

# The Glass Bug

Doug wasn't feeling well at all. The only good feelings he felt were that he was still alive and that his family doctor of twenty plus years had told him categorically his heart was not the issue. Doug hadn't been feeling well for several years, and, during that time his health had deteriorated. He had gone to his family doctor of course, and he had complained that his chest was painful and was hurting him. He also complained of shortness of breath, and of being tired all the time. His doctor had his Nurse Practitioner run an EKG and the results were that Doug did not have a heart problem. With that information in mind, his doctor told Doug he had a condition called Costochondritis, which he explained, was an inflammation in the soft cartilage where Doug's ribs met his sternum. This diagnosis seemed to make sense to Doug, and he was definitely pleased he did not have any heart issues.

Slowly though Doug's condition worsened, the pain increased, and Doug went back to his doctor. Another EKG was performed and again the results were that Doug did not have a heart condition.

Another year passed and Doug was now in constant, daily pain. He was still doing his daily hikes in the hills around where he lived, but more and more he needed to stop and rest, especially on the steep hills. When he went surf fishing, the hike from where he parked to where he fished was one mile in each direction, and Doug carried his waders, pole, tackle box, and he wore a small day pack with his lunch, water, and various other items. The hike wasn't too hilly but it was over sand in places, and there was a steep sandy hill down to the ocean. He would often go alone, and he would often stand in the surf fishing for two to three hours, only breaking to rest and to eat his lunch. Most times the walk back was even more arduous due to the surf perch he was carrying back.

Doug was a determined and stubborn person, and he also believed his doctor's diagnosis, and because of that belief he kept hiking and fishing and doing everything he had done before this pain had started. Doug was like that; he would investigate a pain or malady and as long as he wasn't making things worse, he would exercise as hard as he could.

One day he was hiking the hills where he lived and a neighbor caught up with him as Doug rested halfway up a very steep hill. Doug was pressing his palm against his chest as that relieved the pain somewhat, and when his neighbor, an EMT, asked him what was going on, Doug briefly told him about his pain and his doctor's diagnosis. His neighbor told Doug he doubted what his doctor told him was accurate, and that he should get a second opinion. As they neared a flat spot on the hill, and before climbing up another steep section of hill, the neighbor advised Doug that he should go home, and make an appointment with his doctor and ask for a second opinion. Doug turned around and walked home, pressing constantly on his chest as he gingerly made his way down the steep, dirt and rock, trail.

Two days later he was again in his doctor's office, and another EKG was done. Doug showed his doctor that the pain was slightly to the right side of his sternum, to which his doctor replied that his heart is more to the left, so he didn't think it was Doug's heart. But Doug told his doctor he had great medical insurance and he asked his doctor for a referral to a cardiologist. His doctor agreed and the next day he was in a cardiologist's office. The cardiologist was immediately very concerned by Doug's appearance, and by the fact that Doug was pressing his palm to his chest, and he ordered an EKG right then and there. The cardiologist thought the EKG showed some major issues and he ordered a treadmill stress test, the earliest of which could be done on Friday. He also told Doug he believed Doug was in a critical state and that Doug should be doing nothing strenuous until the stress test was performed. Doug however was stubborn and he went home and hiked up the hill he had stopped on two days before. He needed to stop but he made his stop very brief, and he managed to hike all the way to the top. This gave Doug a sense that his health, while it was not perfect, was not as dire as his cardiologist had insinuated.

Friday came and Doug went in for the stress test. He stripped down to his underpants, laid on a bed, and many sensors were placed on his body. After some readings were taken and a baseline was established, the technician told him to get on a treadmill. Doug began walking, and slowly the treadmill got faster, and slowly the treadmill was raised until it was as steep as the hills he walked up. Doug's breathing became labored and the technician asked if he wanted to stop but Doug shook his head no. Finally, the twenty-minute test was over, and the technician hurriedly moved Doug back to the bed he had been on, the sensors were quickly attached to a computer, and many tests were run. Doug's breathing was finally back to normal when his cardiologist came back into the room. After the cardiologist and technician had conversed in hushed speak for many minutes, his cardiologist informed Doug that he was being admitted to the hospital the following Tuesday to have a stent implanted in the artery on the right side of his heart. Doug dressed and followed the cardiologist to his office where he was told, in a most serious tone, that he needed to do absolutely nothing except rest until the following Tuesday. He was given prescriptions for nitro-glycerine and ordered to take it if he felt he needed to. He was told to dial 911 if his condition worsened, and a bunch of other things that Doug stopped listening to. He was also given a prescription that he was supposed to take before he went to hospital on Tuesday.

Sunday was a beautiful, sunny day. Doug felt good too, so he checked the tide chart and high tide, the best time for surf perch fishing, was in two hours. He decided to go fishing as this would be the last time he could go for quite a while he figured. Doug got his gear out, stopped at a delicatessen for a chicken salad sandwich and water, and he headed for the ocean. He hiked the mile out to the beach and he stood in the surf and fished for 2 ½ hours, catching numerous surf perch before walking the mile back to his truck. He needed to stop several times, including twice on the steep, sandy hill leaving the beach, and he was pressing his open palm tightly to his chest, thus relieving some of the pain. As he rested, he realized he had not brought his nitro-glycerine pills, and, as he glanced at his phone, he saw there was no cell coverage where he was. Doug gulped a little, thinking now this was perhaps a silly thing to have done, but he didn't fear dying. He carried on and made it back to his truck, and then

drove to his home. He cleaned, filleted, and skinned the six perch, washed the sand and salt water off his fishing pole, waders, and other gear, and finally he made some delicious fish tacos.

On Tuesday morning he took the prescription, and his son drove him to the hospital. Doug woke up after the procedure, and a male nurse was pressing down on what felt like a ball in his groin. He would later find out that operation had to be aborted as the artery was nearly one hundred percent clogged. Doug, after nearly four hours of lying in a most uncomfortable bed he had ever been in, was transferred to the heart ICU ward. At seven that night his cardiologist and the man who would be his new surgeon entered his room. Doug was informed that he needed open heart bypass surgery. The cardiologist informed Doug that neither he nor the surgeon could figure out why Doug was still alive. The other artery, horribly named the Widow Maker, was more than ninety percent blocked. The cardiologist then informed Doug that his children, who were there for the operation, had told him about his fishing trip. The cardiologist told Doug they would do the surgery the following Wednesday, and he told Doug he wanted him to remain in the hospital until then, because he didn't feel that he could trust Doug to rest.

Doug said no, and that he didn't want to stay in the hospital for a week. He insisted he be able to go home. The cardiologist sighed, patted Doug's hand, and told Doug that no matter what he chose to do he would remain his cardiologist. He then told Doug to rest, and that he would be back tomorrow.

The following morning Doug was informed his operation had been rescheduled for a Saturday morning. This operating team had not performed a Saturday coronary bypass surgery in many months, but due to Doug's condition his surgery was deemed an emergency. There were many tests that needed to be run prior to the operation so Doug would be very busy. His surgeon asked Doug many questions about his life and the things he loved doing, and the two men talked for nearly an hour.

Doug's bedding had gotten uncomfortable so he got up, took the blanket and sheets off, and was remaking the bed when an orderly and a nurse came in and asked him why he was remaking his bed. Doug replied that it needed it, and, after being admonished by both the orderly and the nurse, they all laughed. The nurse told Doug that all his vital signs were being monitored in real time at the nurse's station right outside his room, so when his heart rate and blood pressure soared, an alarm went off and they hurried into his room. She asked him to press the call button next time and someone would come in and see to whatever his need might be.

The next three days leading to his surgery were indeed filled with appointments, to which he was either wheeled in his bed or in a wheelchair. The tests were done early and the tests were done late, culminating in his body being shaved late Friday evening.

Early Saturday his children were there by his bed, and finally he was wheeled to the operating room.

Doug came to, a little, in a different room than he had been in before, but he soon passed out again. This scenario played out over the next day or two, and Doug was woken seemingly every four hours to take various pills. Finally, enough of the massive drugs he was given for the operation had left his body, so this time when he came to, he was more lucid, and more aware of everything that was going around him. The nurses spent much time talking with him and answering his many questions, his surgeon visited and informed Doug he had replaced all four arteries since Doug had stated he loved hiking. The surgeon went on to say that Doug's surgery had lasted a little more than six hours. His heart and lungs were stopped for most of that time, and his arteries were attached to a machine to keep his blood flowing. He added that he was holding Doug's heart upside down in his hand after his arteries were reattached and when the machine was turned off, and he watched Doug's heart turn pink again. Doug was struck dumb by the picture those words illustrated in his mind.

Doug's ever-vigilant cardiologist visited several times each day, and while Doug was the most uncomfortable he had ever been while lying in a bed, he also knew the worst was probably behind him now. Doug had a large plastic tube coming out from just below his chest cavity - a drainage tube he was told. This tube was the most uncomfortable piece of equipment he had attached to him. Whenever he moved the rough edges of the plastic tubing would scratch his legs. The nurses reiterated he was not to use his arms at all, and that his sternum needed to heal before he put any pressure on it. His surgeon had informed Doug he had used stainless steel wire to pull his sternum tight while it healed, but that the bone still needed to heal back together.

Somewhere during all this time Doug began to feel the need to poop. So, he asked the staff what the protocol was for that. An orderly came in and explained to Doug that all he needed to do was to let him know when he was ready. Doug was mortified at the idea of another man needing to wipe his butt, but once the urge became too great to resist, he pressed the call button and the orderly came to help him. The orderly opened two cupboard doors and there was a toilet he swung out into the room. He helped Doug out of bed and onto the toilet by making sure the various tubes and wires didn't get tangled or pulled. After Doug had taken his poop, the orderly stood him up, wiped his butt, helped him back into bed, and that was that. Doug had felt no shame whatsoever. He even laughed a little at how normal it had felt.

Doug was put on a special diet dictated by his surgeon. The food was absolutely awful, and Doug refused to eat it after seven days. After nine days his surgeon reappeared, and while examining Doug and removing many wires, including the one to his pacemaker, a nurse came in and told his surgeon that Doug had only eaten Jello for the past two days. His surgeon immediately told her that Doug could eat whatever he wanted, and with that a lunch of lasagne, salad, and garlic bread was ordered. His surgeon then told Doug he could go home in two days if all went well.

After eleven days in the hospital, he was finally told he could go home. A nurse came to remove the plastic tube that was draining his chest. She told him that he needed to take a deep breath and then hold it as she pulled the tube out, and that if he breathed stuff would fly out of the hole and she wouldn't like that at all. He took a deep breath, she pulled the tube

out, and then she tightened up the only stitches that were used in his operation. His chest skin had been glued back together, as was the incision that ran from his ankle to his groin. Doug had laughed when he found out they had used glue, and he asked his surgeon if it was Gorilla Glue they needed to use. His surgeon laughed aloud at that question.

His son picked him up and stayed with him while he recovered at home. His son drove to the pharmacy to get his prescriptions, his son cooked his meals, his son gave him his meds each day, and Doug settled back into his familiar surroundings.

Doug kept taking the medications he had been prescribed. One night Doug was in bed asleep when he felt a sharp pain in his leg. The pain was so sudden and so acutely painful he woke up. Then he felt that same pain again and he threw the blanket and sheet off himself. A large, glass bug, with a very pointed and hooked mouth, was taking bites out of his leg. Doug tried to shoo the large bug away but it was too tenacious to be simply shooed away. Doug was now on his knees, and he was swinging wildly with his two, now clenched, fists. The bug however was amazingly quick and elusive. As Doug watched the bug, he could clearly see the bug was made entirely of what looked like clear glass. Its wings and mouth, its exoskeleton and its legs, and even the tibia and tarsus were glass. Finally, Doug tired and, as he rested with his arms on the wall where the bug had just been, he realized he was in a drug-induced, altered reality; an amazing hallucination, that had seemed so real he had been completely taken in. Later, when he checked his leg, he saw the terrible scar that ran from his ankle to his groin, where the surgeons had removed the artery on the inside of his right leg so they could then cut pieces of that artery to bypass the blocked arteries. Using his own artery meant his body wouldn't reject it, and it also meant he wouldn't have to take anti-rejection meds for life. What Doug did not find however were any bite marks or scratches from the Glass Bug.

Doug laid back down and decided he would take no more pain pills. He promised himself he would look into all the drugs he was taking, and their side-effects, and then decide whether he would continue those as well.

The End.

Written by Peter Skeels © May 16th, 2022