

Cancer on my Mind is atypical among non-fiction brain tumor survivor books because it is narrated by a talking tumor that the author battles for his survival. His book provides insight into what a cancer patient deals with mentally and physically to survive a brain tumor. The tumor dialogue is outrageously funny, bringing humor to a life-and-death struggle that has touched the lives of many Americans.

Cancer on my Mind

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"A very compelling and creative narrative of a young man's battle with a brain tumor...told through a brilliant mixture of his subconscious battling his talking tumor. In this case, good (the author) triumphs over evil (tumor)."

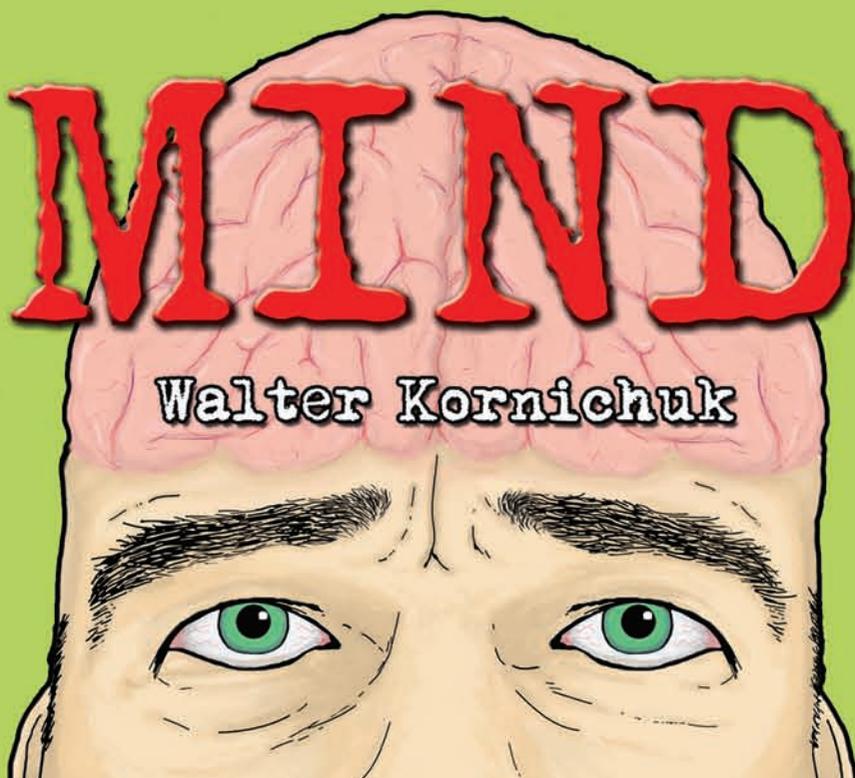
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CANCER

on
my

MIND

Walter Kornichuk



Early praise for *Cancer on my Mind*:

“*Cancer on my Mind* is an original narrative of a brain tumor patient’s thrilling journey of survival or death....The talking tumor narrative is an ingenious perspective, and allows the reader and cancer patients into the evil psyche of cancer, the potential heartless messenger of death.”

David Larson, M.D, Ph.D., F.A.C.R., F.A.S.T.R.O., Professor Emeritus, Departments of Radiation Oncology and Neurological Surgery, University of California, San Francisco; Co-director, Gamma Knife Program, Washington Hospital Healthcare System

“In brutally honest fashion, the author recounts his 10-year fight with a malignant brain tumor. Although largely invisible to others, the ever-present enemy lurks in our protagonist’s mind, allowing for at best, a string of uneasy victories...the author’s tale of struggle has much to teach all of us, both physician and patient.”

John R. Adler, Jr., MD, Dorothy and Thye King Chan Professor of Neurosurgery, Vice Chair, Innovation & Technology in the Department of Neurosurgery, Stanford University

“Ultimately, his story is a tale of personal discipline and what it can accomplish in the face of adversity....Walter's voice is answering his tumor and is loud and clear. It is a clarion call for physicians to never remove hope from that conversation.”

Steven R. Isaacson, MD, FACS, Clinical Professor of Radiation Oncology (in Neurological Surgery), Columbia University College of Physicians & Surgeons

“...both heartwarming and tragic...Like Johnny Gunther in *Death Be Not Proud*, we are led through an amazing journey of courage and love of life.”

Mark K. Lyons, MD, Associate Professor & Chair, Department of Neurological Surgery, Mayo Clinic, Arizona

“This is a non-fictional down to earth book from the initial presentation (seizure at a rock concert), diagnosis at the emergency room, awake surgery, and treatment with chemotherapy and radiation therapy for a malignant tumor....His courage is evident in the book and encourages all who are diagnosed with a brain tumor. This is must read for all.”

George Jallo, MD, Professor of Neurological Surgery, Pediatrics and Oncology, Clinical Director, Pediatric Neurosurgery, Director, Neurosurgery Residency Program, Johns Hopkins University

“Provocative and not for the faint of heart, this is a gripping examination into the psyche of a willful mind that triumphs over the persona of the demon tumor that is trying to kill him. An insightful and inspirational read for anyone facing discouragement and for everyone who has ever been touched by cancer.”

John R. Henley, Ph.D. Assistant Professor of Neurosurgery and Physiology, College of Medicine; Director, Laboratory of Developmental & Regenerative Neurobiology, Mayo Clinic, Rochester, MN

“Illuminating view into the trials and tribulations of Walter’s battle for survival in the face of a horrible disease.”

Charles S. Cobbs, MD, Associate Clinical Professor, Neurological Surgery, University of California, San Francisco

“His determination and perseverance to overcome fear of death and the appalling side effects of his therapy are truly inspirational...an exceptionally engaging book that puts the real life experience of fighting cancer into a clear technical and personal perspective.”

Frank McCormick, PhD, FRS, Director, Helen Diller Family Comprehensive Cancer Center; Associate Dean, School of Medicine, University of California, San Francisco

"This is a superb body of work and makes for fascinating reading. It comes from someone who has been there and understands what it takes to get through the process. I strongly recommend everyone involved with this problem to read this book."

Mitchel S. Berger, MD, Professor and Chairman, Department of Neurological Surgery; Kathleen M. Plant Distinguished Professor; Director, Brain Tumor Surgery Program; Director, Neurosurgical Research Centers & Brain Tumor Research Center, University of California, San Francisco

"For those of us in the medical field it is important to realize that not all tumors follow the same path and that there is hope for patients that they will achieve an enduring period of tumor control."

Michael W. McDermott, MD, Professor in Residence of Neurological Surgery, Halperin Endowed Chair, Neurosurgical Director, Gamma Knife® Radiosurgery Program, Vice Chairman, Department of Neurological Surgery, University of California, San Francisco

“...what shines through most, is his determination and positive fighter attitude which is no less a weapon than surgery or radiochemotherapy in his fight against cancer. The book is not only an inspirational read for patients diagnosed with brain cancer but also a valuable source for professionals treating such patients...”

Keyoumars Ashkan, BA, BSc, MB, Bch, MRCP, FRCS, FRCPS, FRCS (SN), MD. Consultant, Neurosurgeon & Senior Lecturer, Clinical Lead for Neuro-oncology, Department of Neurosurgery, Kings College Hospital, London

“His battle is greater than medicine can win alone, and his positive attitude and his willingness to brave aggressive treatment results in victory....His story is an inspiration and provides the greatest tool in the battle of this fatal disease, hope.”

Sandeep Kunwar, MD, Associate Clinical Professor of Neurological Surgery, and Surgical Director, California Center for Pituitary Disorders at University of California, San Francisco. Medical director for Taylor McAdam Bell Neuroscience Institute programs at Washington Hospital Healthcare System

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TABLE OF CONTENTS

Chapter 1: Problems	1
Graduation. May 29, 2000, 1:30 p.m.	1
Steely Dan Concert. June 17, 2000, 7:30 p.m.	1
El Rancho Hospital	3
Chapter 2: Diagnosis, Brain Tumor	7
You Must Be Joking?.....	12
Turning Down a Great Job.....	14
Meeting Doctor Sabarish	15
Sticking Things to my Head.....	17
How I Survived in the Tube.....	18
The Night before Brain Surgery.....	20
Chapter 3: Brain Surgery	23
After Brain Surgery	35
Recovering	36
Chapter 4: It's All Up to Me	39
Young Death	39
The Day after Surgery.....	40
Good Friends Hospital	44
An Early Morning	45
Ed's Visit.....	46
1999 Tour de France Flashback	47
Chapter 5: Prove It or Lose It	50
Bruised	50
A Visit from My Family and a Stranger	53
A Visit from Hector	57
Chapter 6: Learning to Fly	59
Unplugged.....	59
Pulled, Pushed, and Exposed	61

WALTER KORNICHUK

Removing the Bandage.....	68
Chapter 7: Getting My Strength Back.....	71
War.....	71
Recovering at Mom’s House	73
Saturday Night	74
Challenged	75
Your Illness is Stressing Me Out	78
A Free Freak Show	79
Chapter 8: Support, Greed and Radiation.....	80
Facing My Fears	80
My Brain Tumor Support Group	83
Doctor Sabarish’s Notes	84
Just Happy to be Alive.....	85
Asking a Favor.....	86
Luis’s Electronic Mail Message.....	87
Doctor Ericson’s Radiation Appointment.....	87
Radiation Follow-Up Appointment	90
Chapter 9: Chemotherapy	91
Chemotherapy Thoughts.....	94
Infusion, Round One.....	95
Meeting with Doctor Goldberg.....	97
Chemotherapy Nurses Are Saints	98
Scared.....	99
Taxi! Taxi!	102
The Chemotherapy Experience.....	106
The Only Angel on Earth.....	108
I Will Never Give Up.....	108
Ready to Work	109
Just Another MRI Scan.....	110
Meeting Doctor Parker.....	112
Why Bother Getting a Haircut?	113
Chemotherapy Rounds Four, Five, and Six	115

CANCER ON MY MIND

My Fourth Chemotherapy Infusion.....	115
The Journey Home	116
Dead But Not Forgotten.....	119
Puking	121
Fatigue.....	122
A Chat with Doctor Goldberg.....	122
Working Full Time.....	124
Sleeping.....	125
More Chemotherapy Thoughts	126
Success	127
Chapter 10: Dodging the Bullet	130
Post-Chemotherapy Thoughts.....	130
Chapter 11: Twenty-Seven Months Later	133
Chapter 12: Four Years Down.....	136
My Life after a Brain Tumor.....	136
Chapter 13: How I Became a Steely Dan Fan	138
<i>Do It Again</i> , July 25, 2006, 8 p.m.	139

Chapter 3: Brain Surgery

I woke up at 5:15 a.m. and took a few pills for anti-inflammation, seizure prevention, and to curb anxiety. I was starving. “A stiff cup of Joe and an almond croissant would be nice,” I thought. But my stomach had to be completely empty to monitor my fluid and medication levels during surgery.

“Come on. Eat something and screw up the surgery. Reschedule the surgery. Piss off Doctor Sabarish. Have another seizure!”

I walked through the entrance of Good Friends Hospital at 6 a.m., heard a few voices down the hall and saw a sign that read, UNIVERSITY HOSPITAL SURGICAL WAITING ROOM, ROOM-104J.

Yes, this was the right place to be this morning.

“Yes, sir, this is my favorite place to be and your invisible purgatory. This is the room you wait in before you die. The light blue is a little too cheerful, but at least it’s cold in here, just like a living morgue, nice and cozy.”

The signing of the *Durable Power of Attorney for Health Care* yesterday did not affect me until I sat in the University Hospital Pre-Surgery Waiting Room at 6:00 a.m. Legally, at 8:30 a.m., my life would be in the hands of my Mom and my good friend, Jeff.

Everyone in this room was in the same situation, but some of us were handling it better than others. A few stared at the walls, still in shock from their initial diagnoses. Others buried their faces in magazines and newspapers and acted as if they were reading. They were probably trying to shield themselves from their current reality, surgery and recovery, or worse.

I sat alone, watching a few tribes of supportive patients and loved ones chat in low tones. The air was cold and tense. I wondered if anyone else felt like this was purgatory.

WALTER KORNICHUK

I wanted to tell a joke to liven up the low-key Surgical Waiting Room. A joke that most people in the room could relate to and get a good knee-slapping laugh.

“Knock, knock?” I ask.

“Who’s there?” the patient replies.

“Please resuscitate?” I reply.

“Please resuscitate, who?” the patient replies.

I don’t answer.

I can’t reply because I’m floating around in “code blue limbo land,” straddling the fence between life and death.

I’m waiting to be resuscitated. It’s a twisted and sick joke, but this is how I feel before getting my head carved open like a ripe avocado, primed for slicing and cancer cell dicing.

“He should be peeing his pants and he’s doing stand-up comedy instead. He’s got nerves of steel, instead of buns of steel, and that joke is funny.”

The telephone rang a few times. A woman answered the call and said, “Yes, right away.” She walked up to me, clutching a clipboard.

“We just got the call from the operating room. Let’s give them hell in surgery! Don’t stop dividing. Spread out to make it harder for Doctor Sabarish to cut us out!”

“Walter?”

“Yes, that’s me.”

Was someone staring at me? I looked at the room entrance and saw a man dressed in green hospital scrubs, a lanyard hanging from his neck, attached to a University Hospital badge. He stood behind a dark blue wheelchair.

“Are you ready to go for a ride?”

“Yes.”

This was my first ride in a wheelchair. I wasn’t doing the pushing and I hated not being able to control my own

CANCER ON MY MIND

movements. I was irritable without a strong cup of coffee in the morning.

“There we go. Get pissed off and lose your focus.”

My attendant wheeled me out of the Surgical Waiting Room. The halls were empty. I absorbed the calm in the hallways before the waves of hospital staff, patients and students arrived. I crawled into my mind, searched for my calm inner self, and put on my take-no-prisoners game face.

My stomach felt unsettled and nervous about my surgery, even after taking an anti-anxiety pill an hour ago. My face turned white, like I was having an anxiety attack. I took a few deep breaths and tried to replace paranoia with serenity.

“Now we’re talking, let’s have an all out crying mental breakdown party! He’s all dressed up with no place to go, but let’s freak out to capture the real moment. Burn in hell! Burn in hell!”

I told myself, “Stop thinking so much, it’s not brain surgery. Holy crap! It is brain surgery!”

I was wheeled into a room full of hospital gurneys, where a nurse said, “Good morning. Are you Walter?”

“Yes. It is a beautiful day for brain surgery.”

“No, it’s a bad day in the neighborhood. Cut the cheerful crap, Cupcake.”

“I’ll give you some scrubs to change into and put in a few IV lines.”

I changed into a baggy light blue surgical shirt and pants, lay down on a hospital gurney, and listened to the hum of the fluorescent lights. The nurse put in two lines in my right arm and one line in my left arm.

“Walter?”

“Yes?”

A man in light green scrubs, a surgical cap and booties stood in the doorway.

WALTER KORNICHUK

“The OR is calling for you. I’m Steve and I’ll be your gurney driver this morning.”

“Cool. I got a little nap before the big show.”

“Too bad you didn’t fall off the dream ledge, and into a frickin’ coma.”

Air currents passed over my cheeks as I was pushed through a maze of hallways. I saw the same four-foot fluorescent light tubes on the ceiling for thirty seconds. I looked up and saw my OR gurney driver’s neck and jaw, hairy nostrils, the bottom of his white forearms, and his head bobbing up and down.

The gurney stopped. My transporter peeked through a square glass window. His head nodded up and down.

“Here we are, OR seven. Good luck partner. May the force be with you.”

The gurney passed through the wide double doors and into a large operating room. The room is filled with stacks of light blue towels, high speed drills and manual saws. X-ray light boxes line the walls. Computer monitors, and elevated towel lined silver trays, full of multiple rows of oddly shaped, shiny tools wait nearby.

“Finally, we enter the arena of Death. Just relax, boys. They think they have us cornered with our backs against the wall. Stand down troops. Doctor Sabarish will mow some of us down far from the front lines of the nerve strip with his scalpel, but a few billion of us will survive to continue to mutate, forcing another surgery and imminent death.”

The confident hum and shuffling of the surgical operating team filled the room. Dizzy Gillespie bopped from a corner of the room. My gurney moved silently under the biggest light bulbs I had ever seen. Fingertips touched my left shoulder and a female nurse’s face moved toward me.

CANCER ON MY MIND

“Welcome to my den of death. She is not your friend. She works for me. My victory will be your sudden, painful death.”

“Good morning, Walter. How are you doing?”

“I’m a little nervous.”

“Everything will be fine. Doctor Sabarish will be in soon to start the operation.”

I’ll be on auto-pilot during surgery with twelve drugs controlling all my bodily functions. I’ll float on a bed of drugs, while strangers control my emotions and movements.

“I’m putting my money on the toxic cauldron of drugs to trigger an allergic reaction, spike his blood pressure, and flat line his overconfident psyche.”

I tried to relax my mind and body and prepare for brain surgery. How can I relax lying on a gurney in an operating room? I couldn’t strike up a conversation with anyone to see if the Giants won last night. Everyone else was focused on cutting the tumor out of my head.

Visualize? I found my Happy Place in my mind, but this time I had to locate it outside of an MRI tube.

I heard violins. Is Mozart the soundtrack in heaven? No, it’s classical music playing from inside the operating room.

“What the hell is going on here? We’re not out with the high brows, sipping champagne in tuxedos and strapless gowns at the symphony.”

I lay on my back and caught my first glimpse of my surgical magician, Doctor Sabarish. He was dressed in a light blue ensemble, beanie, surgical mask, rubber gloves and a gown. A pair of surgical microscope lenses rested on his brow.

His eyes were focused and calm.

“Hi Doctor Sabarish. I was wondering if you got my e-mail message wishing you good luck on my brain surgery.”

“Who in the hell does he think he is? He has only met him once and he’s chatting it up with Doctor Sabarish like they’re

WALTER KORNICHUK

golfing buddies. Keep your trap shut and concentrate on a botched surgery."

"Yes, I did. Thank you for wishing me good luck."

He nodded at the army of operating room doctors and nurses.

"Now we're talking. Let the games begin. Hey, batter, batter. Let him know that we are playing for The Prize. Aim for his head."

A masked surgical nurse entered my view.

"Walter, we are going to wash the surgical area with soap and place your head in a three-point surgical head clamp to keep it still during surgery."

My head was turned to the left, exposing the right side of my skull, and I heard three pins turn, one on my forehead and two on the back of my head.

I sensed the beginning of surgery and tried to calm down my emotions and thoughts of the unknown. I heard the beeps of my heart monitor and caught a few strong nostrils full of rubbing alcohol.

With my head in a three-point surgical clamp, I thought to myself, "Here we go, Walter. Let's live for the moment and do our best. If John and my Dad were here, they would have told me, 'Live for the moment, kid.'"

"Inspiration? Where did he get this motivation? Could it be from the souls of the dead high-fiving him and cheering him on?"

Since I lost my brother and dad, their spirits were always living in my thoughts. I felt my spiritual cheering section in the operating room, empowering me to fight hard for my life and their unaccomplished hopes and dreams. It sounded kooky, lying on the operating table thinking about dead people, but thinking about them gave me an immense will to survive.

CANCER ON MY MIND

I focused on my brain surgery one minute at a time and fought with the most powerful resource I possessed, my mind.

“Who in the hell do you think you are! Don’t pull that Birkenstock wearing, patchouli smelling, crystal necklace attitude with me. This is brain surgery. You’re in my house, and I am the master!”

Surgical towels were draped on my head to build a five-by-seven-inch window for the anesthesiologist to monitor my eyes and face, and verbally relay the success of the motor mapping to Doctor Sabarish. This was my window to the brave new world of brain surgery.

“My genius world of death...silence...VICTORY!”

“Walter, you will feel a little pain now on your scalp. We’re going to be poking a few needles in to inject some pain killers and medicines into the surgical area. These drugs will make you feel more comfortable during the surgery.”

My scalp numbed up in a few seconds.

“Walter, we are going to give you a mild anesthetic to put you under for a few moments. Would you please count backwards from 100 to 99?”

“98...97...Seizure...Cardiac Arrest...Flat line!”

I heard faint noises. My blurred vision sharpened to see the blue towels around my head. I was frightened that I would not wake up from the anesthesia and would, instead, float right into a coma. I wanted to celebrate my consciousness by yelling to the surgical team, “I made it, I’m not dead!” But there was no time to celebrate since brain surgery was still the task on our agenda today.

I saw my anesthesiologist’s brown eyes, light blue surgical cap and mask through my surgical window. I was happy to survive my first surgical encounter with anesthesia and wanted to cry with joy.

WALTER KORNICHUK

Doctor Sabarish spoke: “Walter, I’m going to start cutting your scalp with a scalpel that will cauterize and seal up the cut. The first cut will start from the top of your head down, and stop above your right eyebrow. The second cut will be from the top of your head and end an inch above your right ear.”

I didn’t feel a scalpel cut my scalp, but smelled chicken skin burning on a barbecue grill. My head buzzed and shook. I clamped my jaw down and heard my molars click.

“Now, we’re talking. Let’s see his blood pressure peak and give him an anxiety attack.”

My face flashed hot and cold. A tear dripped from my right eye and onto my nose.

“Cry, cry, you little baby. That’s all you can do is cry.”

“Are you all right?” said the anesthesiologist.

“Yeah. Just freaking out a little.”

“They are almost done. You are doing great.”

The buzzing stopped. My right ear was pulled down toward my jaw.

The buzzing started again. I smelled steak searing on a barbecue grill and burnt hair for ten seconds.

“Um, yummy, the barbecue smells of death.”

“We’re all done, Walter. Good job.”

I heard a ripping sound as my scalp was tugged away from my skull.

“Walter, we’re going to drill four holes in your skull. OK. Ready?”

“Yes.”

“Here we go.”

“Don’t miss your target and poke his eye out.”

A motorized hum filled my ears. A cool breeze hit my right cheek. I anticipated the drill bit ripping into my skull. A few seconds passed and nothing happened.

CANCER ON MY MIND

My skull, eyes, teeth, and tongue vibrated. My head shook like a blender crushing ice, and blending tequila, triple sec, and lime juice.

“Could we get a little more shaking and make him cry again? That was kind of fun. Pain is great, but fear is better.”

I breathed in a nose full of burning skull.

The drilling stopped.

I heard classical music.

“Cut the mellow and soothing crap and let’s listen to some Blue Oyster Cult. ‘Don’t Fear the Reaper!’ I need more electric guitar and cowbell. Cut the violins out. Crank it up, dude!”

My right ear was bent back against my ear lobe. My head vibrated sadistically during the reaming of the second, third, and fourth holes.

My nostrils were filled with a column of smoke coming off my freshly drilled skull. The smoke intake lasted for ten seconds.

My head stopped vibrating. A few machines hummed, a fan motor whirred, my EKG monitor beeped a rhythmic sequence, and a telephone rang in a low tone. A light wind blew over my sweaty head.

“How are you doing, Walter?”

“OK.”

“Damn! He’s steady as a rock. After the cutting, drilling, and breathing, his blood pressure is stable. He’s in the zone. I’m praying for a power outage.”

“Walter, I’m going to use a hand saw to cut the bone between the four drilled holes.”

I felt the short and quick up and down strokes of a thin saw blade. I heard a hollow metallic sound as the saw blade crimped the thin skull bone between the four drilled holes.

“All done, Walter, the sawing is over. I’m going to cut the last layer of skin with a scalpel to expose the tumor.”

WALTER KORNICHUK

The circular patch of skin was lifted. Doctor Sabarish saw a thick, thin-red-veined tumor.

“Hey, you’re letting all the light in! Do you have a search warrant? This is breaking and entering! I’m gonna call the Dream Police.”

Doctor Sabarish applied electrical impulses (by saying “yes” for on and “no” for off) and the anesthesiologist visually and verbally confirmed physical movements (by saying “yes” to confirm movement or “no” to confirm lack of movement). Eleven individual motor nerve strip areas were identified near the cancer cells, “mapped out,” and marked with small numbered pieces of paper.

The motor strip areas were millimeters apart, and clearly labeled so that they could be avoided during surgery. If my arm or hand nerve was cut by accident, the nerve would not attach to a new nerve pathway; it would leave my arm paralyzed for the rest of my life.

“Maybe Sabarish will yawn, sneeze, and cut into a nerve. Seven hours is a long time to stay focused and error free.”

Am I trapped in my own horror movie? My head is in a three-point surgical head clamp and a neurosurgeon towers over me. Doctor Sabarish applied electrical impulses to nerves that moved my hand. Feeling it move without moving it myself was freaky. Two milliamps made me twitch and four milliamps make me kick like a mule. I had no time to raise the hair on the back of my neck.

“Ahhhhhhhhh! Now that really stings and burns. Nothing a little ice won’t fix.”

He mapped out my left bicep muscle and sliced two grey and white curved specimens.

“Run for your lives, here comes the knife of death! He won’t touch me. I’m too close to the motor nerve strip. He

CANCER ON MY MIND

mapped out his 'Don't Cut Zone,' marked it with paper numbers, and I'm right smack dab in the middle of it."

Doctor Sabarish stimulated complex brain function areas that controlled memory, perceptual awareness, thinking, language, and consciousness. The tumor specimens were frozen and sent to a pathologist for examination, and a preliminary determination of tumor type and grade. Doctor Sabarish would establish the rest of his surgical strategy from the results of the pathology report.

"Goodbye comrades. We will fight hard in your honor."

It was an awkward moment for me, lying on the operating table with my head in a three-point surgical head clamp, listening to classical music and waiting for the telephone to ring with good or bad news from the lab.

"This is so romantic. The violins and piano remind me of a medieval death march."

The telephone rang. A nurse put the receiver up to Doctor Sabarish's ear.

Did the rest of the operating room staff know what grade my tumor was?

I felt like the odd man out, but the surgery was being performed on my brain.

"You are the odd one and soon the dead one."

Doctor Sabarish's face didn't reveal an emotion. I saw a masked poker face above me.

"Walter, we're going to start mapping now. Let me know if you feel any unusual sensations in your left hand or if any of your fingers move."

"Get ready! Here comes the wake up call from hell!"

"Ok. I will."

Doctor Sabarish: "Let me know if there are any movements? On...off."

WALTER KORNICHUK

“Ahhhhhh...Ahhhhhh. The shock treatment is brutal. Am I in therapy? I can handle it, but can you please give me a little warning first?”

Walter Kornichuk: “No.”

Doctor Sabarish: “On...off.”

“Ahhhhhh...Ahhhhhh. Why all the pain? What have I done wrong?”

Anesthesiologist: “His index finger just moved.”

Walter Kornichuk: “I just moved my index finger.”

Doctor Sabarish: “Let’s try that spot again. On...off.”

“Ahhhhhh...Ahhhhhh, the pain and suffering of battle.”

Anesthesiologist: “Yes, his index finger moved again.”

Walter Kornichuk: “I feel a tingling in my index finger.”

“Man, this is trippy. No other human would agree to this. Most people would have jumped out of their three-point surgical head clamp and run home crying to their Mommies.”

Doctor Sabarish dictated in his surgical notes: “At this point, the adjacent brain tissue appears swollen, but not clearly infiltrated with tumor. Further resection was now carried out in two-millimeter slices below the tumor into the face region. The tumor was resected until a normal appearing white matter was reached. Mapping was performed with no elicitation of motor movement.”

“The adjacent brain tissue appeared swollen, but not clearly infiltrated with tumor. Doctor Sabarish, are you blind, even with your fancy microscopic lenses? We are here right in front of your eyes, but you can’t see us. Finish up your mapping, close up the skin and bone, and leave us alone.”

Doctor Sabarish dictated in his surgical notes: “Two millimeter slices of tumor were cut out and removed. Motor mapping continued between 12:30 p.m. and 1:45 p.m. Preparation for closing the surgical area of skull bone and outer skull skin began at 2:00 p.m. and ended at approximately 2:45

CANCER ON MY MIND

p.m. A six-inch circular bandage was placed over the surgical incision.”

“You can cut out a few billion of us, but we still have an invisible army of a billion cells to re-grow and invade sensitive areas around the motor nerve strip. Sometimes even you God-like brain surgeons can’t see the cancer cells.”

My head was released from the three-point head clamp and placed on the level gurney. A sharp pain attacked my neck.

It’s over. Not bad compared to what could have happened.

After Brain Surgery

My gurney was rolled out of Operating Room seven and into Post Anesthesia Care Unit (PACU), bed number 14. I arrived awake, but still spaced out from the surgical drugs. A PACU nurse recorded my post-operation status as “stable.”

“Hell, he’s not stable if we are still growing in his brain, is he?”

After a nap, my head felt heavy and lopsided. I tilted my head to the right and asked a nurse across the room, “How large is the bandage on my head?”

“It’s a circular bandage about eight inches long.”

I was fixed on the sounds, rather than the sights in the PACU, and pieced together random thoughts in my cloudy mind.

“Do you know what grade my tumor was? A number two, three, or four?”

“No, I don’t, but Doctor Sabarish will be visiting you in a few hours.”

“The bandage is there to remind you of how sick you are compared to the ready-for-burial patients in this pre-autopsy cancer cell called a hospital.”

“Walter...Walter.”

I felt something touch my left arm. I opened my eyes and saw Doctor Sabarish standing next to my bed.

“How are you feeling, Walter?”

“A little groggy.”

“You did excellent in surgery. I called your Mom and told her the surgery went well. I want to see how your nerves are doing. Are you feeling well enough to move a little for me?”

“Sure Doc.”

I wiggled my toes and fingers, twitched my nose, stuck my tongue out, smiled and frowned. Doctor Sabarish lightly tickled the palm of my hands and the bottoms of my feet.

I closed my eyes, held my arms out to the side, and touched my right and left index finger tips to the end of my nose.

“Your nerves and coordination are fully intact. Excellent! I removed 99.9% of the tumor. The rest is up to you. Show me that you are healthy enough to be discharged, and I will get you out of here in a few days, on Saturday,” said Doctor Sabarish.

“Who in the hell does Doctor Sabarish think he is? Doctor Phil? He should just use a quote, like ‘Today is going to be a changing day in your life.’”

“I’ll see what I can do Doc.”

“Get some rest and I’ll see you soon. Good luck.”

Recovering

I was startled out of my drugged stupor at 2 a.m. by voices and relieved that the urgent medical attention wasn’t for me. This time it was not from a nurse asking me, “Do you have any pain? Would you like some morphine?” I heard a loud thump against the entrance doors of the PACU ward and rubber wheels squeaked on the waxed floor. A gurney rattled as it passed my bed.

I guessed the people on the far side of the PACU ward were doctors and nurses. They tested the neurological and motor

CANCER ON MY MIND

functions of a recently completed brain surgery patient. Like me, the new patient was asked to move his or her tongue, toes, arms, legs, fingers, hands, and eyes, and to smile and frown.

“I think this patient was a goner long before the surgery began. Hopefully, a paralyzed, whimpering mess. Let’s see who won?”

The neurological test results are detected instantly, in real time; there is no visual delay. If permanent paralysis has occurred to a hand, no movement will be seen. To the patient, however, it will feel as if he has moved his hand.

I wondered if most postoperative brain tumor patients immediately asked for the results of their neurological tests. Patients’ reactions range from euphoria to severe depression, and even contemplation of suicide. Maybe they were slightly sedated to lessen intense emotions that might result in injury to themselves or others. Paralysis is a life-changer for most patients.

“Just do the gimp a favor and ask an attendant to push him down a dark stairwell.”

After hearing the negative neurological test results for this patient, I felt sad for all those who would remain paralyzed. Lady Luck has been on my side for motor mapping and brain surgery. I am a firm believer in this phrase pertaining to my brain surgery, “it is not what you know, but who you know.” If Doctor Woo didn’t refer me to University Hospital, I don’t know if I would have received the care to survive a brain tumor and awake motor mapping surgery.

I felt happy, but I had a guilty hole in my gut, for not having lost any of my own physical and mental abilities.

I felt like the luckiest man in the world.

“You sound pretty cocky for only being out of brain surgery less than 24 hours.”

WALTER KORNICHUK

The surgery was a success for now. The daily functions I took for granted, walking and talking, could have been taken away from me for the rest of my life. I would have to wait for any signs of a loss of memory and thinking. I used all of the physical abilities, except for a slight droop on the left side of my mouth, which we hoped my body would repair in a few weeks.

“You are only one day out of brain surgery. I think he is overdoing his surgical celebration. The road to the cancer survivor podium and the elite remission trophy is full of thorns and landmines.”

After six hours of brain surgery, I felt lost and spaced out from the drugs I had taken in the last 24 hours. I was grateful to be alive. Physically, I wasn't feeling anything at all. Mentally, I was floating a few feet above my bed, high on morphine.

Cancer on my Mind is atypical among non-fiction brain tumor survivor books because it is narrated by a talking tumor that the author battles for his survival. His book provides insight into what a cancer patient deals with mentally and physically to survive a brain tumor. The tumor dialogue is outrageously funny, bringing humor to a life-and-death struggle that has touched the lives of many Americans.

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