What do we owe our lives to?

May 1981

At 6 o'clock on the morning of a Bank Holiday my wife Pat came into hospital to see me. Visitors aren't normally allowed at that time of day but I was about to go for surgery to have my large bowel removed. The operation was an emergency because the bowel was close to perforating. If that happened I would die. Pat was allowed to see me that morning because I might not live through the operation.

As the anaesthetist put me to sleep he told me to start counting so I began 'William I, William II, Henry I, Stephen, Hen …'. What else could a history teacher count?

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It was two years since I'd first been ill. I'd had X-rays, blood tests and swallowed a miniature camera that took pictures of my insides. I'd been diagnosed with an illness called ulcerative colitis which meant that the lining of the colon (the large bowel) was flaking away and so leaking blood. The doctors gave me steroid tablets which they knew could help because trials had been reported in articles in medical journals. They did help for a while but slowly the illness grew worse. I needed that operation.

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That operation lasted 10 hours. It involved a lot of people, specialist surgeons and nurses. Afterwards I was checked every quarter of an hour – temperature, blood pressure, pulse. I was given antibiotics to fight off infections and blood to replace blood I'd lost. After a month I went home, then in July had for a second operation lasting 6 hours. A third in September took 4 hours. I had three operations because the surgeon, one of the world's leading experts in bowel surgery, was using a new technique to rebuild a new bowel inside me. He travelled the world talking about his methods and learning from other surgeons and had built up the knowledge to be optimistic that this would work. I got this world-class treatment free through the NHS.

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But the experiment didn't work. My new bowel couldn't hold anything inside and I began to lose weight. I went down to 9 stone, then 8. At a little over 7 stone I went back for more surgery when they took out the experimental bowel and gave me an ileostomy. This means that the end of my small bowel now comes out of my abdomen [stomach] and what I will delicately describe as 'food waste' empties into a bag sticking to my skin. When I empty the bag I just take the clip off the bottom and empty it into the toilet. It's very simple although at first it took some getting used to.

Today, in 2008, that 10 hour operation takes less than 4 hours and can be done through keyhole surgery. Instead of an incision over 12 inches long, the modern incision is only two to three inches. And that experimental operation now works for many, many people, thanks to the pioneering work in the 1980s on people like me.

And there's even better news. Developments in medicines mean that many people with colitis don't need surgery at all. The impact of the illness can be greatly reduced because new medicines have been developed thanks to scientific research.

Activity

1. Earlier in history I would not have survived. How many reasons can you find above or think of to explain why I survived this illness?

2. Think about your own medical experiences or those of your family and friends. What medical knowledge, techniques and care helped them recover from illness?

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