



Stephen P.

Chapter 11

My Journey: Esophageal Cancer To Transhiatal Esophagectomy (“THE”)

by Stephen P.

Looking back, it started with hiccups, simple hiccups. And some reflux. I mentioned these symptoms to my internist, and he was keen enough to suggest a scope and a biopsy. Another surgeon friend strongly encouraged me to complete the tests. Within about 48 hours of the procedures, they knew enough to suggest that I might have cancer. It would take a biopsy to confirm. Diagnosis: Esophageal cancer.

I live in Toledo and so far all of my medical care was done in the Northwest Ohio area. I consulted with local surgeons, and also discussed my plight with many friends. I am a pediatric dentist, so I called everyone in the medical profession that I knew. Every option, or so it seemed, was discussed: Chemo, radiation, and radical surgery.

The more people I talked to in Toledo and nationwide, a dominant theme emerged. Go and meet with Dr. Mark Orringer of the Thoracic Surgery department at the University of Michigan. I started to look into his research. I watched a video of the THE-CEGA procedure. It seemed cutting edge and based in research and practical successes. I also contacted a couple of patients who had the same surgery. I knew I had to consult with him.

And then came roadblock number one.

Because Dr. Orringer developed “THE-CEGA” procedure and his success was widely known, it was difficult to get an appointment with him. Dr. S., an ardent Ohio State fan and my internist, also agreed to write a letter of referral. Finally, I had an appointment with the team.

All the while, I was continuing with my treatment plan in Toledo, because all of the surgery prep would also be needed for Dr. Orringer if he decided to take on my case. I gathered all my records, had a barium swallow, a CT scan, and a PET scan. I needed a trans-esophageal ultrasound, and at this time it was only being performed at the University of Michigan, so we travelled up there to have it.

In late February of 2007, we went to the U-M Thoracic Surgery Clinic to meet Dr. Orringer. He had reviewed the pathology slides, lower GI film, and referral letters prior to our visit. Meeting with Dr. Orringer confirmed my decision that I wanted to work with him and have the CEGA procedure.

In March, I was scheduled for a chemotherapy consult and a radiation oncology consult. The cancer tumor board review usually happens every Friday afternoon. Following the Board review I was accepted as a patient of Dr. Orringer for 'THE CEGA.' I am so thankful. My diagnosis was Stage III adenocarcinoma of the lower end of the esophagus at the junction of the stomach. I was scheduled for surgery.

To get ready for the surgery I had to do breathing exercises, walk three miles per day, have chemo, radiation and get strong. This took the month of April. We live an hour and a half southeast of Ann Arbor, so we stayed at a hotel near the hospital during the week.

At the time of our first appointment with Dr. Orringer, Leah - one special clinic nurse - overheard Mary and I discussing how long I would be off work. Leah asked, "Why?" Mary replied, "Our youngest daughter is getting married in late July. Steve wants to dance at her wedding." I think at that time Leah knew we'd be at the wedding.

Chemo was tough! I remember the hand and foot massages during Chemo treatment. I remember I was told to visualize the radiation beams 'sinking into the cancer cells.' I used deep breathing exercises to help during treatment - thanks to Dr. W. The taste of food diminished. Eating was becoming more difficult. Liquid protein

supplements were needed. Luckily, I had no major mouth sores. Getting used to the PICC line and chemo pump was do-able.

In May, three months after the diagnosis, chemo and radiation was over. Dr. Mark Orringer outlined our plan: Rest, get your labs improved, keep walking and breathing as instructed. Surgery will be the first week of June.

Finally, it was the big day. I slept during the surgery. I was in my hospital room that night. I remember the next morning with many tubes hanging from every part of my body. I felt like I was 'side-swiped by a semi.' Day one after surgery, I moved out of bed to sit in a chair for 10 minutes so the bed could be made. A couple of hours later someone came in and said, "I'll help you walk to the door." Wow, I was moving already!

That evening, with support, I walked to the nurse's station. My room was almost across the hall, but still, it was a step in the right direction (pun intended). The epidural helped to control my discomfort. Tubes were removed almost daily, except for my J-tube. On day three or four, I was able to walk to the Esophageal Support Group meeting down the hall. Since my surgery was in June, I even walked outside on the patio with 'my pole' to have lunch. I just kept walking and walking. I continue to walk a lot today.

Before I could be discharged, I needed a swallow study. On the morning of the swallow study wheel chair transportation was late. As the nurses were re-checking my heart rate, I was in atrial fibrillation. The physician assistants converted my rhythms. I did pass the swallow test but had to stay another day. Discharge and follow up was uneventful.

It goes without saying 'everyone is different', but having a positive attitude sure helped me! After my discharge, I continued to meet with the nutritionist and the support group because they offered valuable hints to smooth my transition at mealtime. In fact, eating small meals six or seven times per day became routine. I found that certain foods were 'triggers for dumping'. I avoided sweet foods such as maple syrup, brownies and beer. For me, spicy foods like

pepper or wasabi woke up my taste buds. I did lose about 60 pounds before surgery. Now, my weight has been constant at 162 to 168 for the last five years. I look for sources of protein, avoid most sweets and share entrees when Mary and I eat out. I eat everything, but in smaller portions.

I did dance the polka at my daughter's wedding in late July 2007. I was cancer free and dancing! Now, six years later, I am still dancing, blowing glass, traveling and practicing dentistry.

To this day, I know Dr. Orringer and his multi-talented team in Ann Arbor, Michigan is the best! I am also here today because of unselfish support from my wife, Mary, and our daughters and their husbands, as well as encouragement from my partner, Michael P. Glinka, DDS and our pediatric dental office staff during my four months of medical leave.

Our Esophageal Support Group is one of a kind!! It is low key, interactive, and has great staff leadership and physician support. It is available to those who have been, are, or will be in my (dancing) shoes.