

May 7, 2022

Dear Praying Family and Friends,

So much has happened in the past 14 days! I'm still processing, so here's an overview of all that's transpired since [April 23](#).

### [Saturday, April 23](#)

- Barbara and I are to drive to the Dallas Clinic for a white cell booster shot, scheduled for [3:00 PM](#).
- At [8:00 AM](#) while getting dressed, I notice a *tiny* red bump just next to the cuticle of the third finger of my right hand. By [2:00 PM](#) as we are about to depart, that finger has turned a liverish purple, swollen so much I cannot bend it, and a bright red streak has traveled from the base of the finger up to the middle of my forearm.
- A physician at the clinic inspects the hand and says (in effect), "Go straight to ER across the street. Do not go anywhere else before then. Go immediately. I will call ahead and get you to the head of the line."
- In the ER I am inspected by two nurses, one physician, and a hand surgeon. They insert an external IV line (they wouldn't use the PICC line), and started IV antibiotics. Then I am admitted to William P Clements Hospital, back onto the floor where I've already spent over a couple of months last summer and this year.

### [Sunday April 24](#)

- I am visited by a professor of infectious diseases who tells me that he suspects the streak is either staph or strep. He also says they're culturing my blood "just in case" something has made it that far.
- I am visited by a PA ("physician's assistant") from Hand Surgery who tells me the immediate goal is to rescue the finger/hand from surgery. If surgery is needed, recovery takes many weeks.

### [Monday April 25](#)

- First blood culture results come in, reported to me by a professor in the Infectious Diseases department of the medical center. Good news: no evidence of strep or staph in right arm. But, then, what's causing the infection? Bad news: I have an infection of *pseudomonas* in my bloodstream. Possible therapy: [24/7](#) IV antibiotics **for several months**. More bad news: the best antibiotics (fluoroquinolones) are ones I'm allergic to, all of them.
- Later, the department head of Infectious Diseases comes by and we have a great conversation. Second culture detects no staph or strep. Instead, it's the same bacterium - *pseudomonas* - that's in the blood. Problem: It's almost unheard of

for *pseudomonas* to "act" as it has in my right hand/forearm! One of the professors admits that he has never seen such a thing!

## Tuesday April 26

- The day is filled with visits from all the folks I've mentioned above, plus the head of hand surgery. The infection in my hand/arm shows the first small signs of recovery with the IV antibiotic they're giving me. Most are relieved that surgery likely will NOT be necessary.
- My oncologist Dr. Awan visits and tells me that we cannot proceed with the clinical trial until the infection is under control. *Pseudomonas*, it seems, has a great love of plastic surfaces, and that's what my PICC line is made of.
- Good news from the infectious disease folks: since it's *pseudomonas* which is retreating in my arm because of the antibiotics I'm already getting, they assume that the *pseudomonas* in my bloodstream also retreat. The plan: around the clock IV antibiotics after discharge from the hospital.

## Wednesday April 27

- I am discharged from the hospital with a boatload of medical supplies and IV antibiotics. My antibiotic is delivered with an elastomeric pump. [Mine looks like this.](#)
- The external IV port is beginning to hurt, especially when it's used for infusing anything. The nurse says, "Sometimes these simply stop working. I'll take it out." She does. A huge relief!

## Friday April 29

- Another long day at the clinic.
- My left arm - the one with the external IV port originally placed in the ER - is becoming very sore. The whole forearm is swollen. I can trace a very tender vein from just above my wrist (the IV line's entry point) all the way up my left arm to the bend in my arm. A PA says this is typical of inflammation, and that it may take a couple of weeks for the inflammation to calm down.

## Saturday April 30 thru Sunday May 1

- It's a blessed two days at home!
- Sunday Barbara and worship at Grace Anglican Church, in the chapel where I baptized my four daughters 32 years ago, where we celebrated Dad's funeral, where two of my daughters were married to my wonderful sons-in-law. That place is haunted with hallowed memories of memorials and celebrations, as well as 16 years of pastoral ministry. What a blessing!

## Monday May 2

- Another day at the clinic, which should have been finished by noon, but . . .
- My left forearm, where the external IV line had been removed, is now obviously swollen. The previously punctured vein has hardened. I worry because this hardening moves toward where my PICC line is inserted.
- I mention this concern to a different PA. She sends me to Acute Care - a place which addresses sudden health problems.
- In Acute Care, a physician agrees that something is not good. She orders a sonogram of the arm. I learn that there are blood clots in my forearm and also in the vein above the PICC line.
- Meanwhile, I've had another PET scan. The radiologist's report doesn't mince words: "FDG PET/CT demonstrates overall progressive ... cervical, thoracic, and pelvic lymphadenopathy (Lugano 5) compared with PET/CT dated 3/8/2022, suggestive of disease progression.
- I get this news via the internet just before turning in for the night. I don't say anything to Barbara. She needs a good night's sleep at this moment more than she needs this news, which will still be there in the morning.

### **Tuesday May 3**

- Another day of tests, labs, and whatnot. At the end of the day (around 4:00 PM) Dr. Awan and I sit down; he's prepared to share the sobering news.
- Dr. Awan seems relieved that I have already seen the radiology report and understand its import. What now?
- Dr. Awan explains that the next step to take is some version of CAR-T, a therapy I'll explain in a later update. It's arduous, it takes around four weeks of hospitalization and also living near the hospital (i.e. up in Dallas), and that's if everything goes well. I can tell that he's giving me plenty of room to bail on his services if I wish to do so.
- I explain to Dr. Awan that I'm willing to go forward with what he thinks may beat this disease, mostly because I have no fear of dying.

### **Dark and Slippery Ledges**

I am now in the midst of many tests (heart, lungs, etc.) to prepare for CAR-T therapy. In the next couple of weeks, Lord willing, I begin what is euphemistically called "bridging chemo." This means yet another attempt to keep a lid on the very aggressive cancer while a few million of my T-cells are re-engineered so that they attack the specific cancer in my body. This assumes there are no delays tossed into the mix.

I've been asked "What about those amazing improvements you reported in earlier updates?" The latest radiology report mentions those improvements, but they are confined to enlarged lymph nodes in my head, less so as you move down my body. Meanwhile, undetected by poking and prodding, the lymphoma in my chest and gut has grown very fast. I looked at the images for the full body scans - the most recent one and the one just prior to that. There's no question when viewing those two scans side-by-side which direction the cancer is moving.

Often in the past year my thoughts have settled on Israel's wilderness experiences. The Apostle Paul points directly at those days as exemplars of how *not* to face trials and tribulations (1 Corinthians 10:6ff). Consider, for example, these reports from Numbers 11 to 21:

- “And the people complained about their hardships.” (11:1) “And the rabble among them had greedy desires ... and said ‘Who will give us meat?!’” (11:4)
- “And Miriam and Aaron spoke against Moses.” (12:1)
- “And all the community raised their voice... and grumbled against Moses and Aaron.” (14:1-2)
- “And Korah ... with Nathan and Abiram... with two hundred and fifty leaders of the community ... rose up against Moses.” (16:1-3)
- “And the entire community grumbled against Moses and Aaron.” (16:41)
- “And the people quarreled with Moses.” (20:3)
- “And the people spoke against God and Moses.” (21:5)

All these insurrections were triggered by a trial our Lord placed before the nation, to test if they would put their trust in their Savior or, instead, complain and slander Him and His servants. And, so, St. Paul admonishes us, many centuries later!

11 Now all these things happened to them as examples, and they were written for our admonition, upon whom the ends of the ages have come.

12 Therefore let him who thinks he stands take heed lest he fall. 13 No temptation has overtaken you except such as is common to man; but God is faithful, who will not allow you to be tempted beyond what you are able, but with the temptation will also make the way of escape, that you may be able to bear it.

### **The Next Two Weeks**

I fervently thank all of you who have faithfully upheld Barbara and me in your prayers. Surely our spirits would have been much lower without your intercessions for us. Thank you!

The next attempts at fighting this disease won't be clear until they roll out over the next couple of weeks. So, I'll wait until sometime in the last full week of May to send out another update. I should know much more by then - about the blood infection, about the various checks on my heart, my lungs, my immune system, and all the rest of it. I should also have a better idea of what CAR-T (pronounced *car-tee*) therapy looks like.

Until then, please know that Barbara and I do not cease from thanking our Lord for all of you, including all of you whom we've never met but who pray for us from sheer generosity.

Much love in Hm to all of you,

Fr. Bill