Heading Into Cancer Surgery and U2's "Lights of Home"

January 22, 2018 By Robin McGee

This will be the last time you hear from me before my big surgery on Thursday, 25 January. Scots among you will recognize this as Robbie Burns Day! All followers, Scottish or not, should have a dram that day and think of me.

The meeting I had with officials from my local hospital regarding my misread CT went well. I feel good about it. I prepared a graphic but dispassionate impact statement about what happened to me because of the error. They shared their quality structure and initiatives, which I was curious about. Unpacking what happened, and what should happen going forward, will be a process. Discussion of my actual incident will await further review, and will be the subject of later meetings. My main objective for the meeting was to demonstrate a collaborative and conciliatory attitude. Such an approach can result in real improvements in local radiology quality, patient safety, and appropriate error and apology practice.

Another shocking medical snafu—with only two days before surgery, I still had not heard from pre-admissions clinic. Without processing by this clinic, surgery must be cancelled. I, the family doctor, and the surgeon's office all called the booking office to find out whether I was booked. No response after days. In desperation I called the main switchboard, who did not know where to direct me. So I asked to speak to someone—anyone—in pre-admissions. That person said that the booking clerk had been out sick for days and she had no replacement, so calls to her were not being checked or returned. I now have an appointment in the last possible slot. If stories like this do not terrify you about healthcare, they should.

My surgery is on Thursday, 25 January! The surgery I am expected to have will be extensive. It has a nickname—"MOAS," the Mother of All Surgeries. Typically, it takes 8 to 14 hours, and can even be as long as 20 hours. I can expect to be in ICU for a few days, and then on that horrible WW1 field hospital ward on the 9th Floor of the VG. Barring complications, hospitalization is usually 10 to 12 days, depending on multiple factors. Recovery is estimated to take 2 to 4 months. I will need systemic chemotherapy again, starting 6 to 8 weeks after the surgery. Ugh.

Peritoneal metastasis of colorectal cancer usually result in death within 12 months (which has already elapsed for me). Chemo can extend that to 24 months median survival. Surgery can add another year or so to that. Online, I have known 15-year survivors, but also those who died within the year of this surgery. So it can cure in rare cases, but most often results in buying the patient a

little more time.

I would like more time! I am taking my son and his girl and her parents on a river cruise down the Seine in France this July. If I last long enough, I also plan to rent a villa in Tuscany in 2019, and invite friends and family to come along. And I hope to travel in our little Alto trailer to some of Canada's National Parks with Andrew in 2020 on the deferred leave I planned for. And I would like to go back to work, if I could. Dreaming about those adventures got me through some very tough chemo days, and hopefully will sustain me through my surgical recovery too.

As anyone who has ever had a loved one in hospital knows, someone must be by the bedside of the patient. My years of work in patient safety taught me that over 30% of patients who enter hospital experience some form of medical error—most often medication error. However, that risk is significantly reduced if someone - anyone—is sitting by the patient. Andrew will be with me much of the time. We have a friend with a nursing background who can also sit by until the 28th. We are hoping friends can visit to give them a break—a meal or a few hours of rest—it can be a real boon.

This surgery carries a 3 percent risk of death. I love my surgeon, Carman Giacomantonio, to bits—always have. If he cannot save me, no one can. Some will recognize him as one of the heroes from the epilogue of The Cancer Olympics, in his efforts to create standards of care for cancer detection and treatment. It may be a strange thing to say, but if I end up dead or really damaged, I would rather become so under his hands than anyone else's.

So, everyone, I will see you on the other side. (I mean the other side of surgery!)

And today's song? Here is "Lights of Home," from U2's recently released album Songs of Experience. It speaks of dread, and of hope, and of pushing forward into freedom.

I shouldn't be here 'cause I should be dead
I can see the lights in front of me
I believe my best days are ahead
I can see the lights in front of me

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