

THE LAST BLISTER

TAN SOPAK*

FORTY YEARS A SURGEON

The last mini-marathon 10.2 Km. run in Vientiane, Laos, on Sunday morning of June 6th earned me a big blister on the ball of my right foot. However, it was bliss having passed through the *Victory Gate* in one hour and seven minutes, which came close to my *Personal Record (PR)*. At seventy, looking back at my running history, seven full marathons and many half and mini-ones all lined up behind, reminding me of those tremendous endeavors. At 55, I started my aerobic jogging program, in order to prepare myself for the approaching retirement. To celebrate my seventy birthday, I revisited Laos for another run with success, winning the price of another medal full of exhilaration, and a large blister on my right sole in addition. *A blister, as you all know, only occurs in living organism, but never on a dead one.* That was the very reason why I felt so fine at the *Victory Gate* that Sunday morning, despite those smoldering *cancers in my precious liver and both lungs.*

By now most of my company have known well that I fell a victim of *colonic cancer* since September 15, 1998. With hepatic and pulmonary metastases of dreadful prognosis, I had a big commitment ahead to fight my way out. I have dedicated the rest of my life for charity, wishing no one to become another victim of cancers. I now spend every moment of my living toward my goal: to promote the absolute wellness of mankind. For you all alumni whom I used to teach and train, most of the medical school curricula had contained too much the essence of sickness, being considered as any good doctors'

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paradigm. *For the sake of overall benefit of mankind, health promotion and disease prevention should be the first priority.* All right? So I'd like to emphasize to you all my friends to pay attention to whatever you do, wherever you are, and however you endure the fight for lives of your people, including your own. *Believe me, you must strive to maintain yourself and your customers a total well being always.* Are you fit for living yet?

To be fit for living a happy and productive life, you must pay attention to three factors: your health, both physical and mental, your physical fitness, and your healthy environment. All are to be adjusted by your attitude and behaviors. *To accomplish a good health, you should pay attention to what you eat, what you exercise, and how stable is your mental and spiritual components.* To gain physical fitness up to a fair level, you should engage in aerobic exercises heavy enough, long enough and adequately regular enough (at least three sessions a week). You may do anything for fun at the same time, since *healthy body resides in a healthy mind.* To expand these categories, let me quote myself as an example, of course not a very successful one.

“Genius is one per cent inspiration and ninety-nine per cent perspiration.”

-Thomas A. Edison

THE CANCER ATTACKS

By the dawn of September 15,1998, my health was jeopardized severely by the sudden onset of abdominal pain and obstipation. By the very minute I became enlightened the presence of a cancerous mass obstructing my sigmoid colon completely. I used to have many occasions operating on such a tumor during my active life as a general surgeon. That was the reason how prompt and precise could my diagnosis be made on site.

I drove myself to the hospital, *Suandok*, my old base. I summoned my daughter *Dr. Dararat Suwanbosri*, a CMU alumna (1987), to find me a good surgeon, preferable a proctologist to manage my emergency condition. She responded with calmness and proceeded. Forty years ago, there existed no Emergency Room (ER), but a small first aid room of *Suandok* (Nakorn Chiangmai) provincial hospital. Though many lives could be saved; but poor aftermath and complications were not uncommon, owing to the lack

of facilities and organization. By now, however, both drawbacks became unusual. *Dr. Phaisit Sirividyakarn*, the proctologist and our own alumnus (1980) met me in the ER, five minutes after my arrival. He asked me a series of questions in a routine history-taking episode, of which I loved to preach in the good old days, and naturally evaluate and scrutinize my students as well. I gave the doctor, whom I used to teach some decades earlier a test. This time it was not for his qualification, but my life as a big stake instead. He then proceeded to the physical examination procedures, among which one of my concerns was the rectal examination. I was much happier to hear that it was negative. If not, I would have to undergo an operation that included a permanent colostomy. I don't know whether it would be agreeable with my running, bicycling as well as swimming or else. My quality of life would be disturbed more than necessary. Sighing, I asked him how early he could open my belly to clear up the obstruction. My ideal surgeon hesitated a while, before telling me to wait until a train of investigations had been completed. He and *Dr. Malai Muttarak*, the Radiology Department head, a CMU alumna (1973) ordered a chest x-ray, a barium enema x-ray, a computerized tomography and an ultrasonic scanning of my bowels and liver. In the film reading room then gathered an unexpected congregation of specialists in various fields of Medicine, including *Dr. Sanan Simarak*, a helpful radiologist of my time. I was astonished to hear the many differential diagnoses cited by some of them. Among all the probabilities included a paralytic ileus (nonmechanical bowel obstruction), an irritable colon, as well as the uncommon Hirshsprung disease at my age. I accepted those optimistic opinions just fine; but not without contradiction while my belly was crying all along for an emergency laparotomy. I knew so well that the difficulty in my case sprang from the markedly enlarged large bowels, air filling all the space obscuring the soft tissue outline. In fact, my large bowels had expanded up to 8-timed normal. Finally they came to the same conclusion as my gleeful expectation: CA sigmoid colon, with complete obstruction. They all passed my evaluation fine, just in time.

"Pleasure is nothing else but the intermission of pain."

-John Selden

THE LONG, LONG OPERATION

During my early days at Suandok, surgical operations were performed under a primitive method of general anesthesia--the ether open-drop, which was considered safe though very inconvenient. Today our anesthetic facilities have been perfectly modified pioneered by *Dr. Narisri Maharakga*, one of my best woman colleagues. *Dr. Srirat Chaipruk* (1971), the anesthetist came to check my pre-anesthetic condition, and found nothing serious. The emergency operation was scheduled at 9 p.m. My family gathered around to see me departing for the better life. No, not the afterlife yet! Once I was laid on the operating table no later than a few minutes, my consciousness had gone and my spirit went astray.

I woke up in the recovery room and asked one of the attending nurses the time. Three a.m., she said. My calculation revealed that the operating time had been nearly six hours. What kind of operation that made it that long. At least I never did one that long; except the operation called *pelvectomy*, encouraged by *Dr. Robert A. Wise*, an American surgeon. *Dr. Wise* was well known for that kind of procedure: amputation of the entire lower half of the body from the pelvis down, in order to eradicate the extensive cancer around her hip. *Dr. Wise* was a very active old man, ten years retired, who had joined the Illinois medical team to assist us starting our brand new medical school in Chiangmai forty years ago. For the Illinois team, sponsored by *USOM* with the support from *CMB*, vivid memories of their friendly cooperation during the first decade of our development are still with us. Initialized by *Dr. James C. Plagge*, the team cooperater, and *Dr. Charles E. Richard* ("*Chuck*"), as the team consultant, the faculty started in high spirit. *Chuck* became our best friend who spoke Thai fluently with smiling face full of humor. He acted in the position of American counterpart to our dean, then *Dr. Bunsom Martin*, the sportsman. The first chief of the Illinois party was *Dr. William H. Whitehorn* who was rather serious but co-operative, with his teammates, twelve in all. *Dr. George Miller* who then ran the Department of Medical Education made the U of I famous. It was felt that the impact of the revolutionized philosophy of education had produced the best of Chiangmai medical graduates for exportation. Forty-seven of the fifty-six in the first class (1964) flew to the United States, and two to Europe for further study. Some of them eventually settled down there later on. Unfortunately a few of them died there while the others prospered, to make ground for later graduates to follow.

Now, where am I? Oh yes, I did recover fully alert by 3 a.m., when I found my ECG monitor running regularly above my head. It was so pleasant to be aware how my heart had been supporting me so fine and so far. I came to appreciate the effort I had toiled in the field of marathon for long time before, with many thanks to my valentine.

However, my wound pain was relentless, prohibiting any movements of my torso by all means. Thanks to the modern method of controlling postoperative pain by intermittent extradural instillation of anesthetic via a small catheter. With my eyes open, I began to recall all incidents just happened with reflection toward my past. Then my subconscious told me to stop reminding of yesterday, since it was only today that counted. *The fact that cancer had overrun me did not mean that I am overruled.* I was ready to fight back from dawn till dusk. Everyone I knew seemed to be on my side. Why should not I succeed?

“There is the greatest practical benefit in making a few failures early in life.”

—Thomas H. Huxley

THE EMPIRE STRIKES BACK

My philosophy to fight any cancers today differs greatly from the old one I have been taught in the medical school. The old method aimed at killing and eradicating ALL vigilant tumor cells. This is impossible, since cancer-to-be cells already present everywhere in everybody. Once a tumor gone, the other ones come, as far as you have the predisposing causes. There are many of them in the industrial world, not only polluted environment externally, but also those free radicals internally. *All cancer patients as well as the well being must exert all effort to encourage our immune system to actively protect the whole organism.* Aggressiveness in the treatment does not pay in the long run, only to make them cancer cells more aggressive. Surgical operations well executed in a sensible manner are beneficial. Radiotherapy and chemotherapy on the other hand must be considered more cautiously, since they also destroy normal tissues, and depress our natural immune mechanism quite badly. In fact modern researches reveal some good prospect about chemotherapy. For example, the discovery of the new agent *Capecitabine*, just approved by FDA last year, seems to have a future. It could be taken orally, thus

omitting thrombophlebitis that used to burn me up while I was on trial of the old 5FU (*Fluouracil*). The best property of Capecitabine that concerns me is the lack of toxicity, the so-called side effects. The reason is that the chemical itself does not release the active ingredient, 5FU until it is met with the specific enzymes produced by cancer cells. In my opinion, this is an ideal arsenal to fight cancer, since it strikes cancer cells selectively, and not the normal ones. However, no one can assure me yet as to the draw back effect on my immune system. I have to make the final decision.

To strike back cancers, first of all, you must make a strong commitment to master the battle plan. Being so, you can select the best of intelligence staff to help you. They are your surgeon, oncologists (including radiologist and chemotherapist), internist, nutrition scientist, exercise physiologist, physical therapist, psychologist, spiritual healer (fortune teller included if you prefer), and other complementary therapists. Select each of them carefully, and let them supply you with all data available up to date, but never have them command you. Your judgement that suits you is always the best. In another word, never do anything you hardly believe in; and whatever you do, you must have full confidence that it will do you good. The chief of staff does not make decision at risk, though never leave everything to destiny alone. Even though you can't control your destiny, you can influence your destiny.

That's briefly how I, the chief of my own empire strike back at cancer. To summarize in principle as quoted by *Greg Anderson* in his book, *The Cancer Conqueror* as follows:

1. Emotions affect us physically.
2. Beliefs, attitudes and feelings lead to illness or wellness.
3. Fear, anger, and guilt can depress the immune system.
4. The Stress Solving System: I increase my personal power and decrease my problem power.
5. Hope and hopelessness are both a choice. Why not choose hope?
6. Instead of choosing to be a victim, I can choose to be a victor.
7. Cancer is a reversible disease.
8. My job is to forgive--myself and others.
9. Our emotions don't so much happen to us; we choose them.

10. You become a cancer conqueror not because you go into remission--instead, you become a cancer conqueror because you choose to become a new person!

"Common sense in an uncommon degree is what the world calls wisdom."

-Samuel Taylor Coleridge

SPONTANEOUS HEALING

My last blister healed by first intention, as a matter of fact, rather unintentionally.

It was a spontaneous healing. So why not my cancer? My tumor was large, and had already spread to local lymph nodes, putting me on a high-risk category. I recalled the woman oncologist *Dr. Sumitra Tongprasert*, CMU alumna (1973) came to see me and wanted to start chemotherapy; while *Dr. Vicharn Lorvidya*, CMU alumnus (1971) asked me to have radiotherapy.

"I couldn't do it," I said, "something in me said 'No!'" They told me my cancer would come back in no time if I denied their willing to help me out. My own intuition prohibited me not to accept those aggressive therapies. Then came another thought: how could I know that they would harm me, unless I put myself up for a trial. So I let *Dr. Sumitra* gave me five initial IV doses of 5FU, a very potent cell killing agent, one each day. I'd got the answer: my brain dulled, my appetite lost, my weight down 5 Kg., my veins burnt, and my WBC went down to hit the 3,000/cu.mm. then considered the lowest limit of safety. For radiotherapy, I refrained since my bowels just passed the one-month shock period. My doctor finally agreed to respect my wish. There would be no chemotherapy, no radiation.

Instead, I embarked on a course of natural healing under the guidance of complementary therapists, including macrobiotics specialist, exercise physiologist, immunotherapist, chiropractor/neuropath, meditation specialist and acupuncturist. I used all the herbs that were supposed to have anticancer properties, including Ling-jeu mushroom extracts supplied by *Dr. Sakchai Polprasert*, CMU alumnus (1969).

My comprehensive program included a low-fat, low-sugar, high-fiber vegetarian diet, supplementation with antioxidant vitamins and minerals, regular exercise when

possible, regular meditation incorporating visualization of tumor shrinkage, and modifying my attitude toward peoples including forgiveness. To change my entire being was a very important aspect in cancer spontaneous healing. I changed my entire thinking, trying to see better thing in others' and getting my faith closer to the *Buddhists' three gems, namely, the Buddha, His teachings, and His disciples*. I meditated twice a day, fifteen minutes each session. I worked more and played more. I volunteered to serve all cancer patients in a complementary way. I learned acupuncture, while I was treated by one of the best acupuncturist in Chiangmai. I taught medical students and residents about the principle of spontaneous healing twice a week at the Family Medicine department. I studied them through the internet day and night. I read *Andrew Weil's book, Spontaneous Healing*, among the others. I gave lecture to various health clubs once in a while. I either played two rounds of golf or ran for half an hour trice a week. I rode my mountain bike up hill and downtown every Sunday morning with my buddies of the *Sunday Bicycle Club of Chiangmai*. I traveled around the country in my own car once a month. The last one was a five-day drive of 3,000 Km. around Isan. My touring spirit combined reverence and mirth. I also enjoyed organic farming and gardening, applying no harmful chemicals. I ate my own grown vegetables and fruits in seasons. I became a very happy and felt healthiest in all my entire life when I grew seventy with residual cancers in my liver and lungs. I was confident that they would all heal spontaneously. If not possible, then it would be probable that I remained living with them in peace.

With my last blister healed, I was on my feet again one week after the mini-marathon in Laos. I climbed upstairs the pedestrian crossover above the 4-laned high way leading from my *San Na Meng* retreat to *Doy Saket*. It was a widely open, rustic and peaceful community high over the light traffics at dawn. With the half moon still smiling just above my head, I enjoyed the unsurpassed view of the scenery in all directions amid fresh breeze of the rainy season. To my west I could see *Doy Suthep* with the pagoda lodging the Buddha's relic, and to my east the hill of *Doy Saket* where situated another sacred one. From there I could pay homage to both places of worship of the Enlightened One. My spirit soared above my entire being. That was my life.

“By appreciation we make excellence in others our own property.”

-Voltaire