tried to focus on lying very still so that there would be no errors in the tattooing. The hardest part of the whole procedure was the effort involved to keep my sore and very stiff right arm above my head. I kept imagining my right arm slipping and being zapped by the radiation beam by mistake.

The radiation oncologist was also concerned that I couldn't raise my right arm very far above my head, and he informed me that if there was no improvement before my first scheduled appointment, then radiation would be delayed. He couldn't take the chance that my arm would get in the way of the radiation beam (what did I tell you?). So, after being tattooed, I was sent home to exercise and try to loosen my arm. I had only one day to get ready, and it was up to me to keep my arm up and out of the way no matter how much it hurt. But there would be no delays. Somehow I would get it done.

Michael went with me for my first appointment when the tattoos were administered and also for my first radiation treatment on March 2. After that, I was on my own. It didn't make sense for him to leave work everyday for a thirty-minute procedure. I needed to start doing things for myself and this was the perfect opportunity.

Driving to radiation meant getting behind the wheel of a car for the first time since the middle of October. I was rather nervous about driving again and the leg braces made me even more so. Because of the braces, I couldn't use the upper portion of my foot to push on the gas or brake pedals like normal people, so I had to use my entire foot (or brace) to push the pedals. Actually, it was more like my leg pushing the pedals because the feet didn't move. To compensate for this handicap I drove slowly and cautiously. I also took the back roads until I became more confident in my ability.

The radiation treatments themselves did not take long. As soon as I arrived for the appointment, I changed into a hospital gown and waited for my turn. But struggling to raise my arm and keep it above my head was not my only problem. I continued to have trouble getting up on the table. I had graduated to the use of a cane (plus the leg braces) instead of the walker, but it was very precarious balancing on the stool before I had to jump up on the table. Once I was positioned exactly right, the staff left the room and I would receive the first blast of radiation. After the first angle was completed, the technicians returned to reposition the machine and give me the second blast. These radiation treatments always reminded me of the Star Trek episode where Spock had to be in this room by himself to get zapped in order to kill the alien beings that were attacking his body (I was Spock, and cancer was my alien).

I was not alarmed when, soon after treatments began, I started to have the side effects I had previously been warned about. The fatigue was nothing compared to the weakness during chemotherapy so it was very manageable. As for the burn, my sister, Jan, had provided me with a cream to apply on the effected area every day and it helped greatly to minimize the redness and/or burn. At the end of the thirty-three treatments, I only had what amounted to a bad sunburn (again, it was quite manageable).

Obviously, for me, I survived radiation better than I did chemotherapy. But I have heard from other survivors that, for them, chemotherapy was a breeze and radiation was more difficult. In talking with others, I realized that not only did each type of treatment have its own characteristic, but the effects varied from person to person. What caused one person to be tired and exhausted, might not even slow another down. What caused a loss of appetite for one person might produce hunger in the next. There was no set rule.

**TIPS TO CONSIDER:** Write down the questions you have for your doctors prior to your appointment. You don't want to forget something important.



Do your research before starting radiation and find a lotion or cream that will work for you and your skin type to minimize the burn.

O' Great Spirit,

Whose voice I hear in the winds,

And whose breath gives life to all the world,

hear me! I am small and weak, I need your strength and wisdom.

—An Indian Prayer

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## BLOWING IN THE WIND

On March 9, a week after I started radiation, I ventured even further from my comfort zone and met two friends for lunch. Time sped by, and before I knew it, it was time to leave. I enjoyed myself so much that I wasn't ready to go home yet. It was nice being outside four walls. I decided to drive to my workplace and visit other friends and coworkers. I worked at a very busy courthouse that had two ways of entry. One was the sheriff's entrance located on the ground level and the second was the public entrance located at the top of approximately twenty steps. Once inside, there was a metal detector. As I was still in leg braces and using a cane, I decided to enter through the sheriff's entrance rather than the main door for less hassle.

I lost track of time visiting my coworkers and ended up staying longer than I had planned. As I was leaving, I happened to notice how windy it had become and I became concerned. I suspected it was going to be difficult to maintain my balance in a strong wind long enough to get to my car. I was weak not only from the leg braces but because I weighed less than a hundred pounds.

My car was parked directly across from the sheriff's entrance. I rationalized that, if I just waited until the wind died down a little, I could make a dash for the car. (As if wearing leg braces would allow me to dash anywhere.) When the wind appeared to be calmer, I hesitantly walked out the door. I had taken a few steps when the wind slowly started to pick up and it became difficult to stay standing, let alone to walk. However, I knew I had to get to my car so I kept going.

I got as far as the light pole that read Sheriff Parking Only when the gusts became more severe. I quickly grabbed on to the pole before I was knocked to the ground by the force of the wind and I held on for dear life. I began to feel apprehensive about what I was going to do next. I couldn't go forward and I couldn't go backward. My cell phone was in my fanny pack, so I thought about calling Michael to let him know that I was stuck to a pole, and ask that he come get me. But I wasn't sure if I could let go of the pole long enough to get to the phone.

As I stood there debating my options, one of the deputies stuck his head out the door and asked if I needed any help. I would have thought it was obvious that I needed help since I

was hanging on to the pole as if my life depended on it, but I decided to refrain from any unwise comments. I told him that I was trying to get to my car but couldn't do so because of the wind. He walked back inside for a moment as my panic set in, and then he came over, took hold of my arm, and guided me across the street. It was so windy that even the deputy seemed to be having trouble walking, and he probably weighed about three times what I did. As he held my car door open for me to get in, he stated that, "Next time maybe you should check the weather before coming in." My response was that I had checked the weather: for cold, rain, and snow, but never realized that I had to monitor the wind, too.

The next day, there was a picture in our local paper showing a woman holding on to a pole with her hair blowing almost straight back. Michael teased that it could have been me, but I reminded him that that would have been impossible because the woman in the picture had hair. (It helps to have a little humor in times of stress.)

After this experience, I tried to keep better track of the changing weather so that I wouldn't be caught off guard again. But there were many times I would leave my house when the weather was fine, and by the time I stopped at one of my errands, an unexpected wind would appear and pull the car door from my fingers when I attempted to get out. I would then turn around and return home unable to complete my errand(s). But, some days I couldn't just return home because I had to go to radiation (or work when I finally started back). On those days, I always called ahead and arranged for someone to meet me at my car and help me "walk" into the building. (A simple windy day had again confirmed just how vulnerable I was.)

Being constantly aware of my limitations again became obvious one Saturday morning when I decided to go shopping by myself. As I was browsing in a local retail store, I accidentally dropped my cane. I was in the handbag department and there were customers and sales clerks all around, yet no one offered to help. I was embarrassed by my vulnerability and didn't want to bring attention to myself, so I struggled to pick up the cane on my own and didn't ask for help. The trick was not falling over while leaning toward the floor to grasp the cane. After what seemed like a long struggle, I finally managed to successfully complete my task, but I was still shocked that no one had offered to help.

I was determined to prove to myself that this was an isolated incident and that if I dropped my cane again, the results would be different. After positioning myself (I wanted to be able to pick up the cane more easily if it came to that), I dropped the cane two more times in that store, once in a grocery store, and once more in another department store. The result was the same in each location. Not one person offered to help me. And not only was there no attempt to assist me with my cane, but no one even held the door open for me if I exited at the same time. After that experience, I was discouraged and disappointed in people. Yet I received a whole new understanding of being a person with a disability.

I saw this insensitive behavior in both actions and in words. One day as I talked to a friend of mine, he mentioned that he was selling his business. The young man who purchased his building had been injured in an automobile accident and had been "rewarded" with a monetary settlement. My friend made the comment, "It was worth

being in a wheelchair for that kind of money.” After a slight hesitation, I replied that, “No amount of money is worth your legs.” And though I was stunned by his careless remark, I felt it was important to help him understand how his comment made me feel rather than get angry or ignore what was said. Too often, we ignore what hurts us instead of standing up for ourselves. But until we value ourselves, no one else will.

**TIPS TO CONSIDER:** Be aware of potential problems. If the weather could be an issue, plan an alternate day or time. If weakness is a concern, arrange assistance in advance.

Be sensitive to your own comments and behavior. By setting a good example, you may be able to change the opinion of others.

For I will restore you to health;  
of your wounds I will heal you,  
says the Lord.

—Jeremiah 30:17

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## HELP WAS ON THE WAY

Throughout the next few weeks, I continued to go to radiation appointments and to doctors’ appointments. My “normal” life went on as usual, and I even had enough energy for a few fun activities such as celebrating Scott’s birthday, dinner with friends, and going to movies. I was determined that my life would not come to a halt just because my life had become more difficult.

On March 27, I started back to work. I worked part-time, and my doctors agreed that I was healthy enough to handle it if I took it easy. I also had to promise to continue my daily exercises and take naps when I got tired. I hated being so weak, but I wasn’t taking any chances of a relapse. Getting sick again wasn’t in the plan, so I did whatever they requested.

Prior to my first day back at work, I had arranged with sheriff’s department personnel to enter and leave by their entrance instead of trying to maneuver the front steps of the courthouse everyday. The deputies were always accommodating and even offered to escort me to and from my car on windy days. And though they were always pleasant about doing so, it was still embarrassing and frustrating for me to rely on their help.

My return to work was only for a few weeks however because arrangements had been made for me to go back into the hospital on May 8 for more surgery. It was of my choosing this time instead of the doctor’s, but being readmitted into any hospital was still a traumatic decision for me to make. I was nervous and scared and continually questioned if I was doing the right thing. I knew I didn’t want more surgery, but worse than that, I didn’t want to continue wearing the bag if I had a choice.

Shortly before leaving rehab, I had talked the situation over with my surgeon and she had agreed that I was well enough to handle the procedure. She assured me that as soon as I was okay with the idea, she would schedule a time to reattach what was left of my colon. I trusted her when she said that after a week in the hospital, I would go home and that everything would be fine. After little hesitation I scheduled surgery for May 8.

Before surgery could happen, however, I had to complete radiation. Graduation Day came on April 17, and compared to everything else I had gone through, radiation had gone smoothly. I experienced the expected radiation burn and the fatigue, but there were no other complications or surprises.

With radiation completed, I was scheduled to start Tamoxifen. This is a pill that helps block estrogen and would hopefully help prevent the cancer from coming back into the breast. My oncologist had wanted me to start taking Tamoxifen sooner, but I waited until the radiation was over. I had experienced too many problems in the past to start two unknowns at the same time.

I knew by now that with any course of treatment or drug, reactions varied from person to person. Taking Tamoxifen was a new undertaking for me and I didn't know what to expect. I quickly learned that taking a pill on a daily basis was simple. It was coping with Tamoxifen's side effects of hot flashes and weight gain that was a little harder. When I mentioned to my surgeon about the weight gain and how it showed up in new areas, she just laughed and said that I would "now gain weight like a guy and have a beer gut." That was just what I wanted to hear. I falsely believed that I would counter this reaction by exercising more and changing my eating habits. However, this opinion changed after a few short weeks when I saw no results. For the next six days, I tried something more drastic and limited my food intake to one sandwich, two slices of toast, and a salad each day. When I returned to the scale, convinced that I had lost weight, I was shocked to learn otherwise. Not one pound had come off. I adjusted my thinking and decided that life was short, food was good, and I would worry about it later.

The hot flashes were sporadic and uncomfortable. There were many periods throughout the day and night when I felt extremely hot from the inside out. There were times I was also covered in sweat. But no matter what I tried, there was very little relief. During the night, the blankets got thrown off and on, and during the day, there was always a fan blowing. In retrospect, these were minor inconveniences. Life was still good.

**TIPS TO CONSIDER:** If complications arise, isolate the different treatments and/or medications to determine what is causing the reaction. The answer could be as simple as changing a prescription.

Look into alternative relief when experiencing adverse side effects. A more natural response may be easier on your system.

Finally, draw your strength from the Lord  
and from his mighty power.

—Ephesians 6:10

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## BACK TOGETHER AGAIN

At the beginning, when everything went wrong, Michael and I vowed to take every opportunity to celebrate life. Completing radiation and starting on my last course of action was cause for celebration. We promptly decided that a quick getaway was in order, and we planned a short trip to a marvelous bed and breakfast in Eureka Springs, Arkansas. We booked the honeymoon suite because the rooms were larger and there were

no stairs inside or out. It also had a deck on the back, a Jacuzzi in the bedroom, and desserts were served every afternoon. It was a perfect way to pamper ourselves.

Though I tired easily, we walked, shopped, and ate till we dropped. Then after a delicious meal each evening, we watched movies or read books. I was grateful to have my life back and looked upon each day as a new beginning. The chirping of the birds sounded more musical, the leaves of the trees shouted out with more color, and the sky was blue beyond description. For a short time, reality and home were far away.

On our last night in Eureka Springs, I woke up at one o'clock in terrible pain. I went into the living room to keep from waking Michael up, but was barely out of the room when he noticed I was gone and came looking for me. He got some pain medication for me to take and grabbed a pillow off the bed so I could apply pressure to my stomach, which seemed to help. After a few hours, the pain lessened and I was able to get some sleep, but I woke to confusion and worry about what had happened.

I went to the doctor's first available appointment which was the following week. She told me the pain was caused by my colon surgery and I believe she called them lesions. She told me, "Everything is okay," and I was not to worry. I had heard those words before when things went wrong and they brought me no comfort. My life again felt fragile and broken.

On May 3 Michael and I met with my new oncologist at a nearby teaching hospital. I was no longer comfortable with my original oncologist because of all the complications I had endured and needed a change. Though the problems may not have been entirely hers, she was the one in charge, and I felt she had dropped the ball. It also didn't help that she told my sister while I was still in intensive care that if she "had to do it all over again" she "would have done it differently."

After the new oncologist reviewed my case file, we talked about what my protocol would be, and my first appointment was made for after the May 8 surgery. I would go in for checkups every three months and it would include blood tests, bone scans, mammograms, X-rays, ultrasounds, and whatever else was needed. There was a great sense of relief knowing that I would be monitored so closely. My original oncologist didn't want to see me for a year, even after all the problems.

May 8 arrived quickly, and Michael and I again drove to the hospital in the early morning hours. Surgery had been scheduled for seven thirty and we had to be there by six. Have you ever asked yourself if it was better to have surgery first thing in the morning when the surgeon was fresh (but maybe not fully awake) or in the afternoon when the surgeon had performed a few surgeries (but getting tired)? It was something to think about!

The surgery went well, but when I awoke, I immediately questioned whether I had done the right thing. I had never been in such pain. I had staples from breast bone to pelvic bone, and there were more staples on the right side of my stomach where the stoma had been. It felt like my entire gut had been ripped open, and I started to wonder why I hadn't left well enough alone. It didn't take me long to realize that the morphine drip by my side was my new best friend.

The rule was that I couldn't eat or drink anything after surgery until I passed gas. I couldn't even have ice chips. Nothing. Nada. Zilch. I found it hard to keep my mind off

of a tall glass of cold water. The plan was that once I passed gas, and the doctor knew everything was working okay, I would start on liquids and work up to solid food. Needless to say, I had never been so eager to fart in my life. I was hungry and food became foremost on my mind. The big event happened at four fifteen in the morning on May 11 and my fasting was finally over.

As promised, a food tray arrived for breakfast the following morning, and even though it was only broth, juice, gelatin, and ice cream, it tasted great. It was food. My surgeon visited later that day and said that if I felt up to trying solid food the next day (and if I kept it down), I could go home that afternoon. She said it didn't matter how much I ate, just that I kept it down. Well, you didn't have to tell me twice. By two o'clock in the afternoon on May 13, after successfully eating a small amount of food, I was ready to go home. In and out in six days. I couldn't believe it, no problems, as promised.

For quite a while after surgery, I was in a lot of pain. But it was important for me to get back to a normal routine. There were too many doctor appointments to keep, meetings to attend, and family to visit to let the pain stop me. Don't get me wrong, it definitely slowed me down, but I knew that the pain and discomfort would soon pass. I just had to wait it out. I remember at the time comparing myself to Frankenstein's bride with all the staples and scars I had, but I could laugh about it, and that's what was important (and I don't care what the nurses tell you, those staples hurt coming out too.)

Although I no longer had the bag to change and I didn't have to deal with the accidents and the noises anymore, I still had adjustments to make. With only eight inches of colon, eating such foods as fruit, vegetables, salad, spicy food, etc., go right through me and I always need to be near a bathroom; foods such as bread, meat, potatoes, cheese, etc., take a longer time to go through my system and, in turn, give me more time. Obviously, I adjust what I eat when I find I will be away from the house or outdoors.

Another side effect of having only eight inches of colon is that, no matter what I eat, I visit the restroom more than I ever did before and some days there are never enough bathrooms around. I also have to be very careful not to become dehydrated, either by sickness or on hot summer days, because of potential complications. One of my biggest fears is wearing a bag again, and even though I know it's irrational when so many other things can go wrong, it's still a great concern for me.

**TIPS TO CONSIDER:** If possible, take short trips during your treatment to unwind and find purpose again. A less stressful atmosphere can do wonders.

It was recommended that I take fiber each day to help with my regularity (or lack thereof) because of the colon issue and it makes a difference. Also, remember to drink plenty of fluids.

Ask and it will be given to you;  
seek and you will find;  
knock and the door will be opened to you.

—Matthew 7:7

## ALL AROUND ME

While my energies were focused on surviving cancer and all of its complications, others were fighting the same battle. I couldn't turn on the television, read the paper, or get on the Internet without being reminded of the big C. For a disease that had seemed so remote, it was everywhere. How could I have been so blind and not seen what was there all the time? Acquaintances and close friends were being diagnosed, and it suddenly became all too clear that I was just one of many who suffered from the ravages of cancer.

I was blindsided by this very fact at the end of May when Michael and I got word that a very close friend of ours had a reoccurrence of his cancer. We went to visit John as soon as we could, and I was shocked at his appearance. He was so thin and pale, yet when he spoke, his voice was still deep and strong. It was such a contradiction. I too had been just a shell of who I really was, and I felt guilty that I was doing so much better and John was not.

When I was in intensive care, John had come to see me. He had brought with him an angel that I had given him years ago when he was first diagnosed. I had given him this special angel out of my collection to watch over him while he was in the hospital. My intention was that John would see this beautiful, white angel as a symbol of faith and hope. After he was released and on his way to recovery, he thanked me numerous times for his gift and told me that he believed having the angel with him had helped a great deal. When he visited me in ICU, he was returning the favor and left this same angel by my bedside.

During our May 27 visit, we talked about our shared angel and our hopes and dreams. We reminisced about old times and shared some laughs. John tired quickly though, and when we left, we promised to come back soon. It had been only a year since my diagnosis, and this was my first experience with cancer after remission. I was extremely saddened by this reoccurrence for John (within three years of his original diagnosis) and I wondered if this was what my future held as well.

When I was first diagnosed, I once asked a cancer survivor if she ever got beyond the word cancer and her reply was no. She said that the feeling or panic that cancer conjures up may lessen but it never went away. I sadly came to understand what she meant, but I had hoped it would be different for me.

And Michael felt the same way. He once stated in a support group meeting, "It feels like a giant boulder is hanging over my head waiting to fall and crush us." I couldn't have described it better. I never forget that I am a cancer survivor. It's in the back of all my thoughts and all my feelings. It is a constant reminder of where I have been and where I may end up. For me, life goes on and tragedy dims, but the fear of cancer lives forever. And it changes lives forever, for the survivor and the supporter.

**TIPS TO CONSIDER:** If you are a supporter, be aware that you may be dealing with a survivor who is worried about a reoccurrence. Let them freely express their doubts and fears without worry of criticism.

Don't be afraid to use symbols that may offer hope and faith. Belief is a strong motivator.

God is our refuge and our strength,

an ever-present help in distress.

—Psalm 46:2

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## LIFE GOES ON

Life did go on, and the months started to slip by. In June, I started celebrating anniversaries. It was sobering to look back and see where my life had been just a year prior, but at the same time, I was thankful. But being thankful wasn't enough, and I wanted my life back, the life I had before cancer. I wanted to get beyond the leg braces, the fatigue, and the hair loss.

To start the process, I returned to work with a new purpose. And, though I tired quickly, it was a beginning. I also increased my exercise and attacked it with a stronger will. I was still very limited on how much I could do, for how long, and on what machines, but whatever I accomplished, I felt good. I came to understand that somehow I would accomplish what I needed to accomplish when I needed to accomplish it and no sooner. Time and patience was all I needed.

Soon it was August, and my family and I registered to participate in the Susan G. Komen Race for the Cure (an event to benefit breast cancer) for the first time. I had never raced before, but it was imperative to me to be part of this important event because I felt the Komen race was a legacy passed down to those of us who survived. I had many doubts about completing the race due to my weakened state and the leg braces, but I knew I had to give it my best shot.

Race day arrived, and I had set a goal to finish the 5k run/walk in under an hour. Most of my family joined me in this tribute because cancer had changed us all. No one felt exempt from the fear and worry of cancer; we wanted to celebrate life together as a united front. It was a typical hot Kansas day in August and even at seven thirty in the morning, the heat and humidity were almost unbearable. Shortly after we started, the hot sun and the never-ending hills began to have their effect on me. Then, about half way through the race, in addition to the weather and the landscape, I became painfully aware of a blister forming on my left heel under the brace. I was uncertain if I could complete the race, let alone reach my goal. The finish line had never looked so far away as we slowly trudged along the designated route. I finally crossed the finish line in fifty-nine minutes. I had made my goal and I was proud of myself. I had accomplished more than the doctors had ever thought possible and it gave me hope.

As the months continued to go by and my strength returned, I felt ready for another visit with John. I had heard he was not doing well and I wanted to see him as often as possible. Word had gotten out about his illness and many of our mutual friends joined Michael and me to share food and stories. We sat out on the deck in the warm sun and crowded around John as he sat in a big cushy chair that helped ease his pain. It was hard to see him so ill, and though it would have been easier for me to ignore what was happening, I knew our visits were important to John. He not only wanted our support, but he needed it, and I refused to fail him.

August also saw the beginning of my Aredia treatments. These treatments were administered every twenty-eight days for two years. This drug was given by an IV drip



that took two and a half hours to complete. When my oncologist first told me that I would start this program, I was disappointed. I had thought I was through with long treatments and IVs. She explained that this was a preventative measure that helped strengthen bones and would help keep the cancer from coming back into that area. It was a necessity, and therefore, it happened. Complaining did no good.

Like radiation, but unlike chemotherapy, everything went smoothly. The only negative effects I encountered from the Aredia drug were being very tired the night of each treatment and within twenty-four hours after each treatment, I got flulike symptoms that lasted one day. Michael always went with me so I scheduled each treatment at noon to help limit his time away from work. While I was being hooked up to the IV, Michael got us lunch. As the drug slowly dripped, we ate, watched TV, and read books until it was time to leave. Some things never changed. Also during these times of pause and quiet, I often wondered if my treatments would ever go away. My life felt like a constant hospital stay with no relief in sight.

To distract myself from the ever-present world of cancer, I decided to focus on the promise I had made to my parish priest about forming a cancer support group. I put together the components and met with church personnel, counselors, and facilitators of other support groups to blend ideas and work out a proposed format. The final plan was very similar to the group that had done so much for me, and hence, we invited all people with cancer to join us no matter what type or stage and no matter what religion.

Our first meeting was September 19. In attendance were four survivors, our parish priest, the caring minister, a counselor, and two members from my previous cancer support group. They all came to offer their support and participate in our sharing. It was a good start, but I was fully aware that it took time to build a foundation for a lasting group, and I knew not to be disappointed if only two or three people showed up to a meeting. The overall purpose was to help whoever we could, even if it was only one person at a time.

Coordinating the group was beneficial to me as it kept my energy directed and my mind occupied. I felt grounded and hopeful that we would all celebrate many years of survivor anniversary dates together. However, within the first few months, three of our members passed on. That many deaths so soon was hard on the whole group, and we slowly started to dissolve as our hopes and dreams turned to doubt and fear. The devastation and suddenness of death in such a small intimate group was eventually too much to overcome and we would last only a little over a year. During those months that I struggled to keep the group going, my own sense of failure was hard to ignore. I continually questioned what more I could have done. Was my own cancer so new that I couldn't get beyond my own experiences and see what was needed? Was my reason for starting the group just an empty distraction? In losing that group, I felt cancer had won again.

But this was September of 2000 and I didn't have the ability to see into the future and know that my support group would fail, so I was riding high on my life having a purpose. I received more good news in September and learned that my leg braces were no longer necessary. There was still pain and my feet didn't work the way they should, but the doctor said, "It was time." The next step in my recovery had arrived and I needed to learn how to walk on my own again. The concept of using my own legs was surreal and

unimaginable. It was a dream come true that was both exciting and scary at the same time. Was I ready?

I didn't remove the braces at the doctor's office, because I wanted to be home for my first steps. It was a precious and private moment when I discarded the braces and experienced a new freedom that most people said would never happen. The braces were off, and for the first time in months, I could bend my feet and ankles. I know the simple act of moving my feet is not impressive, but it was monumental for me. It was a movement that most people take for granted and one that I had been denied, and not only denied, but told it was impossible.

I can still remember those first moments when my feet felt the warmth of a deep, plush carpet and the cold of a hardwood floor. I had forgotten about the many different textures and surfaces that surround us every day. This was a miracle, and I didn't want to just stop and smell the roses, I wanted it to become a way of life. I wanted to enjoy every slow and hesitant step I took. I had reached the next level of normalcy and I savored the feeling. Walking without leg braces also meant I could start wearing normal shoes instead of large clunky ones that fit over braces and big cotton socks. It also allowed me to start exercising with more intensity. With this small change, I came to believe that I could do anything and that the future was mine to grab. I felt capable and confident, something I hadn't felt for a long time.

It was suddenly fall season and I took many opportunities to take walks outside, to cautiously stroll among the fallen leaves, or stand barefoot in a shallow stream. And, though my days still included support groups, doctor's appointments, and treatments, I approached them with a new attitude. It was the same routine, but it was packed with new adventures. I was able to go places and do things that I hadn't done in a year and I made each day special.

December was there before I knew it, and there were Christmas parties to attend and a holiday season to remember. Life had gone on without me the previous year and I was determined that it wasn't going to happen again. The memories of hospitals and desperation faded as they were replaced with ones of Christmas lights and spirit.

Michael and I had decided to celebrate my second birthday (as I came to view the date of my lifesaving surgery) on December 7 and reserved a room at a local restaurant to host a party. I had been given a second opportunity at life and I never wanted to take it for granted again. The party was a way for me to share this feeling with my family and to thank them for all they had done. For a brief time, we forgot about the worries of tomorrow and celebrated the joy of each day.

In the past, Michael and I had always held an annual Christmas party. It was a way to thank old friends and connect with new ones. I had wanted the year 2000 to be no different, but Michael was concerned about my energy level and asked that I plan a smaller, fiftieth birthday party for January instead. It didn't really matter to me if I had the party in December or January. I just needed to acknowledge how far I had come and not let the lingering doubt of cancer prevail. And to plan a future event with a cautious certainty that I would attend was worth waiting for. It didn't matter that I turned a half century; I was happy to be alive, no matter what the age.

Shortly after the invitations were sent, our friend, John, called. He had received our invitation but regretted that he would be unable to attend because he “didn’t leave the house much anymore.” He asked that we get together again soon at his home. On December 30, John passed away. I regretted not seeing him one last time, but I was thankful for the time we did share. His death was a confirmation to me that my cancer could come back at any time and I must always be prepared. It was again made clear that moments are to be cherished and grievances are to be forgotten.

The year came to an end, but change did not. After nineteen months of upheaval, I had hoped my life would settle down, but near the end of December, Scott informed us that he and his family were moving to New Mexico. It was hard to understand his reasoning and I felt angry. I needed my family close in case my cancer came back, and I didn’t understand why it was so important for him to move eight hundred miles away. In looking back, I wasted a lot of time and energy before I finally understood that I couldn’t change anything. Everything happens for a reason, and it wasn’t up to me to change his mind. He had his own life to live and his own path to follow. Just as I was forced to do with my struggle with cancer, I learned to accept the present, let go of the past, and accept the future. We are all where we are meant to be.

After such a traumatic year, I was grateful when the New Year arrived. I was convinced that 2001 would bring relief and stability. I became more comfortable with where my life was and I found time to enjoy all the special moments it offered. However, my period of calm didn’t last long, because by March I was back in the hospital again. I had gone to my surgeon with more stomach pain and learned that two hernias had developed. I was scheduled for more surgery and accepted that this would become a way of life for me. As my surgeon cut down the same scar as twice before, I soon looked like a small road map, each line signifying a new change and a new direction. One thing I knew for certain—change was constant; adaptability was necessary.

**TIPS TO CONSIDER:** Always remember that there is life after cancer. Be a part of it and don’t just watch it go by!

Do the best you can and then let it go. Negative energy is unproductive.

The favors of the Lord are not exhausted,

his mercies are not spent;

They are renewed each morning,

so great is his faithfulness.

—Lamentations 3:22–23

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## WRAP-UP

Like many survivors, when I get sick, I tend to worry about what is really wrong. When I eventually find out that it’s just a cold or just the flu, I feel foolish for being so weak and stressed out. I was once told that after chemo it takes the immune system three to five years to bounce back, but does it ever really return to normal after chemo? Can it revert

to fighting form when there has been so much destruction? Over the years I have learned to release the worry and replace it with hope, but it was not an easy adjustment.

In one year alone, I was hospitalized three times because of a bowel obstruction, and it was hard to stay optimistic when the fear of having a colostomy again was very real. I could tell myself all I wanted that, “everything is as it should be,” but in reality it wasn’t enough. Images of past horrors crowded my senses and blocked out any rational thinking. It’s a continuous struggle to convince myself that I am where I am supposed to be and to not worry.

But no matter how I feel, the hardest part of getting sick is seeing what it does to Michael. Any new or imagined illness for me is another hardship for him, and he usually takes it harder than I do. When Michael made the comment once about “a weight hanging above us waiting to fall,” I felt it was a temporary feeling. I was convinced that over time we would both come to believe that I was beyond any relapse and we could relax. I have found that that is not the case; there will always be illness and stress that cause worry. But good times or bad times, it is how these situations are handled that will make the difference.

Sometimes I find an unexpected silver lining to being sick. Like the time I was sick with a viral infection and my grandson asked me how I was feeling. When I explained that I wasn’t feeling well, he ran out of the room and returned seconds later carrying his teddy bear. He turned on the light so that I “wouldn’t be scared of the dark” and climbed up into the bed. He handed me his teddy bear and said, “T, I will always protect you,” and then he patted my leg. His words filled me with a warmth that surrounded both my heart and soul. He left me speechless and weak with emotion. Was having cancer what made these moments stand out? Would I have built this special bond between us if I hadn’t gone through a life-threatening illness? I would like to think it would have happened anyway, but I will never know for sure.

As I close with these thoughts and reflections, it is my desire that this story will benefit those who read it. That the person who is thinking about giving up will find strength and the person who has doubt will find hope. That all will come to believe that as life goes on around us, each day has value. That no matter what happens, life is a joy to be experienced and remembered. There will always be questions and worries, but there will also be answers and peace if we look beyond ourselves.

Every experience has become a part of my life for a reason and I have learned from each one of them. When I feel lost, stressed, or in pain, I try to reach beyond my own personal space and not get bogged down with the negative thoughts that come with those feelings. I ask myself how this thought or emotion rates in the whole scheme of life. In twenty years, will it make any difference? I then strive to put it in perspective and focus on the happier moments in my life and what truly matters. And the best part of inner reflection is that it gives me the opportunity to remind myself that life is uncertain, and to waste any of it is a tragedy. I believe we need to look at life’s obstacles as part of a journey and not as a hardship or a test. To view them as a stepping stone to the other side, not as a boulder blocking the way.

Change can be good if you let it. I recently took a train ride to California with my brother, John, and a fellow traveler asked me to explain how my life had changed after facing a

terminal illness. He wanted to know how a person lives life while confronting death. John described it best. He said that the biggest difference was that before I had cancer I was a black-and-white type of person and now I have more gray areas.

During my struggles with cancer, I often questioned death and what was on the other side. I recall being told that the two most asked questions when someone faces death are “Have I loved?” and “Was I loved in return?” I am glad that I was given the chance to appreciate the fact that I can emphatically answer “yes” to both questions. Life is a gift none of us should take for granted. There is so much out there, waiting for each of us every day.

I wouldn't wish what I had gone through on anyone. It was a long and difficult journey, but through it, I found a new self-worth. I have come to like and respect the person I am now. I just wish it hadn't taken a serious illness to get my attention. I have also come to believe that anyone who has experienced cancer up close and personal, no matter how easy or difficult the treatment was, will testify to the fact that having had cancer changed their life in some way for the positive. That no matter how hard the journey got or how many obstacles they had to overcome, the fight was always worth the battle.

Even with all the hardships I live with on a daily basis: the pain, bowel restrictions, numbness in my right arm, and the worry about my future. I still consider my path, the right path. There are so many joys in my life that I would have missed had I given up. Like brisk fall days filled with the colors of burnt leaves, a full moon against a starlit sky, sleepovers with my grandson where he tells me he loves me before curling up against my side to go to sleep, family gatherings where I can almost reach out and touch the love that we share, phone calls with my daughter four times a day to talk about nothing, or the love in Michael's eyes when I catch him watching me unexpectedly. I know that there will be dark days, but I also know that I will continue to look for the light and to strive for happily ever after.

I pray that I am now better prepared to face whatever comes my way and that, no matter what happens, I will learn from each lesson I am given. That I will know in my heart whatever I am meant to accomplish or however I am meant to fail—there is a purpose.

I also hope that in reading my story of pitfalls and mountaintops you will find your way through cancer a little easier, whether you are a survivor or a supporter. I pray that you soon come to understand that to truly enjoy life, you need to live it like you were facing death.

May God watch over and keep you safe.

Therese Swarts Iverson

Once I said in my anguish,

“I am cut off from your sight”;

Yet you heard the sound of my pleading

when I cried out to you.

—Psalm 31:23

No feeling is a wrong feeling—

you are where you are supposed to be.

## EPILOGUE

### IN EMOTION

A anger, alone, answers, acceptance, and adjustment

B bargain, broken, balance, beginning, and being

C confused, complaining, control, caring, and critical

D denial, depression, dreams, disease, and death

E energy, emotion, end, exhaustion, and empathy

F faith, fear, family, frustration, and focus

G God, grief, goodbyes, gamble, and gentle

H hope, hair loss, helpless, healing, and hide

I insecure, information, intense, irritability, and illness

J journey, jaded, just, jealous, and journal

K knowledge, kindness, keep, kneel, and Kodak moment

L last rites, laughter, lost, lonely, and love

M maze, moody, meaning of life, mourning, and memories

N needy, negative, nervous, numb, and nurses

O objective, observe, options, operation, and obligation

Q questions, queasy, quest, quiet, and quit

R resigned, rough, reality, restlessness, and relapse

S sick, shattered, strong, scared, shock, and support

T tears, tired, trauma, time, and trust

U understanding, uncomfortable, uncertain, and upset

V victim, violent, vain, values, and vomit

W work, worry, weeping, withdraw, and watchful

X X rays, X rays, X rays, X rays, and more X rays

Y years, yelling, yourself, yearn, and yo-yo

Z zeal, zero, zombie, zealous, and zigzag

What readers are saying

How do I begin to tell you what an amazing book you have written? You have to supply Kleenex when this is published. Please do not listen to who ever advised you to take out the Bible verses or poems. They are so much of who you are. What a family you have. To

have a husband that is there for you every single step of the way is so wonderful to read about, it lets us know there is such a thing as true love.

From the very first page to the last page it grips at your heart and leaves you emotionally spent. What a courageous woman you are and some one I would love to someday meet. I too have gone through something horrific with a loved one, something that has changed my life forever. You have given me courage to maybe someday put feelings to paper so I might help the next mother go through what I have experienced.

I am looking forward to having your book in hard cover and having you sign it for me. It makes us stop and think what goes on in our hospitals when we can't be with our loved ones all the time. I have not had to deal with a loved one or even a friend as they battle cancer, your book will be a God send if I ever have too. You have given us a part of your life that I am sure will help anyone facing cancer. Keep up your faith. And give my regards to your wonderful family.

What readers are saying

From anguish to joy, Therese Iverson's cancer journey has impacted our spiritual cancer support group for the last nine years. Her path began with disbelief of the cancer diagnosis. Just how could this happen to a body in perfect condition? From "feeling great", she quickly moved to despair with the ravages of chemotherapy and radiation. Her strong faith, her "never giving up" persona, and her loving family and friends transfused her body from weakness to strength. Her journey was and is of HOPE. As the nurse facilitator of her spiritual support group, Therese's joyful footprints rest today on my heart.

What readers are saying

My sister-in-law, I will call her Sue, was diagnosed with Ovarian Cancer in June 2006. When I talked to Sue, our conversations were about her cancer. She was scared and looking for reassurance. I wanted to tell her she would be ok. I told her about my friend Therese who survived breast cancer. I told her how Therese helped people who were fighting cancer, by sharing with them her experience. It was at this time Therese gave me her written account of her fight with cancer. I had no idea that she had faced death, and the nightmare of her recovery. She survived what many have not. I told Sue all the details of what happened to Therese. I worried about telling her of Therese's setback with the therapy and the horrific ordeal she faced with the hospital and almost dying, but I wanted Therese's "Real Life" survival story to give her hope. Sue made it through chemotherapy without the trials and sickness that Therese did but I know that the information in Therese's book helped greatly. It was those phone calls when she asked questions about those intimate details of fear and survival that Therese so bravely articulated in her story that gave her hope in those darker days of despair.

Thank you Therese.

THANK YOU

I don't know how to thank you

For all you did for me,  
Always asking what you could do  
No matter the task or plea.  
Many times you'd help me eat  
How I dreaded those dinner hours,  
Small containers would have me beat  
And utensils were not in my power.  
You did our laundry and brought us food  
And healthy drinks you would blend,  
You'd read me stories to improve my mood  
Helping both mind and body to mend.  
Through all the support and the many visits  
Someone was always by my side,  
For family, you're as good as it gets,  
Your help is what turned the tide.  
I owe you a debt I can never repay  
When you joined me in this fight,  
But for now we celebrate each new day  
In this journey we call life.

#### PRAYERS AND INSPIRATION

Hebrews 11:120

Job 11: 16-1824

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