

INTUSSUSUSCEPTION(HOW A HORSE RACE SAVED MY BABY BROTHER'S LIFE)

by Paul M. Riley MD:FACS

About 2 AM, on Saturday, July 1, 1939, my brother, eight month old Thomas, woke up his mother, Edna Riley, with a blood curdling scream! Edna woke up her husband, John, who lit the Coleman lantern. Edna picked up her baby and placed him in the bed besides her. Thomas stopped screaming and went back to sleep. But Edna noticed that her baby was pale and limp. He was also sweating; so she watched him closely. Suddenly Thomas started squirming, became more pale, then his stomach started rumbling. He screamed and arched his back so much that only his head and heels touched the bed when he was on his back. He started having projectile vomiting. When Edna picked him up, he grabbed her upper arm so hard that his fingers left bruises.

These episodes kept getting worse, so John and Edna took Thomas over to the Rices who lived in the other house on Edwaleni Mission Station in South Africa. James S. and Mabel Rice lived there. Mabel was the only one on the Mission Station who had any medical training. A lot of people came to her with their medical problems. Her son, Lowell Rice, was away in Johannesburg studying to be a Doctor. Mabel had taken a Basic Medical Correspondence Course from the Philadelphia School of Nursing. Mabel would force a dose of Castor oil or Epsom's salts down the children's throats whenever they had any abdominal pain! She would hold their mouth and nose closed until they had to swallow! Sometimes they would hold their breath so long that they would turn blue! I remember running away from home and hiding in the bush most of the day rather face Sister Rice and her medicine a second time. I remember my brother, David, and sister, Lois, being dragged, screaming, over to the Rice's house to be treated by Mabel Rice. She seemed to believe, like the African Medicine Men, that, the worse the medicine tasted, the better it worked! We children hated Castor Oil and Epsom's salts so much that we would hide any that our parents had in the house!

John and Edna found out that the Rices had gone somewhere overnight with the only reliable car on the Mission Station; so Edna had to be the "doctor". This turned out to be a blessing for Thomas! The Doctor later told Edna that Mabel's treatment would have probably killed him! Edna then remembered the huge "Doctor Book" she had brought from America. I read the book almost cover to cover while growing up in South Africa. (The Rileys had arrived in Durban January 27, 1938. Thomas was born at Port Shepstone Hospital On October 21, 1938.) Edna opened the book and there was a picture of a baby with its back arched and having projectile vomiting. The book described Thomas's condition perfectly! Thomas would need Emergency Surgery!

John and Edna loaded their four children in their 1927 Buick. This car had been given to Edna Riley by Brother J.S. Rice, principal of Edwaleni Industrial School where John Riley was Head of the Motor Mechanic Department. The car had a lot of mechanical problems. Edna said that John spent more time under the car than he spent inside it! It also had mechanical brake lines so the linkages needed frequent adjustments. Once five year old David had put water in the gas tank rather than the radiator! From then on there were frequent engine problems! The car would cough, sputter and stall on steep hills. We carried a log of wood in the car. When the engine would act up David would jump out and place the log behind the back wheel because the hand brake did not hold on steep hills. When the car surged forward David would pick up the log and run beside the car with the log ready for the next time

the car stalled! That way we would slowly make it up the hill! Sometimes there were people who would help push the car up the hill when it did not have enough power! Everyone but the driver would also get out and push!

The nearest Hospital was in Port Shepstone, about forty miles away. The roads were all gravel! The car lights were very dim and the road was treacherous. The trip took over four hours because the car had two flat tires along the way. John would have to remove the wheel, pry the tire off the rim, remove the tube, inflate the tube, then find and patch the puncture. He then had to remove the thorn or nail from the tire, remount the tire on the rim, inflate the tire with a foot pump, then replace the wheel on the car! If the tire was cut he would have to put a "gaiter" patch inside the tire. He would have to wait until the rubber cement dried before replacing the tube. All this had to be done in the dark in front of the car's headlights, or with a dim flashlight! The car barely made it up Wilson's Cutting, a very long steep incline. Previously, sometimes the car had to climb that hill in reverse, because the reverse gear was lower than first gear and gravity supplied more gasoline for the engine. Several vehicles were wrecked on that hill when they lost their brakes, went over the edge, tumbled down the steep sides of the hill, and ended up several hundred feet down in the valley. Several people were killed!

The Rileys arrived at the Hospital just about 8 AM. The doors were locked. They had to wait until it opened. The three other children were given some milk and peanut butter and jam sandwiches. Later, they ate bananas given to them by Mr. Dawdgee, an Indian Muslim grocer. He was concerned about baby Tom. He had great respect for my dad because he was a missionary. It was winter time. Thomas was very limp and pale, his spasms of pain seemed less severe. He was very thirsty but he would immediately throw up if he took any fluids. A nurse finally unlocked the Hospital doors and spoke to the Rileys. She told them that they had come on the wrong day of the year. Every year, on the first Saturday in July, it seemed that every able bodied person left town to see the "July Handicap" horse race in Durban, seventy miles up the coast. Saturday was usually a very busy day in town; but that day Port Shepstone looked like a ghost town! A semi-retired doctor was the only doctor left in town! All the regular doctors were gone! The doctor was seeing a patient in a nursing home just up the street. The nurse told the Rileys to go there.

The doctor listened to Edna's story; then he examined Thomas. The doctor felt a sausage shaped mass in the abdomen. He told John and Edna that the end of the small bowel had telescoped into the beginning of the large bowel causing an obstruction. The diagnosis was Intussusception. He was surprised that Edna had made a diagnosis that was frequently missed by doctors. He sent the Rileys back to the Hospital with a note to prepare for surgery. He told Tom's parents that twelve hours after the pain started, gangrene of the bowel would be developing.

Surgery was started at 2:15 pm on July 1, 1939. The doctor had tried to reduce the bowel obstruction with a Barium enema, but that had failed. There was no one else to give the anesthetic so he put the baby to sleep with open drop Ether. Then he showed a nurse how to continue dripping the Ether over the cloth mask. The Ether dripped off a safety pin stuck through the small screw- on cap on the can of Ether. Tom's abdomen was opened with a long vertical incision just to the right of the midline. The small bowel was carefully milked back out of the large bowel. The doctor was careful not to pull on the bowel. That would have caused it to rupture! Part of the bowel was black. A less experienced surgeon would have resected that part of the bowel. But the doctor placed the bowel back

into the abdomen and covered it with warm wet packs. After twenty minutes the bowel looked a little pinker so the abdomen was closed. The doctor told John and Edna that he hoped he had made the right decision not to remove the portion of bowel that might become gangrenous. He said that the other doctors always did a bowel resection when the viability of the bowel was in question, but he still believed that watchful waiting was a less dangerous approach.

The Rices returned that evening. Mabel Rice was disappointed that she had not been home the previous night. She was convinced that she could have cured Thomas with a double dose of Castor oil!

Thomas gradually recovered after getting subcutaneous fluids followed by small amounts of clear liquids given very frequently. Tom finally was discharged from the Hospital on July 10.

Initially, John and Edna wondered why the Lord allowed Tom to get sick when Mabel Rice, the "doctor", was away! They also wondered why it happened on the worst day of the year for the Hospital, when the younger more aggressive doctors were gone. They were also worried about having no one besides the surgeon to give the anesthesia. Why did an older doctor who had shaky hands have to not only do the surgery but give the anesthesia as well? But later they realized that it was perfect timing. Experience had won out over the latest training and technology. The doctor's gray hair, conservative approach and years of experience had proved to be superior to that of the younger more dexterous, and aggressive doctors who would have done the surgery on any other day of the year. At that time, few babies survived after undergoing bowel resections!

A few months after this surgery, John was ready to drive off in the Buick. He first checked the tires and engine; then he got into the car. As usual he leaned forward and looked in front of the car for any children or animals. He started the engine. Three times he was ready to let out the clutch but felt something was wrong. He finally stood up and placed his forehead against the windshield. He then saw the very top of Tom's head! He had left Tom asleep on the couch! Tom had slipped out of the house and was sitting in front of the car with his back against the front wheel, playing with a toy. He was oblivious to the sound of the engine. God had again saved Tom's life! Later Tom drank a cup of gasoline that made him very sick, but again he survived!

When Thomas was two years old he told people that he was born in "Knocked Over" (October). He loved to help the mission workmen round up the oxen and hitch them to the ox wagon. He knew every ox by name. The oxen were named after famous Zulu Warriors and Early European Settlers. Tom would call the ox by name and it would come and put its neck under the yoke that was held up by a workman. Tom would then ignore the long horns and crawl under the ox's neck and secure the rawhide strap that held the yoke down on the neck of the ox. Sometimes he would walk beside the team of oxen, yelling, and cracking the whip in the air over the oxen to keep them going! He would trade pieces of bread for toy oxen and wagons made of clay. He longed to grow up and have his own wagon and team of oxen.

When he was older, Tom and LeRoy Rice (son of Dr. Lowell Rice) went swimming in a forbidden swimming hole and contracted Bilharzia (Schistosomiasis). It took several years to cure them. They had to have very toxic injections of Antimony and Arsenic compounds. After he was a Missionary in Swaziland, Tom got the last treatment with a new drug!

In January 1946, the Rileys returned to the States for their first furlough. The 1927 Buick was sold to John's head teacher, W.O. Bennie, for five British pounds (about \$25). With the money, John

finally paid off the last of Tom's Hospital bills! In the 1970s the Buick engine was still running. It was being used to run a mill for grinding corn. It was also ran a sawmill. Brother Rice's gift still kept giving!

The long scar on his abdomen still reminds Thomas Riley of God's loving care and protection. He went on to survive several other illnesses, including Colon Cancer. He and his wife, Faye, spent many years as Missionaries in South Africa and Swaziland. They continue to serve the Lord on the "Home Mission Field" since they retired. God works in marvelous ways!

In 1960, my twelve year old cousin, Judy, started having spasms of severe abdominal pain and vomiting very much like my brother Thomas had when he was a baby. The pain would be so severe she would suddenly scream very loudly, upsetting bystanders. By the time the surgeon would see her, the pain would be gone. She was finally admitted to the best hospital in the Philadelphia area. Her surgeon was supposed to be the very best. He was world famous! He finally removed her appendix but the pain episodes continued. The surgeon then concluded that Judy and her mom, Vera, were hysterical, so he refused to return to the hospital when Judy's condition became critical. He had even convinced the nurses that it was a mental problem. Vera kept calling the surgeon who became very angry. "You are just a nervous mother. There is nothing wrong with Judy," he replied. "Doctor, if you don't come right now, the next time you see Judy, she will be dead", Vera replied. Sure enough, the bowel became gangrenous and ruptured. When it ruptured, the pain suddenly was gone, so the surgeon was sure he was right when the nurse called him with the update. But then Judy's abdomen became very tense and tender due to peritonitis. It even hurt when she breathed. Judy died a few hours later. The surgeon denied any wrong doing. He told Aunt Vera that any other doctor would have made the same mistake! "You should have told me Judy was vomiting; then I would have come back to see her!" the surgeon told Vera. "But doctor I kept telling you she was vomiting, but you refused to listen!" Vera replied.

I still have a hard time believing that my cousin died of a simple surgical condition that was misdiagnosed because of a surgeon's arrogance. Yet she had the very best medical care available for her. But, because the surgeon did not follow basic rules, the care was not properly utilized! Yet an old country doctor believed my mother, made the right diagnosis, operated on baby Thomas, and saved his life under much more primitive conditions. Personally, I still have had a hard time dealing with these facts!

My father, John Riley, was poor by some standards. He made the most money when he was 65 years old and started getting money from Social Security! He always served where the pay was the least and the need was the greatest. It took him several years to pay his son's hospital bill which was less than 100 dollars. My uncle, Judy's father, was a millionaire. He spared no expense trying to obtain the very best medical care for his daughter, Judy. Yet she did not get the care she needed!

In my surgical practice I have found that the mothers' and patient's instincts are usually right. I have been quick to operate when a patient's stated abdominal pain is out of proportion to the physical findings. I have always found an impending disaster when I have operated. So I have learned a valuable lesson from my brother, Tom, and my cousin, Judy. I have tried to teach this lesson to medical students and younger doctors. Hopefully, I have been able to save a few more lives with what I have learned from these two relatives.

Paul Riley MD, Email: hlinza@ymail.com

