The Heart of a Woman is a gripping memoir of survival and perseverance after a "widow maker" heart attack and cardiac arrest. All women need to learn how dangerous stress is to their heart health. Heart attack survivors will be inspired to regain their health by increasing their perseverance.

The Heart of a Woman: How I Survived Cardiac Arrest and Got My Life Back

By Carole Werry

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THE HEART OF A WOMAN

How I Survived Cardiac Arrest and Got My Life Back

The Heart of a Woman is an inspiration to all women to keep or regain their heart health and to live a healthy, happy life.

CAROLE WERRY
This book details the author's personal experiences with and opinions about Heart Disease. The author is not a healthcare provider.

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I floated to the surface of wakefulness, opened my eyes in the gray dawn. I felt apprehensive. I hungered for air. I was pulling in breath but there was no life in it. Like trying to drink from an empty glass, my breathing still left me thirsty for oxygen. My chest felt constricted, like a leather strap was buckled tightly around it. I knew I needed to get help before losing consciousness. I must stay calm and call 911. No, first I made my way into the living room and unlocked the front door.

“911 operator.”

“Ma’am, I just woke up and I can hardly breathe. There’s no one here with me—I live alone. My chest feels like there is a crushing weight on it, or a band around it squeezing me. I think
I am having a heart attack. Please send an ambulance right away…please, please hurry. I feel like I am going to die. I don’t want to die!”

“Ma’am, we are going to take care of you. Please give me your name and address so I can tell the ambulance where to come. I will stay on the line with you until the ambulance arrives.” I gave her the information.

“Carole, the ambulance is on the way. Now, I need to ask you some questions. How old are you?”

“I’m seventy years old.”

“Have you ever had heart problems or a heart attack before? Do you have pain in your chest now?”

“No, I’ve never had any problems with my heart. I don’t feel pain exactly, just this awful crushing weight, like something heavy is on top of me, squeezing the breath out of me. I’ve never felt like this before.”

“Ma’am, is your door unlocked so the EMS personnel can come inside your house when they arrive?”

“Yes, I unlocked the door just before I called you. I’m scared I might pass out. It is getting harder and harder to breathe…there is so much pressure on my chest. Will they be here soon? I’m so scared. I don’t want to die.”
I went back into the bedroom. I kept the phone with me but put it down briefly while I pulled on a pair of sweats; I was having cold chills. Going into the bathroom to brush my teeth before they arrived, I felt a need to protect myself, so I walked hunched over, in case I passed out. I felt lightheaded.

While brushing my teeth, I found myself thinking about my life. For thirty-eight years I devoted my life to a husband and three children. My husband is gone; he finally fulfilled his threat and got a divorce. My children are all married. I have just begun to live a life of my own. But now I am having a heart attack instead. I can’t believe this is happening.

Lying on the bed waiting for the ambulance, I tried to imagine what lay ahead. It could be a small heart attack, with a small procedure, or even just controlled with medications. Or it could be a complicated open heart surgery with a long, hard recovery. Or I could die on the operating table, or I could die afterward. I might recover quickly and be as healthy as I was, or I could wind up being an invalid. Once again, my life was twisting out of my control, and then, I wondered, had I ever controlled it?

The voice on the phone pulled me back. “Ma’am, I’m still here with you. The ambulance will be there momentarily.”
“Oh, I can hear the siren—they are almost here. Please stay on the phone till they get inside.” It had taken them four minutes to get there. My eyes were locked on my phone clock.

“Carole, they are coming in the front door. I will sign off now. Good luck.”

***

The EMS attendants banged on the door, simultaneously opened it, and yelled for my location. “I’m in the bedroom, to the right,” I called.

While I was lying on the bed, one of the attendants began taking my vital signs while the other started asking me questions. “Have you ever had a heart attack or do you have a history of heart problems?”

“No, nothing. I’ve always been healthy.”

The second attendant said, “Your BP is normal. All your vital signs are normal. Ma’am, you are just having a panic attack. I’m telling you, you don’t need to go to the ER. You just need to calm down.” His voice was dismissive, like he was wasting his time with me.

“I know I’m having a heart attack. People have heart attacks without elevated BP—you must know that. I’m a medical
assistant and I know it. And if you don’t put me in that ambulance right now, I really will have a panic attack!”

Simultaneously, a fire department ambulance arrived with a pair of paramedics. The paramedics stepped in front of the men from the first ambulance. They took command of the situation and seemed to fill my small living room. The stocky paramedic put me on the stretcher and took my vital signs all over again. The tall paramedic asked a new question. He asked me a question that doctors are less apt to ask women, and yet it is a proven link to being a high risk for heart disease: “Ma’am, have you had recent stress?”

“I’ve had stress for thirty-eight years. I took care of my husband who had PTSD since Viet Nam. But I got rid of the stress…”

“How so?”

“He left me.” A chorus of male laughter followed.

I had made a bad joke of a serious situation. I unquestionably knew the huge level of stress I had experienced for so many years. I knew stress could be a factor in heart disease, but I did not know how much of an effect it could have. The tall paramedic then asked the single most significant question since the arrival of this entire procession of men:
“Ma’am, have you done any strenuous activity in the past twenty-four hours that left you breathless?”

Suddenly, I remembered. “Oh my god, yes! Yesterday afternoon, I was riding a stationary bike during a physical therapy session for the arthritis in my hips. Normally, I ride for fifteen minutes without even breathing hard. Yesterday, after only two minutes of riding, I staggered off the bike, bent double. I could not catch my breath and sank to the floor. The physical therapist took my blood pressure; he said it was in the normal range, that I was fine. Just to go home and rest.”

The tall paramedic said, “Ma’am, we need to get you to the ER and have the doctors check you out. There is definitely something wrong going on.”

***

During the ambulance ride to the hospital I thought about being breathless during strenuous activity. That was a red flag to the paramedic. I was not having a panic attack. I was not wasting everyone’s time or making a fool of myself. No. I had read so many warnings about women often having heart attacks with vague symptoms and were reluctant to go to the ER. I did the right thing by calling 911, and the paramedics were doing the right thing by taking me to the ER.
The ambulance arrived at the hospital. My primary care physician, Dr. Sheryl Okuhara, was in the ER at the time and told the attending physician that I had always been in very good health and never had any heart issues. She then called her husband, who was a cardiologist in the same medical center, and asked him to come examine me. By the time Dr. Jason Okuhara arrived, an ECG and blood labs had been done and the results were waiting for the cardiologist.

“Hello, Carole, I’m Dr. Okuhara.” There stood a small Japanese-American cardiologist, with thick black hair and dark brown eyes, smiling warmly, exuding love and expertise. I felt that warmth and trusted him right away.

“Carole, I’ve got the results of your labs and ECG and I see some things I don’t like. We need to do a heart catheterization in order to diagnose exactly what is wrong with your heart so we can plan how to fix it.”

“Dr. Okuhara, can’t you do something else to find out? I am so scared of having a heart cath. I’ve heard people can die from having a cath. I don’t want to have it done.” I was shaking, from
I trusted Dr. Okuhara, but I had a bad feeling about this.

All three of my children were at the hospital now. Tall, willowy, green-eyed Tiffany, her long blonde hair in a chignon, a dentist with years of medical experience, and Steve, a broad-shouldered, tan, athletic police officer, well acquainted with medical emergencies, arrived first. Now Laura, a dynamic attorney, long brunette hair flying, high heels clicking, rushed in from driving across the state to Bradenton, Florida.

Tiffany and Steve had been trying to convince me to sign the heart catheterization consent form without success. “Laura, Mom won’t sign the consent form for the heart cath…she’s scared she is going to die,” Steve related. Tiffany and Steve told Laura how uncooperative I was being. Obviously, people who are scared and very ill don’t always use the best judgment.

Laura kissed me hello, stepped back, just stared at me, then in her assertive voice said, “Mom, if you do, you could die; if you don’t, you will die. This is easy...sign the form...now!” I signed the form. I was outnumbered. They were all probably right; everything would be fine and the cardiologist needed to see exactly what was happening to my heart. The nurses wheeled me away on the gurney into the Cath Lab.
Minutes seemed like hours. I was freezing and scared out of my mind. I still didn’t want the cath done, but I wanted them to hurry up and get it over with. I was confused. Petrified, I squeezed my eyes to shut out this achingly icy bright Cath Lab. I heard myself saying over and over to the nurses, “Please hurry, please hurry.” All I could think was: I am not in control of what is happening to me this time either. Only Dr. Okuhara and the mercy of God are going to save me.
The lights were lowered in the halls around nine each evening after visiting hours were over. The facility was quiet; patients were watching TV or sleeping. With the Heart Wing doors closed in the evenings, and the lights dimmed, I thought I might get away with walking in the hall. The first night that I decided to walk alone, I thought the nurses would probably tell me to go back to my room, but I thought it was worth a try. I waited until the lights dimmed, then opened my room door just a crack to see if the nurse was at her desk stationed at the end of the hall. She was there, but she was reading some charts. There was also an RN with a meds cart making her way around the wing dispensing the evening meds. Quietly, I opened the door wider and stepped out in my walker and stopped. I waited a moment…neither nurse looked up. So, with eyes straight ahead, I began to walk the hall alone, being careful to stay close to the wall railing in case I needed to grab it for additional balance. I
walked slowly and steadily. The nurses were now watching me like a pair of hawks, but they did not say a word. I must have shown them I was capable and cautious. I made one lap and went back to my room. The next night and every night thereafter, I walked more and more laps without any comment or interference from the nurses. The day shift nurses must have heard what I was doing, because I started walking around without an attendant during the day, and I was not stopped. Pretty soon there was a change of orders from the attending physician saying that I could walk around anytime without an attendant.

I had the freedom to go to the ice cream parlor by myself. I really looked forward to that. Patients were only allowed one trip to the ice cream parlor a day. When getting my frozen yogurt, I asked, “May I have one frozen yogurt to eat while sitting here and then get another one to take back to my room?” The attendant said I could. This was great news; I loved frozen yogurt. I had dropped much weight since my surgery and was looking pretty thin. I looked forward to walking to the ice cream parlor, and I grew to like taking many short walks at all times of the day and evening. It wasn’t all fun—it was still painful and exhausting—but each day I felt a little less tired and a bit
stronger. Making my walks fun and interesting helped me stay positive and keep going.

***

My workouts in PT were gradually getting more intense. They added walks in the Alter-G Anti-Gravity Treadmill, which was developed by NASA and uses NASA Differential Air Pressure (DAP).

“We are very proud of this treadmill, Carole,” the therapist explained while helping me into the special pants. “It enables patients to walk carrying less weight, and it helps them increase their balance and confidence—and build muscles. You put on the special pants over your own yoga pants before getting on the Alter-G Treadmill. The pants are then hooked up to the treadmill and inflated, which takes the weight off your legs so you can walk farther and faster. The weight and the time on the machine are gradually increased.”

Before I was first put in the anti-gravity pants and got on the treadmill, I thought it would be a very easy way to walk. Envisioning a moon walk, I was anxious to try the Alter-G, thinking it would eliminate all the pain in my hips. The pain was reduced a little, but the treadmill was going so fast that I struggled to keep up.
“How is this speed for you, Carole?” the therapist asked the first time I got on.

“It’s pretty fast,” I said. “But let me try to keep going at this speed and I’ll let you know if I need it slowed down.” After a minute or two, I had to ask for the speed to be slowed down and it was kept at that speed for the rest of the session. But each day I tried to walk faster and faster and gradually managed to increase my speed quite a bit. That was the point; to push me further down the road to recovery.

My chest incision, sternum bone, and ribs hurt terribly while I was doing the gym mat exercises. As the number of repetitions were steadily increased, I reached for more perseverance. I worked as hard as I could, but I admit, there were many times I dreaded going to PT and going through the exhausting exercises.

There were about a dozen patients in the gym every hour of the morning and afternoon sessions. I could see some of them were trying hard to increase their strength and endurance, but many of them were hardly moving, as though they were afraid they would feel a twinge of pain. In addition to doing the exercises, patients needed to take walks several times each day.
Some patients were recovering from heart attacks or strokes; others were recovering from knee or hip replacements. Perhaps the recovery process was more difficult for the heart attack and stroke victims, and people who had been in bad accidents, because they had more serious health issues than patients who were in good health and had elective knee or hip replacement surgery.

The longer a patient goes without making progress, the longer it will take to get well, if ever. I had to keep improving every day, so I could go home soon.

Jenny walked with me back to my room as we talked. I said, “Sometimes I just want to stop, to give up because it is so painful. Before I had the heart attack I was trying to talk myself into having my hips replaced with titanium implants, but I kept putting it off because I was so scared of the surgery. Just the thought of a surgeon cutting my femurs in half and cutting off the joint socket and replacing it with metal was just horrifying.”

“Carole,” Jenny said, “I know this is really tough on you. All the therapists know. We all watch you working so hard, and we can see the pain on your face. We admire your hard work.”

“Thanks,” I said. “It is just perseverance that keeps me going. I’ve been through a lot of operations in my life, and a lot
of stress from family issues. I just learned to keep going, to persevere and to never stop.”
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