

the final 24 hours after it had finally gone away they readily accepted me back and rejoiced with me at my unexpected discharge.

I have never made any secret of my strong belief in the saving grace of Jesus. It is inevitable therefore to turn to my Christian values for an answer to my question. The providential circumstances of the arrest itself together with no less than 10 subsequent unusual coincidences leave me in no doubt that the hand of God was on me throughout this experience. If, as Jeremiah asserts, God is able to replace our hearts of stone with living hearts that can share eternity with Him it is not difficult to believe that through the marvels of modern cardiac surgery He can replace a tired heart with one able to cope with all the demands made on it. The spiritual effect of the experience on me has been profound. Whatever state I was in during my arrest it presumably bears some relationship to death. Yet there were no heavenly choirs. I experienced no dissociation,

when one becomes a spectator to the attempts being made to restore one's life. The state itself was not unpleasant and the requirement to return from it was distinctly unwelcome.

It is difficult to believe that I was not rescued for a purpose. Yet discerning that purpose is just as difficult as the earlier question. There is still much to be done as chairman of the medical ethics committee. Public health physicians have never been more desperately needed to introduce a note of sanity into the crazy products of political dogma known as the NHS review. Above all, with both children planning to marry in 1990 and a recognition of my BMA work due to be presented at Bournemouth, there were major reasons why if someone was to recover from a cardiac arrest it should have been me. Perhaps I should not struggle too hard for reasons but rather rejoice that a loving God was pleased to give me a new and exciting life through the dramatic events which occurred on 27 February.

Thanks for caring

Jane Hollyhead

It is no fun being in hospital at Christmas, especially when you are 18, but that is what happened to me last year. I had been admitted a few days before suffering from myasthenia gravis and thyrotoxicosis. I was having trouble swallowing and had speech difficulties. The only available bed was in an orthopaedic ward where many of the ladies seemed to be having hip operations. Most of the staff did not understand about my disease or realise that I could not speak when asked a question. The first day I was moved twice around the ward and then eventually to a medical ward. By this time I was really frightened because my swallowing and breathing were getting worse and I felt so alone. I had been prescribed steroids and a muscle toning tablet but I couldn't swallow them very well and this upset me. The nurses gave me a notebook and pen to write down anything I needed. That night an elderly lady opposite me died. The screens were not pulled around her bed properly so I could see and hear what was happening. This was my first night in hospital and I found it a harrowing experience.

After two days my condition suddenly got worse. During the night I kept telling the night staff that I could not breathe properly and they sat me up and gave me a warm drink. Next morning I suffered a respiratory arrest and was rushed into the intensive care unit and ventilated. My lungs had burst so I had to have lung drains attached as well as all the usual tubes and lines which you depend on when you are unconscious. When I came round and was aware of where I was I found the staff were great. The day staff always arrived smiling and cheerful. They turned the radio up if my favourite pop song came on and when I was taken off the ventilator two of them washed my hair and sat me up ready to surprise my Mum and Dad.

Too many bed baths

As Christmas eve got nearer and I knew I wouldn't be going home I was depressed but the staff kept cheering me up and talking to me about all the things that were going on in the hospital. They even turned up with false noses on on Christmas eve. One complaint though—all those bed baths and bed changing—I must have been the cleanest person that Christmas.

By Christmas eve afternoon I had had all the tubes except one lung drain removed, and I was on my way to a medical ward to spend my Christmas. I was given a

sideroom with its own toilet so I was glad of the privacy. They were all older people in the main ward so it was great to be on my own with a portable television. The staff decorated the room with streamers and one dressed up as Father Christmas and gave us all a present.

My treatment was continuing all this time, part of it being plasmapheresis biweekly. I found this traumatic, partly because it was a new machine in the renal unit and most of the staff were learning how it worked and partly because I had to have calcium injections. These had to be given very slowly as I had had a reaction to them and I was always frightened that I would react again. I had fresh plasma given to me once and I reacted to that and had to have an injection. If anything was going to happen it happened to me. Most of the time the treatment left me feeling shattered.

The day I had my second lung drain taken out I had a scan to see if there was any abnormality of my thymus gland. I found this painful as I had to lie with my arms stretched above my head for over half an hour. I was still in pain from the drain and my muscles were



At Christmas Santa works a one in two rota, to make being in hospital more fun for patients

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weak. When the doctor injected the dye into a vein in my hand he couldn't find one at first and it hurt me when he did. The staff in this department weren't as sympathetic as all the others and did not tell me beforehand what they were going to do. I had a good cry when I got back to my room.

The consultants decided that I would have to have my thymus gland and 90% of my thyroid gland removed. When I was told it sounded drastic but the surgeon told me that while he was removing the thymus it would be advisable to remove the thyroid at the same time. The operation was carried out successfully and after a short stay in intensive care I returned to the ward for the usual postoperative care. After the drains were removed from my neck I was allowed home, taking with me a lot of tablets, and left to convalesce slowly in my own surroundings.

Need for understanding

I have written down my experiences primarily to help my convalescence but also to point out that patients need to have understanding and sympathy as well as medical and surgical care. They need to be involved in their treatment and not talked over. You are ill, but not stupid and you can accept what has to be done to you if you have it explained first. I was lucky because my consultants were considerate to my feelings and nearly all those I came into contact with at the hospital were kind caring people. I found this a great comfort because there were times when I felt really ill and depressed.

The star on top of my Christmas tree will now always belong to the wonderful staff of the intensive care unit and the crash team who saved my life on that black Monday in what should have been the festive season.

My "one in a million" chance

Rosemary McCann

On 8 January 1989 I was on the return leg of my regular fortnightly flight from London to Belfast: such are the trials of a long distance romance. The departure was delayed, but that did not worry me. I was preoccupied with my new year's resolution—completing two projects for a forthcoming exam.

At the check in I was allocated seat 12C. "Great, more leg room and space to work," I thought. A girl was in my seat when I got on the plane and I asked her to move. The lady beside me chatted and we joked when a steward told her friend, sitting beside the emergency door, to familiarise herself with the emergency procedure for opening it.

Ten minutes into the flight, just after the meals were given out, a sudden banging started in the engine beside us. Sparks and flames flew out and the whole plane shuddered. The cabin crew dashed up to the cockpit and just as suddenly as the banging had started it stopped and the sparks disappeared. Nobody on the plane spoke—the only noise was someone weeping in the seat behind.

The Lockerbie air disaster, which had happened so recently, was foremost in my mind; perhaps there was a bomb on board this plane too. The captain told us that we were diverting to East Midlands Airport because of engine trouble. Everything seemed normal again and I remember dismissing the whole episode as a nuisance. It was only on our final approach to the airport that the same engine began to shudder and spit out flames . . . the aircraft was jumping like a car stalling. Petrified, I grabbed the hand of the lady beside me and prayed.

The plane was in absolute silence, no one screamed or shouted. "This is it, how many people survive an air crash," I thought, tasting the fear of a death with no one I loved near me.

Perhaps it was a nightmare

That is all I remember until I awoke to hear someone shrieking in pain. I thought perhaps I was at home in bed and was waking from a nightmare. Then the kind, plump face of an ambulanceman appeared and he told me that I was all right. My mind struggled to put together what had happened. It finally hit me that my last memory was of being on the plane. On the journey to hospital, the Queen's Medical Centre in Nottingham, I drifted in and out of consciousness. Coming round in casualty, I cautiously felt my way



Dr McCann (right) skiing 18 months after the accident

round my body. I could not move my right leg and there was liquid pouring down my nose. It felt too watery for blood and I panicked, thinking that it was cerebrospinal fluid and that no one realised I had a fractured skull. Was I going to die?

When they transferred me to a bed the pain hit me and I never knew I could scream so loudly, yet as they cut off my clothes I was able to think my mother would have been proud that all my underclothes were new. There was an appreciation of various tubes being inserted and an awareness of an old man coming back and forth to feel my stomach. I could hear his voice but could not see his face. Eventually he said to somebody, "She is stable now." It was only then that I began to believe I was not going to die. I could not work out why this older man was treating me—it should have been

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