

# MEDICAL EMERGENCY IN THE CARIBBEAN

**Rosemary Brown**

*(John and Rosemary own Arctic Tern, a Rustler 36. They have sailed her extensively on the west coast of Scotland as well as to the Faroes, the Azores, to Morocco via Brittany, Portugal and Spain. From there they continued to Madeira, the Canaries and the Cape Verde islands before crossing the Atlantic to the Caribbean in 2014. Further voyaging was curtailed by the events described below.)*

We returned to Antigua and *Arctic Tern* just before Easter after a seven-week spell at home, intending to leave English Harbour for St Maarten the following day. We hadn't planned to stop at Jolly Harbour, but after a busy few weeks the prospect of the short trip to anchor for the night suddenly appealed. As things turned out, this was a providential decision.

On the approach to the Jolly Harbour anchorage, with the wind blowing a steady 30 knots, the engine throttle cable broke, forcing us to head towards the marina. With no escort boat available we crept along the channel at 2 knots and in poor visibility, with me at the helm and John below, operating the throttle by hand. Safely alongside an outside berth and with no possibility of getting hold of a replacement cable until after Easter, we settled down for a relaxing weekend. Luckily, there is a well-stocked Budget Marine chandlery at Jolly Harbour. On the evening of Easter Monday, planning to be up early to buy and fit a new cable and resume our interrupted passage to St Maarten, we were in bed, reading. However within minutes of dropping my book and starting to doze off, our world, and our plans, were thrown into chaos. "Rosemary – it's happened again ..." – I will never forget those words.

One morning three years earlier, while preparing to drive to rejoin *Arctic Tern* in Falmouth, John had experienced a sudden massive bleed from the bowel, with absolutely no prior symptoms. Following a couple of weeks in hospital in a high-dependency unit, several transfusions and a process called interventional radiology which succeeded in cauterising the leakage, his consultant had assured us that the likelihood of a reoccurrence was 'vanishingly small'. Furthermore, he gave his blessing to our long-distance sailing plans. We were euphoric.

Now here we were in Antigua and the unthinkable had just happened again. Head spinning, I found the emergency number (999) and got hold of the ambulance service. And then, having looked at our insurance documents, came a further bombshell – "I don't think I'm properly insured". Brushing this news and its implications aside, I pulled on some clothes and ran ashore through the silent and deserted marina buildings, hoping to intercept the ambulance and give directions to the boat. Behind a lit doorway I found one of the night security staff who called the ambulance service again. Within minutes two more security staff appeared and, as my agitation grew, their obvious concern and willingness to help gave me some momentary comfort. When the ambulance (in reality a van with rudimentary medical equipment) eventually arrived, John was stretchered ashore and before long we were being driven off into the Caribbean night, towards an unknown destination and a frighteningly uncertain future.

Half an hour later we arrived at the Mount St John's Medical Centre, but before John could receive any treatment I had to produce proof of insurance, and pay both the ambulance and a deposit of US \$1200. Fortunately the clerk sleepily accepted the proffered documentation without comment, although I knew that ultimately we would be faced with a rather large bill. At that moment, however, with John by now barely conscious and losing blood at an alarming rate, insurance – or rather lack of it – was the least of my worries.

The atmosphere in the busy emergency room was frantic and noisy. John lay waiting and ignored, shivering violently. Time seemed to slow down. After much cajoling and pleading by me, a blanket appeared. I later discovered that there was a severe shortage of many necessities, blankets included – and, as we were soon to learn, blood.

The duty surgeon, with no access to John's medical records and with no scans or X-rays, quickly concluded that his only option was to operate without further delay. At the same time, he made us aware that he was far from confident of a successful outcome ... and that there was also a chronic shortage of available blood. And so in the wee small hours, in a few surreal moments outside the operating theatre, John bade me goodbye. He seemed strangely calm; I was numb with disbelief and shock. But four-and-a-half tense hours later, the double doors leading to the theatre suite swung open and John was wheeled out, flanked by the surgeon and the anaesthetist, faces wreathed in smiles.

Later that morning, with John in intensive care, the surgeon told me that he had been given the last unit of blood on the island – but unbeknown to me, our family had already set the wheels in motion. In response to an urgent e-mail appeal for blood donations from our son Simon, initially to the Cruising Association and to Jenny Crickmore-Thompson of the OCC, messages were disseminated via social media, e-mail and the OCC radio net for the Caribbean. At the same time our daughter Melissa contacted the Antigua press and radio stations, both of whom responded instantly. By Thursday of the same week, Melissa was in Antigua. We owe an incalculable debt of gratitude to Jenny for her speedy and efficient response to Simon's appeal, to the stream of donors who came forward in the following days, and to many others whom we have never met and whose names we will never know. And of course most of all to the skill and aftercare of the surgeon, Dr Radhakrishnan, with whom we still keep in touch at Christmas.

Jo Lucas, the general manager at Jolly Harbour, was endlessly thoughtful and supportive with local knowledge and practical advice. Hammer, the driver whose taxi I took on my first trip from the hospital back to the boat, became my regular driver on the daily return trips between hospital and harbour. And as the hospital had no lab, he made sure he was constantly on call to drive me to the various labs in St John's to which blood testing was outsourced. On a couple of occasions he even refused payment. We became friends during those car journeys, and on one return trip to Jolly Harbour he brought his mother and daughters along. I learned that he had spent many years as an electrician working for Cable and Wireless.

For several days, and on one occasion in the middle of the night, I was bombarded with numerous and contradictory telephone calls from different staff at the insurance company, leaving me confused and uncertain about the outcome. My confusion was compounded when I began to receive calls from doctors connected to the



*Rosemary and John about to leave Antigua's Mount St John's Medical Centre*

company requesting updates on John's condition. On one such call I was advised that arrangements were being made to medivac him to the USA – that would certainly have put paid to the children's inheritance! I subsequently discovered that, although the insurance company had declined to pay, they continued to provide remote medical advice, although this was never made explicit to me. In the end, however, our initial suspicions were confirmed. Because of his age, John's existing cover didn't extend to the Caribbean. In the throes of pre-departure preparations and other distractions, a small oversight had led to potentially life-threatening consequences. Having been reassured that we should put it behind us and get on with our lives, the earlier incident at home had been all but forgotten. How easy it is to take good health for granted! As the well-worn saying goes, the unthinkable will never happen to us – until out of the blue, it does.

By the time Melissa arrived life had assumed a regular routine, with long days spent at the hospital punctuated by trips to labs. While John recovered slowly in intensive care we kept a constant, anxious vigil. We hired a car, and on my birthday – at John's insistence – drove the scenic route to Nelson's Boatyard and English Harbour, where Antigua Week was in full swing. Watching the comings and goings to and from the dinghy pontoon I felt strangely distant from the community of which we had so recently been a part.

Owing to domestic circumstances, our original plan to sail to Suriname, the West Indies and northwards via the Intracoastal Waterway had had to be cancelled. Reluctantly, we had made arrangements to ship *Arctic Tern* back to the UK from St Thomas in the US Virgin Islands, little realising what a fortuitous decision this would turn out to be. But now I needed to find someone to take the boat from Antigua to St Thomas. Jo Lucas recommended local delivery skipper Kevin Moses, who fitted the new throttle cable for me and delivered *Arctic Tern* safely to St Thomas, where she was berthed for a week to await the arrival of the transporter ship. The final leg of her passage home to the Clyde, at the end of May, was entrusted to a UK delivery crew.

Less than two weeks after the fateful night, John was given medical clearance to return to the UK, where he spent the rest of the summer recovering. Since then he has been in excellent health.

There is a happy postscript to this story. We finally joined the OCC and a couple of years later were delighted to meet Jenny Crickmore-Thompson at the Scottish Open House weekend hosted by Commodore Simon Currin and his wife Sally. We are also back aboard, having spent several weeks this summer cruising home waters on the west coast of Scotland, and have recently completed a two-week charter in the Desolation Sound area of British Columbia.

*With John Franklin and Jenny Crickmore-Thompson at the Scottish Open House weekend in May*

