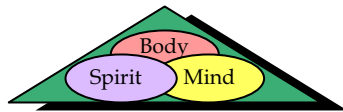
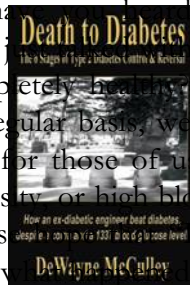


Chapter 2. My Coma & Recovery



My Coma

Surprisingly, I became ill in a very short period of time and almost died without any warning. This is very important to grasp because death can come upon us very quickly when we continue to ignore the signs, such as weight gain, fatigue, or an increase in blood pressure. Interestingly, this is the false trap that we all fall into – what I call the “False Illusion of Health”. How many times have you heard about someone having a stroke or heart attack and you thought that person just a few days ago and he/she looked completely healthy? And, despite this type of health crisis occurring on a regular basis, we never translate that health crisis happening to us. And, for those of us who are ill with a health problem such as diabetes, obesity, or high blood pressure, we ignore our doctors and live with this false hope that “it’ll go away” – what I call “The State of Denial”. That is what happened to me.



It was March 2002, work at Xerox was busy as usual, especially with the recent reorganization and restructuring within the company. As our engineering teams had become smaller and lost key talent, we had to become more efficient in getting work done. I had stopped playing basketball and tennis, and was eating more processed foods, gaining weight, increasing my cholesterol level and ignoring the warning from my doctor to change my eating habits. As a result, I had gradually put on 45 pounds within several years. I had started to drink more and urinate more frequently, but I thought that it had something to do with my prostate. So, I scheduled a doctor’s appointment for April.

I awoke the morning of March 19, 2002 in a semi-paralyzed state – my arms and legs felt rubbery, similar to how your arm or leg feels when you sleep on it. Because I didn’t feel right, I had decided to go back to sleep

to get some extra rest and go to work later that morning. But, for some strange reason I decided to call 911 and was rushed to the hospital by the local ambulance. I found out later that if I had gone back to sleep, I would have died in my bed that morning.

According to the doctors, I went into a non-ketotic hyperglycemic hyperosmolar (NKH) coma, with a blood glucose level of 1337, and almost died. In fact, the doctors had called my mother (who lives in Pennsylvania) to tell her that by the time she arrived in New York, I would probably not be alive. But, for the grace of God, and the expertise of the doctors and nurses, I somehow survived the coma, the blood clots, and death.

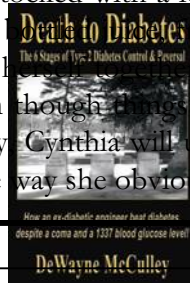
My Daughter's Arrival

At the time I went into the hospital, there was a terrible snowstorm that made it almost impossible to travel. My daughter, Cynthia, had called the airline to get a plane as soon as possible. When the operator told her it was going to be expensive, Cynthia said, "I don't care what it cost! I need to get to my father, he's in the hospital." The operator told her that she could get a discount for bereavement if she obtained a notification from the hospital, which she did. I have been in pretty bad shape, because when Cynthia arrived at the hospital she didn't recognize me when she entered my room. In fact, she turned around and asked the nurse "Where's my father? This must be the wrong room." When the nurse told her "Well, that's Mr. McCulley." Cynthia was devastated – she had never seen her father so sick, overweight and close to death.

Every night Cynthia called my mother, who would provide Cynthia with encouragement that "God will get your father through this coma." Cynthia also relied on her mother, who was also concerned with my condition. Cynthia and her mother talked several times a day just to maintain some sense of hope and to support each other. Consequently, this allowed Cynthia to calm down and focus on what needed to get done while I was in the hospital.

When I came out of the coma and was fully cognizant of my surroundings, Cynthia told my mother that night, “Grandma, Dad’s out of the coma, but he still looks pretty bad.” My mother told Cynthia, “Tell your father to pray.” Cynthia said “But I’ve never seen my Dad pray before.” My mother said, “Cynthia, all my children know how to pray – they were all raised in the church.” So the next day Cynthia told me “Grandma said that you should pray.” I said “Okay.” and, that night, and the following morning, I prayed like I had never prayed in my life. I found out later that the nurse talked to my mother every morning and had seen me praying. She told my mother “I have some good news for you. I saw your son praying this morning.” My mother smiled and said, “That’s good to hear.”

My mother also provided Cynthia with guidance concerning what foods to buy since my kitchen was stocked with a lot of snacks and junk food, e.g. cookies, pies, cakes, soda, frozen dinners, etc. With my mother’s help, Cynthia pulled I and was very instrumental in keeping my spirits up, even though things didn’t look very promising those first few days. Hopefully Cynthia will utilize that same strength to help fulfill her own destiny the way she obviously redirected mine.



Hospital Events

I was in the intensive care ward for the first seven days of my hospital stay. There were several times that I could have died, but there were several interesting events, some of which I believe redirected my fate:

- There was a lot of disagreement concerning why my blood glucose level was so high. Some of the hospital doctors were convinced that I was an alcoholic, until my doctor showed up to set the record straight. Otherwise, without my doctor’s help, I’m not sure if I would have received the proper treatment at that critical time when my life was still in the balance.
- I remember the head nurse – her energy, her drive, and her commitment to keep me alive. I believe she didn’t go home that first night and was very responsible for keeping me alive during that critical time. (I sent a letter to the hospital personnel department a

couple months later thanking her and the other medical staff for not giving up on me).

- For some reason, one night, I couldn't go to sleep no matter how hard I tried. Then, a nurse came in to give me some medication. But, something told me to ask her: "Why are you giving me this medication? What is it for? I haven't been given any medication at night before now." Then, the nurse realized that she was in the wrong room! She apologized profusely and left immediately.
- As my health started to improve, one of the people from my engineering team stopped by to visit. At work, we call him "Elton John". I believe it's because of his hairstyle and the fact that he plays the piano. Later that day, when one of the nurses asked me how I was doing, I said, "Pretty good, Elton John just stopped by to say Hi." Because the doctors and nurses thought that I might be developing dementia, I received almost hourly encouragement and advice during the rest of my hospital stay to improve my health.



Out of the Hospital

My daughter drove me home after thirteen days in the hospital. Finally, I thought that I would get some much needed rest. But, we needed food so we drove to the grocery store. It took more than two hours going up and down the aisles trying to find the foods that my mother had told Cynthia to buy for me. This was torture because my legs were rubbery and I didn't have much energy. After about an hour, I felt shaky and a little dizzy. I realized that my blood sugar was low and that I was in danger of going into another coma. Cynthia had bought me some candy bars for emergencies, but she was in another part of the store, and, I didn't have time to find her. I went to the candy bar aisle and found one of my favorite candy bars, Almond Joy. I opened one of the bags and quickly ate two of the candy bars and the shakes subsided. I thought: "Wow, is this what I have to look forward to for the rest of my life?"

Although I was out of the hospital, I was placed on short-term disability and could not return to work. Because of the severity of my diabetes, I was required to take 4 insulin shots a day to control my blood glucose and prevent a future coma episode. In addition, because of bouts with

dehydration, blood clots (deep vein thrombosis), oxygen deprivation, pneumonia, and high cholesterol, I had to take other drugs including Coumadin (to thin my blood) and Lipitor (to lower my cholesterol). Although the drugs were keeping me alive, my overall health was not improving and I was not getting any stronger. I was extremely fatigued, overweight (by 60 pounds), and felt faint/dizzy because my body was unable to effectively convert the food to energy. Because of my fear of needles, it was extremely difficult psyching myself up every several hours to inject myself with the insulin. In fact, I briefly considered having a home nurse give me my insulin injections, but at \$100 a visit, four times a day, it didn't take long to figure out that I'd better get over my fear of needles. A home nurse did visit during the first week to ensure that I was injecting myself properly with the two different insulins and to answer any questions.

My Mother and Sister's Arrival



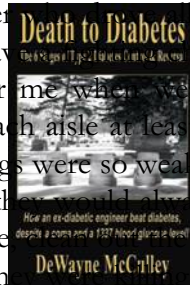
Three weeks had now passed, and Cynthia needed to return to work. But, she was very concerned about leaving me alone. My mother told Cynthia that she didn't need to worry because she was going to fly here to pick up where Cynthia had left off. Cynthia was surprised especially since my mother had never flown before! In addition, despite the financial costs of a plane ticket and missing work, my sister Marguerite decided to accompany my mother.

When my mother and sister arrived, they didn't waste any time in getting the house in order. They inspected each room and quickly identified a set of activities that needed to get done. In addition, because of the information they had received from Cynthia, they concluded that it was imperative to collect all my unopened snacks and junk food and return them to the grocery store. They made me pack up my cakes, pies, potato chips, sodas, TV dinners, cookies, bottled juices, etc. and return them to the Wegman's grocery store. This was quite embarrassing, but what choice did I have? Face my mother? It was easier to face the store clerk. When the store clerk saw the three carts of food that I was returning, she asked me why. I meekly whispered and pointed to my mother who was standing behind me with a stern look on her face. I think the clerk felt

sorry for me, so she accepted the returned food and gave me a store credit of almost \$250! During the next month, I didn't have to pay for any food that I bought from the store. Thanks to my mother and the Wegman's grocery store, it was financially beneficial for me to eat healthy.

My mother felt it was necessary that I learn how to cook properly so she wrote several recipes for some of her dishes. My mother and my sister both showed me how easy it was to prepare a healthy breakfast, lunch, snack and dinner in very little time. They also dragged me to other stores to purchase other items such as the Foreman Grill, a blender, a nonstick frying pan, and a steamer.

People ask me all the time how I was able to turn around my bad eating habits so quickly. I point out that it wasn't really me – it was my daughter, mother and sister of the changes. Hmm-mm . . . three women – I didn't have a chance now that I think about it. They didn't feel sorry for me when I went grocery shopping. They would go up and down each aisle at least 3 times while I held onto the grocery cart because my legs were so weak. There were many times when I just wanted to rest, but they always have something that needed to get done: go to the store, garage, clean the bedrooms, do the laundry . . . I believe that I came and enjoying it at the same time. Ironically, my doctor believes this push from them and not feeling sorry for me may have accelerated my healing.



After about two weeks, my mother and sister felt that they had accomplished what needed to get done, so they returned home.

The Accidents

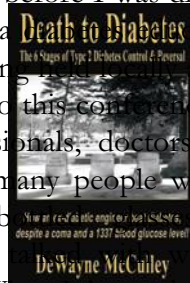
During my recovery, there were several serendipitous accidents that my mother refers to as “blessings that were meant to happen.”

The 1st accident (or blessing) occurred when the head nurse didn't go home when her shift ended the day I entered the intensive care ward of the hospital. She was instrumental in keeping me alive during those initial critical hours when it appeared I was not going to make it.

The 2nd accident occurred when my daughter bought the diabetes book, titled *The Insulin Control Diet* by Dr. Calvin Ezrin and Robert Kowalski. At the time, I didn't realize how important this one book was going to be in my understanding the science of diabetes. As it turned out, this was the only book that I came across during my recovery that explained diabetes from a scientific perspective including how insulin really worked as a fat storage hormone and an instigator in critical vitamin/mineral losses and deficiencies. It also explained the importance of glucagon and why diabetics have so much trouble managing and controlling blood glucose highs and lows. When I asked my daughter how she selected this book, she had no logical answer since she herself knew very little about diabetes. She wasn't certain how her hand was guided to select that one book from so many others.

The 3rd accident occurred just before I was discharged from the hospital. One of the nurses, who was a diabetes health conference being held at the Hyatt Regency Hotel. I was fortunate to be invited to this conference where I met hundreds of diabetics, health care professionals, doctors, nurses, pharmacists, and medical sales people. I saw many people who were without limbs, in wheelchairs, wearing coke-bottle glasses, limping, and severely overweight. Everyone that I met was helpful in sharing their knowledge about diabetes. What I learned about diabetes during this conference would have taken me at least a month to learn on my own. Ironically, I learned a lot about what *not* to do if I wanted to defeat my diabetes. And, the knowledge, spirit and unselfishness of everyone provided me the focus that I needed to fight this disease. In addition, fear was a key motivator and became my catalyst for change because I didn't want to lose a limb, my eyesight or end up in a wheelchair.

Because of my poor health, I had difficulty exercising. I tried to exercise to lose some weight, but I didn't have the energy. And, even when I had some energy, the exercising just made me hungrier, leading me to eat more and eventually put on more weight! Also, it was frustrating and scary to exercise and see my blood glucose level go even higher when I thought that exercise would help me to lose weight and lower my blood



glucose. I found out later that the intense exercise triggered my liver to release stored glycogen, which caused my blood glucose to rise.

With so much time on my hands I didn't know what to do to slow down the progression of the disease to prevent amputation and possible blindness. Then, came the 4th accident that changed everything! One evening, while I was sitting at the kitchen table crying and feeling sorry for myself, my elbow accidentally hit one of the biblical pamphlets that my mother had left for me to read. The pamphlet fell on the floor and opened to a page displaying the scripture **Leviticus 17:11: "The life of the flesh is in the blood."** I didn't really know what that meant, so I mistakenly interpreted it to mean that "since my flesh was dying, the answer to my problem was in my blood"; and, that I needed to increase the number of times that I was testing my blood each day to find the answer to my deteriorating health. By testing my blood up to 8 times a day including 1 hour and 15 minutes before each meal, I was able to collect a tremendous amount of data over a period of time. As a result, I was able to quickly eliminate the foods that were causing my blood glucose to spike, e.g. cereal, pancakes, wheat bread, bananas, bagels, orange juice, apple juice, rice, low-fat salad dressing, toast, French fries.

Right after my mother, sister and I had returned home, the 5th accident occurred one morning while I was preparing my breakfast and noticed that I had run out of my favorite cereal. Because my blood glucose that morning had been a little on the low side (65 mg/dl), I started to get weak and a little dizzy. I didn't want to eat a candy bar, so I went to the refrigerator to see what my mother had prepared for me. I found some Brussel sprouts in a plastic container. I hated Brussel sprouts. However, because I was getting weaker, I didn't have much choice, so I quickly heated the Brussel sprouts with some olive oil and a leftover piece of salmon. Surprisingly, when I measured my glucose level 2 hours later, I noticed that it had not spiked as it had in the past! I was very excited, but, then, I thought maybe it was a fluke because my glucose level had started at such a low level. Anyhow, I felt that I had nothing to lose so I decided to eat Brussel sprouts again for lunch, my mid-afternoon snack and dinner. Each time, my glucose leveled off 2 hours after the meal! A few days later when I went back to my favorite



cereal, my glucose level returned to a higher level after breakfast. So, I decided to change my concept of breakfast and eat a green vegetable as my carbohydrate in place of the traditional cereal or other grain. With each passing day, my glucose levels were steadily coming down. (I found out later during some research that the juice from Brussel sprouts and the juice from stringbeans are very nourishing for the insulin cell receptors and the body's glucose management system).

It didn't take me long to modify the hospital's diet plan and develop a healthy nutritional plan while slowly and methodically reducing my insulin injections, one to two units at a time. This, in turn, lowered my body's resistance to insulin and reduced my average blood glucose level from 300⁺ to 200⁺ to 120⁺, and, finally to 88.5 mg/dl (with less than a 10 mg/dl deviation) within four months. Also, my hemoglobin A1C was reduced to 4.4% (normal range is 4.2 to 5.5%).

Interestingly, I discovered that many so-called "healthy" foods recommended by the dietitian were not good for diabetics! For example, cereal, rice, pancakes, bananas, toast, wheat bread, mashed potatoes, orange juice, and apple juice all caused my blood glucose to rise and remain high. Once I eliminated these foods, my cravings for refined carbohydrates diminished greatly and my blood glucose level stabilized.



During those 4 months I was able to reduce my insulin dosage from 60 units to 0 units and, within another month, I was totally drug-free – no more Coumadin or Lipitor. Also, my energy level continued to grow while my need for food decreased. Because my body was doing a better job utilizing the nutrients from the food I was eating, my body did not require as much food (fuel) to produce the necessary amount of energy that I required on a daily basis.

Doctor Visits

The doctor visits to the ophthalmologist went very well. Fortunately, there was no major damage to my eyes as the swelling of my lenses eventually subsided and my vision returned to normal within three months. The visits to my primary care physician also went very well. In fact, my primary care physician was always supportive and encouraging;

and, wanted to know what I was doing to be recovering so quickly. He was very interested in how I figured out how to safely wean myself off the insulin, and asked for a copy of my charts.

Unfortunately, the visit to the endocrinologist did not go as well. When I showed him my blood glucose charts and how I had started to wean myself off the insulin, he was very concerned. He felt that I was taking too aggressive of an approach to this serious disease. He prescribed several shots for pneumonia, flu, and other ailments because a diabetic's immune system is weakened, making his body more susceptible to infections and other diseases. When I suggested that I wanted to strengthen my immune system with nutrition instead of weakening it with the shots, the endocrinologist vehemently disagreed with this strategy. When I left the office, the nurse warned me that I was going through a "honeymoon period" and that, because of the seriousness of my diabetes, it would just take a little time (2 to 3 months) before I would need to return to take insulin. When I left the doctor's office, I ran into two patients in the lobby who overheard that I was weaning myself off insulin. They were surprised and interested in how I was weaning off insulin, but I didn't really know what to say at that point. I had assumed that everyone would want to wean off insulin, and, that I was just learning what everyone else already knew.



When I returned to my car, I broke into a cold sweat because I wasn't certain what to do. This was very unsettling to me because my doctor, who has been treating diabetics for 26 years, did not review my blood glucose charts or support my using the charts to gradually wean myself off the insulin. I believe that he was trying to protect me from having another diabetic coma incident, but I was concerned about my body becoming dependent on the insulin injections. I sat in the car and prayed for the strength and the guidance to do the right thing. My inner voice told me to continue with what I was doing; and, so I continued to wean myself off the insulin, first the Humalog, then, the Lantus – until I eventually reached zero units.

Back to Work

Now that my blood glucose levels were stable, my doctor gave me the authorization to return to work. But, he did have some reservations because he felt the stress of the job might trigger another diabetic attack.

At work, people were very kind and, some would stop by my office to ensure that I was okay and had not gone into another coma. I wanted to get back to my life as an engineer, but at least one or two people would stop by each day with questions about diabetes. I was surprised to discover that some of the people I knew or worked with were either diabetic or had a relative who was diabetic. They had heard about how I had wrestled with this disease and was no longer on insulin. And, they wanted to know how I did it. When I tried to explain, I usually forgot something important, so I started writing down some of the key points on a notepad. The notepad gradually grew to a 10-page document.

Several people including my daughter suggested that I expand the document into a book, but I didn't think I had enough information for a book; plus, I didn't really want to invest that kind of time into writing a book. After a year of excuses for why I didn't want to write a book, I finally relented and, after a market-needs analysis, I started writing a book in mid-2005.

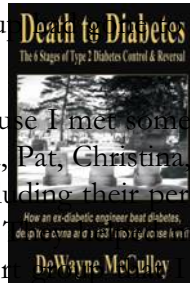
As my health continued to improve, I was able to transition from half-days at work to full days within a month. My company's engineering management and the personnel department supported me by not putting pressure on me while my team picked up some of my responsibilities. Consequently, I did not feel any stress during that critical time of my recovery; and, I was able to gradually increase my responsibilities at my own pace until I was operating at full capacity once again. And, just when I thought things were finally returning to normal, I would accidentally run into someone who was either diabetic or had a family member who was diabetic. Then, I would spend the next several minutes sharing information with them that seemed to lift their spirits – but they still had more questions.

Support Group & Church Meetings

Then, another one of those accidents occurred when a member of a local diabetic support group, Alfreda, asked me to come to their meeting and share my story about diabetes. Coincidentally, Alfreda had catered a picnic for the organization I worked for a couple years ago and she had heard what happened to me from a secretary who used to work for one of my previous managers. After I shared my story with the diabetic support group, I was surprised by their energy and enthusiasm for someone they had never met. Then, I was asked by the local director of the American Diabetes Association (ADA) to facilitate the diabetic support group meetings. It just happened that the person who had been facilitating the support group meetings had left for a better job opportunity a few weeks earlier. I also found out later that some of the people in the support group the ADA director to ask me to facilitate their meetings.

This was a key event because I met some wonderful people like Alfreda, Marion, Mary, Alvin, Rena, Pat, Christina, and Margaret who shared their stories about diabetes, including their personal concerns and frustrations with fighting this disease. I was able to build my confidence with other people in the support group I didn't know. I was able to use this forum to share the knowledge that I had acquired during my recovery. But, because we only met once a month, it was difficult to build any momentum. Also, the information wasn't getting to enough (new) people, and the ADA director and I didn't know how to address this.

Another accident occurred when one of the local churches asked the ADA director to give a presentation on diabetes as part of their Men's Day Program. But, at the last minute, the ADA director couldn't make it. So, she called and convinced me that I could do the presentation even though I had never done anything like this in a public forum. Since I was not comfortable with speaking in public (especially about something that I was just learning about), I reluctantly accepted to give the talk – as long as I was allowed to read the information from my notes.



When I arrived at the church, I was very nervous for three reasons: one, I didn't like speaking publicly especially in front of people I didn't know; two, I hadn't had enough time to practice reading my notes; and, three, I didn't know how I would take a full thirty minutes to talk about diabetes. After I was introduced, I slowly walked to the podium, trying to collect my thoughts. I started out thanking the church for inviting me and talking about my upbringing in a small town and church in Pennsylvania. I wasn't certain how to segue into the diabetes talk, so I said something like: "God blessed me with the perfect disease for an engineer – diabetes." Of course there were a lot of dumbfounded looks in the audience, which made me more nervous. So, I repeated part of my statement to try to collect my thoughts: "God blessed me with the perfect disease, a disease that medical science says has no cure." I heard a few "amens" from the audience congregation, so I repeated the statement: "God blessed me with the perfect disease, a disease that medical science says has no cure. I had a blood sugar level of 400 mg/dl and I took 4 insulin shots a day. Today, I no longer take any medication, my average glucose level is 92.5 and my hemoglobin A1C is 4.4%." I heard more "amens" from the congregation, which relaxed me and the next thing I knew I was talking about diabetes and how to proactively control the disease with the right foods and more frequent testing. Minutes flew by very quickly.



When I tried to wrap up my talk, the congregation wouldn't let me because they had a lot of questions. I said that I was not prepared to answer any questions because this was not my field ("I'm an engineer not a doctor."). But, I agreed to write down the questions I couldn't answer and would have someone get back to them. Well . . . 20 minutes later, I had somehow answered all of their questions. During the next program intermission, several people approached me with more questions. This eventually led the church to setting up a diabetes support group that I facilitated with some wonderful people like May, Eric, Valerie, Dorothy, Ruby and Annie.

Then, another church that heard about the presentation asked me to give a similar talk to their congregation about my experience with diabetes; and, another church asked me to come to their Saturday Morning Breakfast. Then, a wellness group asked me to give a presentation; and, a correctional facility asked me to provide a presentation on obesity and diabetes; and, a senior citizens retirement facility invited me to discuss how to eat healthy on a fixed income; and, on and on it went.

Then, the scope of what I was doing was expanded when one of the directors of the American Heart Association asked me to work with several of the local churches tied to their Healthy Heart Program. As a result, I conducted several well-received diabetes seminars with a number of churches, including Baptist, Pentecostal, Methodist, Seventh Day Adventist, and Christian. And, then, I was accidentally invited to a health fair held by the local Hindu temple, where I met some wonderful doctors and other healthcare professionals. I truly been blessed to have met so many wonderful people I never had met if I had not been a diabetic.

But, because this was beginning to take up too much of my time, I created a document of all the information and had copies printed for the churches and wellness groups. This allowed me to return to my normal life as a diabetic. But, the document led to more questions that caused me to add more pages to the document. Then, the document became too expensive to continue to have copies printed. So I finally relented to write a book that would provide all the detail that wasn't in the document and would answer all the questions that I normally discussed during my presentations. Now that the book is completed, everyone will have the necessary information that's been missing and my life will finally return to normal.



Update by the Author

I am developing new products (e.g. cookbook, audio CD book, wellness journal) and partnering with a health services company (Parwel) to provide diabetes education/coaching services to corporations, organizations and individuals. Go to www.deathtodiabetes.com for a list of new products and services.