

Dear Sylvia,

3/3/86

In the course of a conversation about other things a few minutes ago Ted your dollie mentioned having spoken to you & conveyed your good wishes. I asked him about your health & he said ~~if~~ you are ~~having~~ ~~trouble~~ having trouble with a ~~leg~~ leg. When he had trouble remembering what it is I asked him if it could be phlebitis. He said it is and that you have trouble walking. It happens that I am now sweating my out still another one (~~just~~ first 10/76) because of the surgeon's carelessness after successful prostate surgery 1/20/86. Thus I'm sitting and writing (if that's a proper description!) instead of typing because while I can get to my typewriter, that would have my severely damaged foot, leg & thigh against a cold, outside wall. (My office is small & ~~cramped~~ cramped.) Aside from wishing you well & offering hope - ~~is~~ justified by my ~~more~~ more than 10 years, with many ~~unrelated~~ unrelated & serious problems, I offer a few suggestions. And if you can't make this out, return it & I will type it.

I'm assuming that you have good doctors. But, sometimes the best don't take the time, can't always keep up to date, and rarely have to face their patients' problems.

There is a new & helpful drug, TRENTAL, used 10 years in Europe, approved here only 10/84. It enables the red cells to go through narrow passages better. I've been taking it that long & before this new trouble it increased my walking capability about 25%.

What I've learned is that the damaged leg must be kept elevated but that one should also move around a bit every 20 minutes or so. I have a stand wherever I sit that enables me to keep the legs horizontal, each with 6" of foam, and I can also get the left or more damaged leg high enough so the heel is higher than my heart without having to lie down. I can read this way, watch TV, converse, etc.

The idea is to have gravity help return circulation. Venous supports also helped. I wore ~~the~~ 50BST when not able to TEDs about. 50BST discarded after complications following arterial surgery 9/80. But once I learned how to cope & coexist with the

2) phlebitis, at almost 62, I was able to and did do / physically what would have taxed young men. But gradually, very gradually. Now that I'm not able it would be impossible to get strapping high-school boys to do it.

Coumadin, which can be dangerous, made it possible & I believe has kept me alive. I require a heavier than average dose and have been on it for 10 ~~year~~ years. It requires monitoring the prothrombin or ~~other~~ clotting time.

When I was first hospitalized I was in agony & could not use the leg at all. By then the main veins were shot. But I enlarged the small ones with physical activity, to the point where, without pain, I was walking up to 2 miles at a time & 9 miles a day.

Two serious and unusual complications after I got a Jefferson artery, left femoral, are much, much more limiting, but until I had this emergency surgery I went to a nearby shopping mall early every morning & spent 3 hours walking, resting with the leg up (I needed for that), walking again, etc. And held my own. The advantage of a mall, & I suppose there is more convenient for you) is that one can rest at a moment's notice, program the walking, and have no hills, unwanted stopping & no extremes of temperature. Since I've been doing it near here it has become ~~very~~ very popular for such uses and many other malls now participate in such programs with doctors.

My original doctor did not ~~just~~ prepare me for anything. Turned me loose with a word of advice, or caution, told me that 3 weeks after discharge I would go, almost from bed, to Vanderbilt Univ. to debate Donald Dehm. (I did him in to the point where two days later he came out for a new investigation!) I could ~~barely~~ barely walk when it was over & couldn't get that shoe on the next morning. Used bedroom slippers. The airlines clerk took one look at me, put me in a wheel chair even though a college boy was ~~with~~ with me, and on the plane they put the back of the seat in front of me down so I could ~~keep~~ keep that leg up & sat a Navy nurse next to me.

What made a major difference was the concern of a New York

3) friend who arranged a consultation with his arthrist, a fine  
human and a superb doctor. Robert Segal. He gave me much good  
advice & told me what I had not been told.

I don't know how frustrated any of this is for you, living in an  
apartment in a big city. You that I have been told I can walk again -  
& I can't yet drive - I walk in the house - up to more than 1000 feet  
at a time, and sometimes that is ~~too much~~ too much. So I do less.

So - learn, be patient, be diligent in any Therapy, and be  
hopeful,

all the best

Harry

Harold Weisberg  
7627 Old Receiver Rd  
Frederick, MD 21701