

Two Weeks In Hell

By Stephen Munz

Part I

Technically, my story starts about three years ago. It was the evening of July 22, 2019, a fairly ordinary night by most standards until my aunt dropped by in a panic. She had just been by my parents house and witnessed a distressing scene: my father had passed away, and my mother had fallen in the garage and couldn't get up. As an only child, this was perhaps the worst possible scenario I could imagine. I ran out of the house and drove to my parents house straight away, where I was greeted by a police officer. My mother had already been taken to the hospital, but it was up to me to handle my father's remains. No plans had been made, but I called a local funeral home and waited at the house for them and the coroner to arrive.

After waiting several hours in what felt like a haunted house, the coroner stopped by and verified there were no signs of foul play. The folks from the funeral home were there shortly thereafter to retrieve my father's remains, and it was then time for a trip to the hospital. That's where things went off the rails. I knew my mother was struggling with memory issues, but without my father covering for her, the true nature of her condition was revealed. While she was physically OK from the fall, my mother was showing all the signs of moderate dementia. The next few weeks and months would be their own form of hell of me. I had to rush to find my mom a suitable landing place after the hospital; given her mental status, returning home wasn't a possibility in my book. Naturally, extended family fought my decision all the way, believing family should take care of its own.

Over time, I became more and more depressed. Before that fateful day, I was on a good path; I was losing weight, reasonably healthy, and generally cheerful. After all hell broke loose, I decided to quasi-retire to deal with my parent's affairs, which included a house that belonged on Hoarders. Then the pandemic hit...and I seemed well positioned to handle affairs at home, including taking care of my two sons while my wife, Miranda, worked. While I was able to keep the house running fairly smoothly, I felt dead inside. I didn't want to do anything except nap all day, having no desire to deal with my life problems.

Fortunately, or perhaps not, I discovered Delta 8 THC gummies. Billed as marijuana light, the gummies did wonders to lift my mood (at least temporarily), with the side effect of stimulating my appetite. All the weight I had lost before my father's passing came back and then some. One dinner was rarely enough with THC in my system, and I certainly wasn't eating healthy any longer. As a diabetic with high triglycerides, these decisions would come back to bite me, hard. I just didn't care at the time. I drowned my sorrows in drugs and food, and to hell with anything else.

It wouldn't be until Spring 2022 when I would finally start to come out of my funk, thanks to an anger management class my wife pushed me to take. Slowly but surely, my therapist helped me work through many of my issues. I stopped vaping, something I had struggled with for years. I was reaching out to old friends and starting to mend fences with existing friends and family. A July 4th trip to see the in-laws, usually its own little ordeal, went smoothly for a change thanks to my new attitude. In short, I was starting to turn my life around after three years of depression.

Part II

July 17, 2022 was supposed to be a great day for the Munz family. My wife Miranda and I were driving from our home in Silver Spring, MD down to Tybee Island, GA for a fun beach getaway with her folks. In addition, we would be reuniting with our kids, after they had spent the last two weeks with their grandparents for an informal summer camp. Sadly, days on the beach rollicking with the kids would have to wait. I didn't realize it yet, but I was about to experience two weeks in hell.

A little over an hour into our road trip, I began experiencing serious chest pains. At first, I tried to grin and bear it, twisting around in my seat in order to find a more comfortable position. I then asked Miranda to pull off the interstate, in the hopes that I could walk off the pain. After a few minutes of pacing, things even seemed to be settling down; so we attempted to resume the trip. Alas, it was not meant to be. Within ten, the pain was back with a vengeance. At this point, given my medical history of diabetes and high triglycerides, we decided that perhaps it was best to seek medical attention.

Thankfully, in the age of GPS navigation, finding a nearby urgent care wasn't a big ordeal. When we arrived, I rushed out of the car. The receptionist could immediately tell something was wrong; I was sweating profusely and complaining of chest pain, not a good sign. The on call nurse began giving me nitroglycerine tablets and hooked me up for an EKG, and within minutes, an ambulance was on its way. Thankfully, it wasn't a heart attack, but the nurse

couldn't ascertain what was happening; what was certain was that I needed to go to an emergency room ASAP.

Being in the middle of nowhere at the time, the EMTs gave me a choice: we could head further south to a hospital near Richmond, VA, or head north and a little closer to home. I chose the latter option, which meant I would be going to Spotsylvania Regional Medical Center. In the ER, after a battery of imaging and blood tests, I was informed that I was experiencing acute pancreatitis as a result of triglyceride levels that were about forty times higher than normal. To put it another way, I had so much fat in my blood, my plasma was a milky white color instead of a typical light amber hue. Fortunately, the ER doctor had what seemed to be a good plan. I would have to go to the ICU, and be placed on an insulin drip to bring down my blood sugar and triglyceride levels. Meanwhile, I would be given their best painkiller, Dilaudid, to ease my suffering.

Slowly but surely, the plan seemed to be working. In the ICU, my triglycerides dropped from over 4000 mg/dL to a more manageable 500 mg/dL. Thanks to the Dilaudid, I was knocked out cold for much of my time in intensive care, but I also remember the kind treatment of my nurse Christine, who helped keep my spirits up and reassured my wife that I would be OK. Eventually, things indeed got to the point where I could be pushed to a med-surg floor in order to free up the precious ICU bed. I was sad to lose my favorite nurse, but happy that I was seemingly out of the woods.

With my biggest problems seemingly in the rear view mirror, I told my wife to go ahead with the trip; at a minimum, we needed to retrieve our kids from their grandparents. More to the point, I didn't want my wife to miss an entire week at the beach because I was under the weather. Miranda, anxious given that she hadn't seen our children in two weeks, agreed.

Unfortunately, I wasn't out of the woods at all. Not long after Miranda departed, my stomach started hurting. Out of an abundance of caution, I was taken for further imaging to see what was happening. That's when the fun really began: I was informed that I had developed a bowel obstruction. At the time, the doctors weren't overly concerned. My pain was still being managed with the Dilaudid, and while my bowels were blocked, there wasn't a need for immediate surgery. At that point, the plan seemed to be wait it out, and hope for the best.

The plan didn't work. Slowly but surely, the pain got worse and worse, to the point where even the Dilaudid was only offering temporary relief. After another round of X-rays and CT scans, my nurse informed me that he would need to insert a nasogastric tube to relieve the pressure on my bowels. He also explained to me that while the Dilaudid relieved my pain, it was a powerful opioid; as such, it had the effect of slowing my body down, including my bowels.

For those who have never experienced the joys of a nasogastric tube...consider yourself lucky. It's one of the most uncomfortable experiences I've ever had. The tube itself is relatively non-descript, a piece of clear plastic a bit more than half a centimeter in diameter. The tube gets inserted in your nose, and run down your throat into your stomach. The procedure itself is about

as fun as it sounds, and was performed without the aid of any medication. To add to the fun, the patient is NPO: nothing by mouth, except for the occasional ice chip. Fortunately, the tube worked as advertised: within moments of entering my stomach, a steady stream of bile flowed out of my guts, through the tube, into a container where they could measure my output. Within half an hour, a liter of gunk had flowed out of me, and I was quickly feeling better again.

Further boosting my spirits, Miranda and the kids were returning from Georgia along with my mother-in-law, and stopped in to visit. I was sore and tired, but elated to see my family again. I spent hours giving hugs, talking, and generally enjoying myself. Alas, that time passed far too quickly, and I was again alone in a hospital. That evening, I was speaking with the nurse that had installed the NG tube. He had mentioned earlier that he wanted to use better quality tape, so I stupidly brought it up. Retape he did, completely cutting off my ability to breathe from my nose. When I complained, he made a small airhole for the oxygen I was on, which he considered to be adequate. As it was, I did my best to claw open bigger nose holes, taking great care not to touch the tender site of the nasogastric tube. I asked a tech for a few ice packs to ease my neck and leg pain, the result of being effectively bedridden for the better part of a week, and drifted off to sleep.

Sadly, sleep would not be in the cards for me. I woke up around 9PM completely disoriented; I was freezing cold thanks to the aforementioned ice packs, blind due to the fact I had taken my glasses off to sleep, and confused at the tube sticking out of my face. I grabbed my glasses and looked at the nursing board. A new nurse, Frieda, had written her name with what I

perceived as a sinister looking smiley face. For some reason, probably a mix of the drugs I was on and general exhaustion, I assumed I was either a medical experiment on ice, or in hell.

As you might imagine, I was more than a little scared when a new tech came in to take my vitals. She seemed nice enough, but I assumed she was some sort of demon. At one point, I recall she overflowed the sink in my room, and thought I was laughing; I assured her I was far too frightened for that. In truth, the night staff was probably fine for the most part, unfortunately my brain was fried. I couldn't sleep, and by morning, I was itching for the tube to be removed.

That morning, I inquired with the doctor about the possibility. The pain had seemingly stopped, and copious amounts of gunk had been removed from my guts. He listened with his stethoscope, and gave the OK to have the cursed NG tube removed and have me advanced to a clear liquid diet. His only advice was simple: just keep moving.

The first thing I did was go get beverages. Two four ounce apple juices would do just dandy after nearly 24 hours without even a sip of water. It wasn't ideal as a diabetic, but that's what was on offer. I kept drinking through the morning into the early afternoon, consuming about 30oz of liquid over five or six hours. I also did my best to follow the doctor's advice, pacing in my room and around the ward. Unfortunately, by late afternoon, my stomach started hurting again; the bowel obstruction was still there.

That evening was perhaps the toughest night of my life. I was in a poor headspace, convincing myself that the staff wasn't supporting me, and irritated that my family hadn't returned for another visit that day. With the pain in my belly getting worse and worse, I alerted the nursing staff who had nothing to offer for relief. Mentally, I vacillated between just giving up, and getting the heck out of Spotsylvania. Then I randomly got a text from my cousin Reggie that I hadn't seen in years.

We had been looking to reunite the family for a while, and Reggie was pinging me to inquire if I wanted to hang out sometime. I told Reggie about my situation, and resolved that I was done with Spotsylvania Regional. It was far from home, and I had lost faith that they were able to help me. I begged Reggie to get me out of there. Thankfully, he agreed, though it would take a couple hours for him to get to arrive. I coordinated with my wife, and found that Virginia Hospital Center in Arlington would be the best landing spot for me.

With my new plan in place, I expressed my dissatisfaction with the nursing staff, and advised them I would be leaving against medical advice to go to another facility. At that point, the charge nurse on the floor advised me that the doctor had prescribed a gas pill to help relieve my pain. I put a lot of hope into that pill, but aside from a couple burps, no relief came. So, I spent the next hour or two unsuccessfully trying to gag myself in the bathroom. Eventually, Reggie arrived with another one of my cousins, Eyon. I quickly packed up my belongings and left. The nursing staff made sure I knew what I was doing, and one ominously warned I would be responsible for all my medical bills if I left. I didn't care at that point.

Part III

As I arrived at yet another emergency room, my belly felt like it was ready to explode. A triage nurse saw me, and asked what my pain score was. 10. 10. 10. I can't imagine what I looked like, barely able to walk and belly distended. They rushed me in back, and the fun began. I begged for another option besides another nasogastric tube, but the ER doctor advised there was no other option. A trio of young nurses then got to work on me; they gave me a dose of valium to ease my anxiety, and the tube was inserted. I was then given a dose of fentanyl as the threesome worked in unison to take blood, start the suction, and clean me up after I had soiled myself to help relieve the pressure in my guts.

I was quickly taken for a CT scan, which to my drug addled mind resembled a cool high-wire act. Before long, I was admitted to room 734, where my nurse rattled through a list of questions to get my full medical history. The room itself seemed to resemble a cool space pod, in part thanks to the medical equipment and the fact that I had a nice window view on the 7th floor. After a while, I drifted off to sleep.

The next day, I generally felt more optimistic. My family had gone to bat for me in a way I didn't expect. I was amused by the fact that my new nurse shared a name with, and physically resembled one of my wife's cousins. The tube was in, and uncomfortable, but surely this

shouldn't last long. Then I met Dr. Christopher Degannes. The good doctor was blunt: my intestines were blocked, and there was no specific timeline for when they would become unblocked. When I complained about the discomfort, he advised that it was a necessary evil, describing it as among the most barbaric things doctors have to do. This firm explanation was what I needed, though things would hardly be smooth.

I arrived at Virginia Hospital Center on the evening of 7/23/2022. I wasn't discharged until the afternoon of 08/01/2022. For the majority of that time, I was effectively bedridden. Being hooked up to IV's and the NG tube, even my ability to move around in bed was badly hampered. My diet would be limited to nothing but ice chips and IV liquids for most of my stay. Due to the discomfort, the pace of vitals checks, blood draws, and the general din of the hospital, sleep was hard to come by. Needless to say, all of the above had a profound impact upon my mental state. Still, in spite of it all, there were good points to my stay in Arlington, specifically a few heroes that made my stay bearable.

I'm not one to play favorites normally, but Nurse Aisha will always have a special place in my heart. She took care of me three evenings in a row. In spite of lackluster equipment (her cart couldn't even take my blood pressure), and a tech shortage on night one, Aisha was there to take care of me whenever I gave her a ring from my room phone. More than that though, I directly credit Aisha with saving my life. In addition to my bowel obstruction, I had a case of acute respiratory distress. One of the doctors had given me a spirometer, but given my physical

and mental state, it wasn't something I had a lot of interest in. That a surgeon had knocked it off my table and onto the floor didn't help my opinion of it.

When I recounted that last bit to Aisha, she immediately pitched the spirometer in the trash. It was about that time I noticed that a subtle pineapple scent; for a guy who hadn't eaten in some time, it was absolutely intoxicating. I began breathing deeply to take it all in. I'm guessing Aisha recognized what was happening, and she even let me borrow her little container of pineapple scented lotion. I spent the evening breathing in the fruity goodness of the lotion, and by the next morning, my lung capacity was halfway back to normal.

Then there was Nurse Chastity. In spite of only spending one day together, she left an impression on me as being one of the most compassionate and competent nurses in the hospital. One example of that compassion was how she went far out of her way to get me a popsicle. The poor thing had the consistency of a banana by the time she was able to get it back to me, but it was an amazing treat all the same. I didn't complain at all.

Another honorable mention was the tech, Laxmi. Our relationship developed in an odd manner: I was listening to Baba O'Riley by The Who when she walked in to take my vitals. I asked Laxmi if she was familiar with the song; she replied that she didn't listen to American music. Being a minor music buff, I proceeded to inform her that the song was by a British band, not American. Further, I advised her that the title of the song was partly a reference to Meher Baba, an Indian guru who had a profound influence upon The Who's primary songwriter and

lead guitarist, Pete Townshend. After that, she was always down to listen to me blather on about one thing or another.

It took until Saturday, 07/30/2022 to begin the clamping trial. I would be taken off suction for about 10 hours, totally free from the hospital bed. At the end of that time, I would be reattached to suction, and the output from the NG tube would be evaluated. I was attached to suction for about an hour, and nothing came out. Dr. Degannes happily told me I had passed, and that he would be immediately putting me on a clear liquid diet in time for dinner.

Shortly after, dinner arrived as promised. I paged my nurse and looked longingly at my meal. I don't know how long I waited, but it seemed like an eternity. Eventually, I gave in. I took myself off suction and dug in. Pathetically, I used a straw to gulp down cool, gritty chicken broth. I realized very quickly that my stomach had shrunk as a result of undergoing a starvation diet. My nurse finally walked in, surprised that I was already off suction and eating. I didn't have anything nice to say, irritated with the wait, and kept going about my business. Beyond that hiccup, the evening went well enough and my nasogastric tube was finally removed the following morning. I gave Dr. Degannes a big hug. Aside from some time under observation to ensure I was progressing as expected, my stay was effectively over. On the afternoon of 08/01/2022, I was released.

I walk out of Virginia Hospital Center an utterly changed man. The experience has taught me patience, humility, and how to deal with great pain. More than that, nearly dying at 40 has

taught me, as Hamilton might proclaim, to take my shot. As horrific as some of those evenings seemed, I feel like I've lived more in the last couple weeks than the rest of my life put together. It's a strange feeling to survive.

To close, I would like to offer a special thanks to Dr. Christopher Degannes, nurses Aisha, Chastity, Kristal, Deepa, Laxmi for their hard work and compassion in saving my life.