

Hello, if you are interested, I am going to tell you about some of my time in hospital. Before I do though, just let me explain something. When I write like this – plain script – I am either, talking about things I remember happening and that can be verified objectively by others or, I am commenting on what went on. *When I write this way – in italics – I am recounting what others have told me happened. Information from my family, doctors, nurses or from the patient’s diary that was kept for me. When I use bold italics then I am writing about what I remember happening to me but nobody else can verify them.*

All of these memories are real and long-lasting. Only now, six months after it all happened, can I speak and write about these events without crying. They are all still as real as they were when I first experienced them.

It was early on the Wednesday morning Bertha and I were waiving the family off to France where they lived. The two girls had been here for more than a month – most of the time on their own with us. We had had a very full programme of activities; ten pin bowling – when I made a fool of myself leaving the bowl behind me and throwing myself down the alley – all good for a laugh though. Then we had pizza and the cinema. We had some wall climbing – by “we” I mean the girls, we also went to air hop – twice! There was lots of shopping of course, a visit to the Zoo, Tyntesfield House, meals out, Slimbridge bird sanctuary, more meals out, cartwheels on the lawn, swimming, checking on the goats in the gully, cooking at home, a bit of pottery, more cinema and some meals out! Now they were turning the corner at the bottom of the road. “Goodbye – have a good journey. . . .”

***An eternal, comfortable, blackness. This is death; nothing.***

***Suddenly; frighteningly; I emerge into a shadowy room – people? – Absolute terror. A yellow and orange-handled knife is down my throat.***

***On the phone they are demanding a ransom. It won’t be paid! I will not let them kill me the bastards. Pull the knife out – use all your strength – fight, fight.***

***There is no money. It will be impossible for them to meet these demands. “Put him down” I am a long way from my family. I can imagine them.***

***Try again to fight; pull the knife out and kill them.***

***Keep on fighting.***

***Keep on fighting.***

***Use all your strength.***

Death is easy, dying can be terrifying.

*Although I had all but died, I cannot remember what happened. Apparently, I went for a swim at lunch time, anxious to get back into my normal routine again. When I came back I cooked us an omelette but couldn’t eat it. I thought the pain in my left side was a pulled muscle having swum too vigorously. The pain got worse, then unbearable and I finally, I’m told, I agreed to call the ambulance at about 9pm. For over 24 hours the pain did not diminish and diagnosis was not easy. Heart attack? Pancreas? Eventually Boerhaave syndrome was identified – a spontaneous rupture of the oesophagus. Friday morning and a dramatic rush from Southmead Hospital to the Bristol Royal*

*Infirmery, six hours of operation and days of anxious wait for the family. My son had to help holding me down as I fought the intubation. There were times of peace, periods of induced sleep and intervals of apparent awareness of where I was. I took some of the ice crystals that were given to me to alleviate my dry mouth and offered them to my son. "Have these Niel - gold dust."*

***What has happened to the car? Has Richard picked it up from Tyntesfield? My clothes were cut off me and burnt. Do I have any more?***

***The nurse with me is Spanish so I speak to her in Spanish. She tells me off as the other nurse cannot understand me but I insist. She gets very angry with me. A senior nurse takes her out onto the balcony outside my room. I cannot make out the conversation. She comes back in and rips off her plastic apron and leaves. She has been sacked on the spot. What a worry. A couple of months later, having related this bit of the story to a senior nurse, I was finally relieved to hear that this had not happened.***

Having been washed by the ICU nurses I decide that I am being barrier nursed and must not be touched by the family. I am very insistent on this and get very agitated if they even come too close to me. It was not until I had been on the main surgical ward for several days, and a consultant had assured me it was OK did I give in to what I wanted most of all – a hug from my wife.

***The nurse with me at night has been in India where he has become fascinated by some of the ancient practises of the gurus. He has perfected the ability to create a low frequency hum while at the same time being able to carry out a normal conversation. It is a bit off-putting.***

***He is also very proud to have virtually perfected a novel way of ingesting food. Sitting at a table beside my bed, he takes some cylindrical biscuits about four inches tall and half an inch in diameter and places them end up. They are a pale creamy/brown colour and have the consistency of Edinburgh Rock. He bends over each one in turn till his nose touches them. With a swift downward thrust of his head he successfully ingests the biscuit up his nostril. Spectacular! But he keeps on doing it for several days; even when I am in the outer ICU ward. He is teaching another nurse to do the hum.***

"I have got you some of this new artificial saliva, open your mouth."

I have only just thought of this but, despite the fact I love a wide range of music, it never plays any part in what I can recollect. Indeed, most of what I recall is in visual terms at first with conversations playing a bigger part later on. Other senses do not come in until the delirium is over.

*After five days I am moved from the ICU room onto the more open ICU ward.*

I now have some idea as to what has happen to me but I cannot remember ever having been told by anybody. I just seem to realise that I have been ill but it will take almost two weeks before I have a more or less complete picture of my situation.

***I wake up in the early hours. Two children are standing about a beds length from the end of my bed. They have their backs to me. I want to call out and ask them who they are. But I don't need to; I already know. They both move very slightly; just turning to the left in unison and lights, like a badge, on their arms shine in several different soft colours. They have very long black wavy hair going right down their backs. They turn again but not enough for me to see their faces. They are very sad, looking out over a wide bay towards a city in the distance. They have been exiled and will never go home again.***

*Of course! The children are made of chocolate and they are part of the bigger exhibition in the ward. There are a lot of symbolically important artefacts up on the walls. They are illustrating a Cretan myth. The exhibition fills the whole ward. The children move again. I don't like this. I don't want them to turn round and see me. I want them to go away.*

*I am awake again in the night. The chocolate children are back. They are still, unnervingly, staring out over the bay and turning in unison, just enough to be frightening.*

*Ah good. Two consultants have come into the room. I know they are consultants because they have white lab coats on. They don't look at me or the children but they are very pleased with themselves. I can't quite make out what they are saying but I know they are being very erudite about the exhibition and congratulating each other on having persuaded such a big chocolate firm to produce this important exhibition. They spend a long time surveying the show. "Why on earth have you authorised such a spooky exhibition to be put on in a place where there are a lot of sick people?" "Don't you think you have been irresponsible?" "It is very frightening." I am pleading but they take no notice. I am talking to myself. They go away.*

*Is it daytime? I'm not sure but the children are not there although the exhibition is. I have also got a lot of boxes of chocolates on the table at the end of my bed. They are huge and very beautiful, shaped like houses in Ghent – straight out of a Flemish painting; wooden gabling and intricate brickwork. I can't eat anything of course. I'll give them to Lynn(my daughter) when she comes in.*

The family have been to see me. Bertha brought me my glasses. Did I tell them to take the chocolates? They have gone.

During my time in ICU I was obviously concerned about practical matters and talked about making arrangements for my family to use my debit and credit cards as I was concerned that my wife should have sufficient financial support. I was also concerned that the money for the holiday I had paid for be reclaimed on the insurance.

I don't have a nurse all to myself now but they are still very attentive.

*The guy in the bed next to me seems to be pulling rank. (I think his son is a consultant somewhere in the hospital) He has his curtains drawn most of the time so I cannot see him and he is playing some sort of elaborate game with his wife and some of the staff. There are boards all over the ward with lists of words, instructions and diagrams. He keeps on phoning his solutions into the local newspaper. He is demanding attention all the time. He is even asking for some hock to be served with his meal this evening.*

*Another nurse is in a screened off area next to my bed and also practicing the Indian hum. Surely they should be doing this in their spare time?*

Lynn has come to see me. "I am taking advantage now to show you the card that the girls have sent you" I read every word of the card. It was so kind of them to think of me. We both cry a great deal.

A nurse comes to take out some of the tubes because they are not useful where I am going. They have been stapled to my neck and wrist. He takes some time to get them out; they seem to be made of wood! I notice the small wound on my abdomen. I have still not realised that the main entry was through my back. At this stage I am still not sure if I knew what caused me to be in hospital.

*Seven days after being taken ill I am moved up to the surgical ward. Bertha and Lynn stay a long time with me until they are happy that I am settled in.*

*I am not very happy with where I have been taken. It is just a cottage hospital with very few nurses on duty – only three as far as I can tell. They don't seem to be very pleased at having to look after me-I am a big drain on their resources and they will have to find a way to get me sent somewhere else – preferably back to the ICU. The hospital is very short of cash and it is extremely difficult for them to manage.*

*One of my chest drains is damaged. The nurse on night duty tries to sort it out by stitching it together. Poor man is trying his best and it is a hot night. He is sweating.*

*There is a knock at the door and I can overhear the discussion with the two junior female doctors. They will not come in to the ward but are adamant that the work done on repairing my drain tube has been substandard and should not have been done. "Either it was done perfectly or not at all" There is a big argument and the doctors go away saying they will send someone from the ICU to check that the repairs have been done properly.*

*Through the night people on night duty from other parts of the hospital come to the ward to have a cup of tea and chat. The technician from the ICU comes up to "look at the fancy work" that has been done on my tube. "I hear you've got bruiser Garrett here" He says. "He was fighting down there" He does not come into my room but goes off for his tea. I get very frustrated that he spends a lot of time gossiping but does not come to see me.*

*Eventually, the junior doctors come back and come into the ward. They have a long conversation with the nurses.*

*"Come and talk to me, get my opinion, I'm the patient here" They don't seem to hear me. Eventually one does come in, closes the door and goes through a long questionnaire with me about my treatment. Finally I get annoyed and tell her that if anyone is to blame for what went wrong then it was the ICU; they should not have sent me out with a faulty tube.*

*The technician leaves without coming to see me. I am quite anxious as to the state of my drain.*

Next day, when Bertha comes to see me, I tell her about my treatment. I am not at all happy and tell her that everybody on the ward hates me and wants to get me gone.

*It's night time again. Everybody is happy; myself and another patient from ICU are to be moved out of the ward. The two junior doctors are also back on the ward. One of them has a contact (relative?) who has found some money that can be given to the hospital. The senior nurse who has just gone off duty, taking her dog with her, is called back to be told the good news. She was on the steps outside leading to the pavement when the news came in. They all sit down; nurses and doctors; and start planning a holiday together. I can hear the ice being added to the drinks as they celebrate.*

*The big dog is barking. It is kept out in the backyard. I haven't seen it, but it is taller than any of the staff and has a long shaggy bright blue coat.*

*The local homeless and drug addicts are banging on the back door again. I can remember that they have been doing this every morning at about five am. They are usually happy with some sandwiches or hot soup that has been left over from supper time. Today however they are much*

*more belligerent. They want to come inside. The nurse has the big dog with her and it puts them off for a bit; it is so huge. One of the girls (they are all Scots or Spanish girls) pulls out a knife. "I'll kill it" "why would you want to kill such a beautiful creature?" "Don't worry" the nurse says to the dog. I am looking after you.*

*The nurses clean me after a bout of diarrhoea but do not use gloves or wash their hands afterwards.*

I complain again to Bertha. The hygiene regime in this hospital I tell her is not good – no wonder there are hospital contracted infections. Cleaning hands had been automatic in the ICU.

*I have to go for an x-ray at about 2am. The nurse who has been against keeping me on the ward goes with me however and is quite kind. While we are in the lift the two porters have a big set to. Apparently the wife of one of them has gone to live with the other. Both are working night duty in the hospital and trying to hold down jobs during the day as well. Both seem out on their feet. I have my x-ray and on the way back the porters are still carrying on their arguments. They deliver me back to my bed. The nurse takes them off and although I cannot hear exactly what she says to them she is obviously giving them a piece of her mind. She finally gives both of them a considerable sum of money and tells them to sort out their differences. I spend the rest of the night concerned that I had not paid them for taking me to the x-ray room.*

*The homeless are banging on the back door again. "For God's sake give them some thing or tell them to bugger off." For all I shout nobody does anything. The big dog barks.*

*There have only been the same three nurses looking after me now for several days. One of them comes in the morning to tell me she is going away on holiday and she has come to say goodbye as I will not be there when she comes back. She tells me that she had not liked me when I first came on the ward but she thinks I am OK now.*

Slowly my recollections of events coincide with what other people remember, or what might be called more normal. These memories however, are no more real to me than the others. All that I remember is equally real to me and remains vivid in all its detail.

Slowly also, my memories are more from the day and not restricted to the night – despite the fact that I was sleeping very badly if at all.

I came to realise that the chocolate exhibition, that I still saw for several nights while on the surgical ward, was nothing more than a transformation of such mundane things as the taps of the washbasin, and the soap and paper towels dispensers. That understanding didn't stop me from fearing the onset of night time however, and asking my son to cover these items with a towel before he left me in the evening.

One early highlight of my stay was watching the radiographer put in a third chest drain – certainly more interesting than the telly.

When being taken on a trolley for a scan I remember closing my eyes and being in a red room with purple trees marching around it. The trees were very much like Matisse collages. When I opened my eyes the ceiling and walls of the lift in which I was traveling were covered in large black spiders and flies. For many days these images came when I closed my eyes.

## Daze in Hospital

Over two weeks of nil by mouth is hard to take, particularly as the food is served right outside my door. 1000 calories of yellow gloop pumped slowly into my gut over 24 hours; what I would give for just a cup of water. Finally a small glass of orange flavoured dye to swallow before my MRI scan; ambrosia! The next day I was put on free fluids and there after a sloppy diet.

Bit by bit I was able to do more and more for myself. For a few days I had been going to the toilet in the bath room. When I was ready to wash my hands and return to my chair I would call for help. One day I felt strong and decided I would pull myself up and go to the sink on my own. I would be more independent.

Up to that point I had not seen myself in the mirror. I was aware of numerous tubes going in and out of me connected to bottles and bags and drips, there was a tiny incision in my abdomen and the new chest drain that I had watched being inserted. The big stuff was on my back and side and I could not see that.

I stood – on my own - in the bathroom and looked in the mirror! There was my father, hours before he had died, staring back at me! A withered, useless old man looked out. I spent the rest of the morning very depressed and in tears. I dread to think how I would have reacted to more disfiguring wounds.

The resentment, at the fact that I was still alive had been building up, now it came out. I knew everybody had made great efforts to save my life. I knew my family had gone through trauma equal to mine, if not more upsetting. But, I had done everything but die. I knew what death was. Now I was going to have to face it again. This was not fair. I should have been left in peace.

After four weeks in hospital I was allowed home, on my wife's birthday.

I still have a week of total memory loss, other than the vividly remembered episodes of delirium. I am still not sure how I came to understand what my situation was and what had happened to me. Everything that I remember is real, even if it happened only in my head.

Talking to my closest friends and family, and writing, has helped me, more or less, to come to terms with the situation. I have gone back and spoken to a nurse and consultant on the ICU, telling them much of what I have written here. I have also addressed a conference on delirium held in London. The path to full recovery, both physical and mental is however, very long.

R.M.Garrett February 2017

Modified March 2017