

My Health Story

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I would like to thank all of those who sent cards and made phone calls, and all the prayers that were said for me and my wife during my open-heart surgery procedure. As a lot of you know, on June 12 I had open-heart surgery—which came as a shock to me, my wife, to a lot of the brethren and family and friends who know us.

Usually, people thought that I was pretty healthy, and I tried to take care of my health and thought I was healthy. But I'm diabetic and have been for about 20 years. Many of you know this and you're battling with that problem, too. For about 17 years I've been taking oral medicine for this.

Diabetes runs in my family. Out of seven children six of us were diabetic, and for most of us it was later on in life that we got this. Some say it's genetic, that it comes down through the genes. My grandmother on my dad's side died of diabetes in her sixties. Some say it's a lifestyle. Some say it's eating habits that are passed down through your family as you grow up. In other words, however your parents ate, that's how you eat, and you have a tendency to come down with diabetes.

There could be a lot of truth in that, and what you eat does have a big affect on your diabetes. But I think a lot of it is genetic, because my wife and I were taking a walk just recently in the neighborhood and we saw this other neighbor jogging. He's a fairly young fellow in his thirties and his head was bald. I told my wife that his dad—who died recently of cancer—was bald as well; that he looks exactly like his dad. So much for saying it's not genetics; his dad had lost all of his hair and was bald for many years.

It was suggested to me from someone that I do a message about my situation because it may be helpful to others in the Church. I'd like to say, starting out, I'm not a doctor, nurse or involved in any form or in any way as a health practitioner. I'm just going to go over some of my experience with diabetes over the last 20 years—personal experiences and also from what I've read and am still reading, and what some of the doctors and other professionals say about this.

I had to have a quadruple bypass surgery as a result of my diabetes. My surgeon told me that it was a result of my diabetes that I had the clogged arteries. One was 99%, two were about 80% and one was about 75%. My family physician just this week explained a little bit more saying that it is cholesterol, but the diabetes—the sugar that's in the blood, causes the formation of the cholesterol. My cholesterol was always very good; also my blood

pressure was always good, my triglycerides were good, and just this week I had a physical and had drawn blood the week before. Again, my blood pressure was good, my triglycerides were good and the cholesterol was good. I guess everyone has cholesterol to some degree, because the night before the surgery, one of the male nurses was going to give me a pill. I said, 'What is this for?' He said, 'It's for cholesterol.' I said, 'I don't have cholesterol.' He said, 'Everybody has cholesterol.'

Then a female nurse spoke up and said, 'No, he doesn't need that pill because I've got his chart here and all the blood work is done shows his cholesterol is good.' It was a result of the diabetes, combined with cholesterol causing it to stick in the arteries that caused this.

Every time I went for my A1C test—which a lot of you with diabetes are familiar with—every three to six months, as I mentioned, my blood pressure and cholesterol was always very good. The A1C test is where they take a sample of your blood and see what the average blood sugar level was over the past three months. Mine usually ran 7-point something, under 8—the average was probably 7.5; sometimes it was lower. This past week mine was down to 6.7—which is good. But it's still not down to where they want it. Most doctors now want your A1C reading—however often you have to get that done—to be around the 6-6.5 range or even lower.

The buildup didn't just happen over night. It took years for it build up in my heart. I mentioned what the percentages of blockage were—99%, 80% and 75%. I was a prime candidate for a massive heart attack or stroke. Thankfully, God allowed this to be revealed before one of these took place.

Just this week I had lunch with a couple of former co-workers, a couple of young guys from where I retired. One of is actually the fire chief there in the little town, and he's also a paramedic. He was surprised to hear that I had to have open-heart surgery. He said that with those blockages that probably unless 'you had found that you would have had a massive heart attack or stroke' and wouldn't be around.

He said, 'I don't want to scare you, but just this week I had to go on a paramedic run and the guy was about 83 years of age, and when I got there, he was already dead. There was nothing that we could do to bring him back at that stage. The scary part about it is that he had gone to his heart doctor that afternoon, and the doctor told him that everything was okay.'

It's kind of like my wife mentioned one time that at our family physician's one of the ladies that works there used to work with her and my wife had had an EKG and was told that 'you can't depend on those things, that you're told everything is okay and you walk out the door and fall down dead.'

Well, I actually had a EKG to compare with my EKG from last year and everything was about the same. But this was before I went in for some other tests.

How was this revealed to me? I would have spells going back several years where I would get very tired and feeling really bad. I thought this was because of my diabetes—which really it was. They would pass after a period of time and I would feel okay. However, the last few years these spells became more frequent. I told my wife that there was something wrong with me, but I didn't know what it was. I just knew I felt back. Like a lot of us, we feel bad but we don't know what it is. Everything seemed to check out when I had a physical or had my diabetes tests, so I thought everything is okay.

But about a month before the surgery I began to get some chest pains, and I thought I had just pulled a muscle or something, because I had been doing a lot of physical work. Also, I had been having pains up and down my right arm, not my left arm, so I had my wife rub my arm at night, and after the surgery basically that pain went away. I guess the pain in my right arm and shoulder—which I have a bad shoulder because of arthritis and bone spurs—but a lot of that was signs of the clogging of the arteries in my heart.

I was scheduled to see my family doctor for my three-month blood sugar test and I mentioned about the chest pain. At first I thought I wouldn't even mention it to him because I just pulled something.

I did mention it to him and he said that we needed to get this checked out. That's when he did the EKG and it seemed to be about the same as the one had 9-10 months before that. But he advised me to see a heart specialist. They did a stress test and also an echocardiogram. It was during the stress test that they discovered the blockages. I remember the doctor coming out and saying, 'Well, you've got some blockages'—after reading the stress test.

After that they did an angioplasty where they go up in the main artery in the leg in the groin area and they go up through the vein into the heart area and shoot dye in there and they can see any blockages. The heart doctor wanted to do this procedure before I had the stress test; saying, 'I like to do this first.' I thought, 'Well, let's go ahead and do the stress test and the other before we do this.'

They went up in there and shot the dye up in there that he discovered that there were the blockages, and there were two on the backside of the heart, so they couldn't repair it with stints or balloon-type device to hold the veins open. They can't get around the backside of the heart to put stints in there, so they had to do open-heart surgery, which means they had to cut open the chest cavity and spread the ribs apart so they can work on the heart.

They took veins out of my right leg for the bypass areas that were blocked, and also—which I didn't know until I went back to the surgeon that he did take one out of the inside of my chest near the heart. A lot of the soreness is gone now, but he had to take one out of the inside there.

The surgery altogether took about five hours. I'm thankful that God blessed me with a good surgeon with many years of experience and came highly recommended. The nursing staff, all RNs, in ICU took excellent care of me. All of them had worked for this surgeon for 10-11 years; they weren't novices, just out of nursing school. They were experienced in ICU.

Another definition for ICU: you have to wear a gown while you're in there, and it ties in the back. It's kind of hard for you to tie in the back, so if you're walking—going to the bathroom or down the hall—usually it's open and they say, 'I see you' (ICU). That's another meaning I found out for ICU. That's kind of a joke on the side.

What is diabetes and why is it such a growing problem in this nation and other nations of the world? There are reams of information online that you can look up, so I'm going to just give a brief summation of what it is and the types that there are:

Type-One Diabetes:

Sometimes called 'juvenile diabetes' or insulin dependent diabetes. The pancreas does not produce enough insulin, therefore, many have to take insulin. It usually occurs in childhood or adolescents, but it can develop at any age. People with type-one diabetes must take insulin every day. I know one young fellow who came down with diabetes about the age of 12.

Type-Two Diabetes:

Usually comes later in life; most commonly in their late 40s or early 50s. I was in my early 50s when I was diagnosed. The other five siblings also were in their early 50s and 60s when they were diagnosed. They have since passed on, and thankfully, I have not yet had to go on insulin.

The pancreas still produces some insulin, but the cells or receptors become damaged and they can no longer store the sugar to be released when need, therefore, causing the excess sugar to go into the blood stream. Over a period of time, if it's not controlled, it can cause heart problems, heart damage, strokes, amputation of limbs, loss of eyesight and many, many things as a result of diabetes.

Some of the personal effects that I have witnessed, I remember years ago when I was in the insurance business, I stopped by to visit a customer I had; he was in bed and already had one leg amputated because of diabetes; and on the other leg the toes were as black as a lump of coal.

He said to come over and feel his big toe. I was a little bit hesitant and I didn't want to feel it. It felt really hard like a lump of coal. He said that the doctors said that some more he would wake up and my toe would be 'in bed with me'—it would just fall off because there was no circulation in it. It was all dead, there was no circulation. Later on he had a fall and maybe a year later he died.

I know of a person who has passed away now—in the Church for many, many years (since the late 60s, like myself)—he had to have both of his legs amputated because of diabetes.

The one young fellow I mentioned that was diagnosed about 12 years old, had juvenile diabetes where you have to take insulin. He's in his 40s now and the last time I talked to him he had a couple of toes removed, plus they installed a pump inside his stomach now automatically injects insulin to make sure his body had enough insulin.

Also, it causes *loss of eyesight*. I know someone who is losing their eyesight because of diabetes. These are risk factors for type-two diabetes and also for juvenile diabetes.

Age 40 and over, a lot of people have a *weight problem*; they say, 20% more than you ideal weight. Whatever your body mass index is, I guess 20% over that, then you're a risk for diabetes.

If you *family has a history* of diabetes, then there's a good chance that you may also come down with diabetes. It seems to be prevalent—they don't know why—in African-Americans, Hispanics and Native Americans. Diabetes seems to run in those particular groups.

Some symptoms of diabetes are vague and they, by themselves, don't usually lead to a doctor visit. A lot of times you may have these things and not go see the doctor about it:

- increase in thirst

Some have found out that they had diabetes because they were constantly thirsty—wanting water and drinking

- frequent urination

Especially at night having to get up and going to the bathroom

- increase in appetite

Just hungry all the time

- unexplained weight-loss

There are people who didn't know they had diabetes and they lose a lot of weight. Their blood sugar may be 4-500, but they would be losing a lot of weight, and they go and get it checked out and find that the problem was diabetes.

- fatigue—feeling tired
- skin infections
- wounds that are slow to heal

That's just brief explanation of type-one diabetes (juvenile) and type-two diabetes (usually adult) and the onset usually comes on later in life, in your 50s or 60s.

A lot of times, before you get diabetes—and I had this—you have hypoglycemia; that is low blood sugar. Some of that is weakness, sweats, nausea and shaky. At night I would be watching TV and would say, 'I need to check my blood sugar, because it's low.' I checked it and sure enough it was low, down to 61, so I had to get something to eat.

If you eat a lot of sugary foods—I used to love to eat, I'd say, 'The only thing better than eating is more eating.' I had to change my mind on that several years ago. I used to travel a lot and go through the drive thru at McDonald's or some place like that. I love sweets and I'd stop and get a donut and coffee maybe mid-morning or in the afternoon and something sweet like that.

I'd been reading for years some of the labels on these foods; I always checked the carbs, but I never checked for sugar. Since I've had this heart operation, I look for the sugar. It's amazing! Sugar is in everything, even in milk. It's just unbelievable what you pick up. So, now I not only look for the carbohydrate contents, but also the sugar and the calories, as well.

If you've ever had experience in eating out, maybe pancakes or something like that and before noon I'd start getting weak and shaky and would have to eat something—protein. Well, that's hypoglycemia, low blood sugar. What happens is that when you eat something real sugary like that, you've got all this insulin that is being pumped into the body through the pancreas, and it pumps too

much in there, and that causes your blood sugar to drop. That is why you get weak, the sweats, shaky. A very low blood sugar level can cause you to go into a coma, just as a high blood sugar level can cause you to go into a coma.

If you have some of these symptoms, then you should probably get it checked out.

Early detection:

What are some of the things we need to do in order to help to see if we have diabetes or hypoglycemia? Family history of diabetes should be a red flag

If it runs in the family, like it did in mine, then it's something that you need to be aware of. I'm sure that they still have this test today, a glucose tolerance test. I started taking this test when I was in my late 30s. This is a test where you go in and they give you a drink—like a real strong coke-cola, real syrupy with a lot of sugar in it—and then they test to see how your body reacts to that.

They take a urine sample and a blood sample every half hour for the first hour then every hour. Then they read and see what your blood sugar level is over a period of about 3-4 hours. That's how long the test takes to see if your pancreas is pumping enough insulin in there to be able to ward this off.

I had this test down every few years, and when I was in my early 50s I was diagnosed with diabetes. The first few years I tried to manage by diet and exercise. Then it went on into where I had to take oral medicine, which I'm still on today.

There are things that you can do to offset or delay diabetes:

1. Diet:

Most of us have a working knowledge of diet and what we should and should not be eating. A lot of fruits and vegetables. I've been doing more and that. I wasn't on a bad diet before, but I'm watching more closely now. As I told my wife last night: *rabbit food!* Some meat.

Usually they look at portions. If you look at the palm of your hand, that's a portion. Or you look at your fist, that's a portion. These are some examples of how you should eat. Eat a lot of fresh vegetables, fruits and they recommend fish—salmon and sardines and things like that.

But there is a problem. I know that in our great state and the book they give you when you get your fishing license, it says if you eat meat more than one time a week out of the Ohio River or Lake Erie or some of the other streams, because of all the things that are going in there—all the spillage that

comes from the farms: chemicals and things like that. They use the rivers and streams like a sewer.

It's hard to get fish. I find that a lot of it comes farm raised. When you go out to a restaurant you might ask if it's farm raised. I ask if this comes from Alaska or up in Washington state someplace, and a lot of them say it's farm raised or 'I don't know.' For the most part it's farm-raised.

2. Control your weight

Get your weight under control. If you even lose ten pounds they say you're decreasing your risk for diabetes and heart disease and some other things.

3. Stress:

That's kind of a hard thing to control. You just have to take time—a place and time—where you can relax and try to do that as much as possible.

Diabetes is a bad disease! I didn't realize how bad it was. I'd seen some of its affects on other people, but didn't realize it until I had to go through my heart surgery. Another things about it, it's a slow killer. It did not take a week, but several years for the build-up in my heart.

What have I learned from having heart surgery? Something happened before this, that I realized that I needed to take better care of myself, and my health. I was trying: I had lost weight and was trying to eat better. Actually, A1C readings were getting better.

Two months before this happened I would just thinking one day, repenting and because I realized there were some things I could have done better to watch my health. I was repenting to God and asking for the help I needed to put more effort into managing my diabetes and my health. Some Scriptures came to mind and I would like to share those with you:

Romans 12:1: "I exhort you, therefore, brethren, by the mercies of God, to present your bodies a living sacrifice, Holy *and* well pleasing to God, which is your spiritual... [reasonable or rational] ...service." We have a responsibility to present, as we come before God, to take care of our health and our bodies, and present our body as a living sacrifice.

1-Corinthians 3:16: "Don't you understand that you are God's temple, and *that* the Spirit of God is dwelling in you?" If God's Spirit is dwelling in us, then it becomes a temple. Just like Solomon's temple or the tabernacle in the wilderness, God's Spirit is dwelling in us now, and we become a temple.

Verse 17: If anyone **defiles** the temple of

God... [or destroys it] ...God shall destroy him because the temple of God is Holy, which temple you are.”

1-Corinthians 6:19—Paul again says: “WHAT! Don’t you know that your body is a temple of the Holy Spirit, which you have *within you* from God, and you are not your own? For you were bought with a price. Therefore, glorify God in your body, and in your spirit, which are God’s” (vs 19-20).

As I was thinking about these Scriptures, I was determined to put forth more effort to take better care of myself. That may be one reason why God revealed the thing to me that I could be spared a few more years. My doctor told me this week that ‘you’re probably good for another 30 years.’ I don’t think so, I’d be 100-years-old. I don’t think I’m going to make it to a hundred.

I’m thankful that God did reveal this, and these Scriptures came into mind. I’m happy to tell you that I’m currently going to cardiac rehab three times a week, which is a 12-week rehabilitation. I’ve gone two weeks already. They have exercise equipment that they put you on and you start slow. They know that you’ve just come through this surgery and everybody in there has had heart problems or surgeries.

They also put a monitor on you so they can monitor your heart while you’re doing these exercises; they’re constantly watching that. If your heart rate goes too high or gets too low, or you start having pain, they can come over and stop you. They tell you that if you’re having any problems or difficulties, just stop.

There after I must continue to exercise, watch my diet and take better care of my body that God has given me and where His Spirit dwells. Realizing through the Scriptures I’ve just read that we are temple of God if His Spirit dwells in us. We have a responsibility to take care of our health.

As a spirit body, what kind of care we have to do to take care of that, I don’t know. That’s just something I’ve thought about, not just recently, by years ago. That’s a Mars’ Hill subject, so that will have to be discussed, and we’ll find out just being in God’s Kingdom and we’ll have the answer to that.

We know it’s not going to be like this physical flesh that we have now, and that’s going to be great. Hopefully, my story will be of help to those of you who are diabetic already and you’re struggling with this disease—*it is a struggle!* So, hopefully it will prompt those who suspect, or have symptoms that I mentioned, to take the necessary steps to get the help and professional advice to ward off this deadly sin.

Hopefully, this has been a help to everyone. Again, I’d like to thank all of those that we received cards and prayer from. We pray for you and certainly I’m thankful that you prayed for us.

Scriptural References:

- 1) Romans 12:1
- 2) 1 Corinthians 3:16-17
- 3) 1 Corinthians 6:19-20

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