

**David Willson** is the author of *REMF Diary* (1988) and *The REMF Returns* (1992). Working from his diaries composed in Vietnam, Willson tells the story of the war as it occurred for most soldiers. As Black Heron Press points out on their website (the two novels are still in print):

For every infantry soldier who was actually fighting in Vietnam, there were at least five to six other rear-area personnel to support him. After all, soldiers have to be processed in, fed, housed, supplied and resupplied, medically looked after, counseled (spiritually and legally), paid, entertained, and damn near anything and everything else by someone else in uniform to keep the war rolling. These rear-area soldiers were known as REMFs; which meant they were Rear Echelon Mother Fu...eh, you get the point. Their fight was often against such enemies as boredom, tedium, petty bureaucracy, and the many absurdities that made up the other side of the war.

And Kirkus:

Wilson appears to have drawn almost verbatim from his diary at the time. He sets no scenes and for the most part does not even reproduce dialogue, but nonetheless the minuteness of his account causes the rear echelon war to emerge, in its droning, hot, meaningless stupidity. We see Willson planning for his R & R in Hong Kong and then enjoying it; his naiveté, and unwitting irony are a delight and irritation at once. He starts from the point of view that none of what is going on around him makes sense, and neither do the objections to it. Maybe it's not so different from "the world" itself, where the first object is to survive, and the second is to enjoy oneself. With all the agony we have come to associate with the Vietnam War, many young men had the time of their lives, and will never enjoy themselves so much again. Whether these two diaries are novels begs the question—there's a narrative here, and a sly wit at work.

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Vietnam combat veteran W.D. Ehrhart (author of *Vietnam-Perkasie* and *Going Back*) has written:

David A. Willson illuminates an aspect of the Vietnam War that is rarely discussed and even more rarely dealt with in literature. Moreover, he does so with dry humor and a painstaking eye for detail. His characters are at once wonderfully absurd and chillingly real. [The REMF Diaries are] as necessary to understanding what Vietnam was really like as any book written about grunts, guerrillas or Green Berets.

Willson has now turned his eye to his current battle with cancer and the Veteran's Administration. His *REMF Diary of Dying and Bureaucratic Complexity* is appearing as a **Special Feature of WLA Online** and will be updated with new installments the first of each month. David has long been a friend of **WLA** and

we are honored to present his third and on-going **REMF diary**. We respect his courage and feel privileged to share his story.



### ***REMF Diary of Dying and Bureaucratic Complexity***

#### **Part One**

My ribs had been causing me some serious pain since June. I'd been to see Dr. Brooks several times and lots of theories had been pursued but none had panned out. Finally, in October, I was sent to a specialist. He did a biopsy and had me do a 24 hour urine collection. Dr. Lee gave me the diagnosis. Multiple Myeloma. Okay. I thought I recognized the name of the disease from the Agent Orange Dirty Dozen list. Dr. Lee kept saying that she hoped that I had prostate cancer, and I didn't get why she'd say that. She explained that prostate cancer could be cured, but that multiple myeloma had no cure and no remission. I got it then.

When I got home I looked up the Agent Orange disease list on the VA website and there it was, nestled between Hodgkin's disease and respiratory cancers (lungs, bronchus, larynx, trachea.) Fine bedfellows. The big heading on this section was "Presumptive conditions for disability compensations." An open and shut case. I am a Vietnam veteran who served in-country from September 13, 1966 through October 23, 1967. I was stationed in Tan Son Nhut and then in Long Binh, but because I worked for the Inspector General, I was all over the country. I was presumed to be exposed. I was diagnosed with multiple myeloma by several doctors, including Dr. Norman, my oncologist. I was told that I had Stage 2 B, and that my disease was in an aggressive mode. Looks to me as though I have hit the jackpot.

I sat right down and wrote the VA a letter apprising them of my situation. I included a copy of my DD 214, the one that my SS# is wrong on. Also I included a copy of a document from my doctor which showed that I had been diagnosed with multiple myeloma, with no remission. This should do it I thought. Here's the short letter I sent them.

Dear Claims Office,

I wish to start the process for a claim for disability. I served in Vietnam for over 13 months from 13 September 1966 until 23 October 1967, in the U.S. Army. (please see attached DD214.) I was recently diagnosed with multiple myeloma at Group Health, Tacoma. (See attached.)

Please let me know what the next step is in this process. I would also appreciate notification of receipt of this letter. Thanks.

David A. Willson

I got a letter back from the VA in a week or so. I was given a file number, but not a claim number. That's a start, but I wondered about the difference between a file number and a claim number. Is a file number different from a claim number? Does that mean my status is lower? I didn't know.

The letter assured me they had received my application for benefits. They sincerely desired to decide my case promptly. They have a lot of claims, so I shouldn't hold my breath. I am paraphrasing here. They will contact me if they need additional evidence or information. They tell me that they don't want me to contact them. They will contact me. Well, that was food for thought. I was getting a sinking feeling. They tell me that if my mailing address is different from that shown above that I should contact them. Please advise them of my new address.

Why would the address be different, I thought? I just gave them the address I'm going to live at until I die. I've been living at this address for 16 years. I looked at the address on the letter. It was wrong. So wrong that I couldn't figure out how the letter got to me. They'd inverted the second and third numbers of the street address. Not good. My eyes danced to my name. My name was wrong, too. Oh, oh. I was beginning to think this process might not work as well as I'd hoped. How much faith can I place in an agency that gets my name and address wrong, when the information I provided them was correct? I suspected this agency didn't care about me. I started to worry and fret.

I talked to Vietnam veteran friends. They told me that I was doomed if I didn't have a service rep helping me get into the VA system. As a long time member of the VVA, I decided that I needed to get the name of a VVA rep in the Seattle office. A dear old friend who works for the national office of the VVA referred me to Roosevelt Ward and I set up an appointment with Roosevelt Ward.

I wrote another letter to the VA:

Dear T. Clark,

I know that your letter dated November 4, 2008, told me not to contact you, that you'd contact me, but I am worried that further letters you send me might not reach me. The reason for that fear is that you got both my name and address wrong on your first letter. Those errors did not inspire confidence. My name is David A. Willson. Two "L's" in Willson. My address is: 23630 201<sup>st</sup> Ave SE, Maple Valley WA 98038. Not "210"—Not.

I have been diagnosed with multiple myeloma Stage II B, and my disease is aggressive. I cannot afford the cost of the thalidomide my doctor prescribed for me. That is not good. I will die sooner without it.

I had to pay \$4,000.00 last Friday for my prescription. The U.S. Dept. of Veterans Affairs Website tells me that multiple myeloma is on the list of Agent Orange presumptive disabilities. So, as I did 13 months in Vietnam, I want the VA to pay for my medicine. That seems reasonable to me. Also, please get my name and address right.

Thanks. Yours, David A. Willson

I hoped that the VA would fix my name and address problem. I drove into Seattle and met with Roosevelt Ward in the VVA office on the tenth floor of the Henry Jackson Building. I spent a couple of hours with him as he patiently helped me through the forms for the VA. He gave me a serious orientation into what I had to deal with. Basically the VA had developed a series of hoops that are incredibly hard to jump through. I couldn't answer many of the questions the VA asked. Not off the top of my head. I couldn't answer the questions related to my marriages and divorces. Mr. Ward explained to me that my disability application wouldn't go anywhere with the VA without copies of the documents related to my marriages and divorces. I went away from my meeting with Mr. Ward armed with the information I needed to do battle with the VA. I'd learned that the VA would not be easy to deal with.

My wife, Michele, and I spent the next Friday morning in the Seattle courthouse and the records center. The marriage records were in one building and the divorce records were in another building. I guess they didn't want the records commingling. We did battle with ancient microfilm readers and ancient microfilm and microfiche. The film and fiche were damaged and tattered, and the faint entries from the divorce decree ledger of 1971 were almost unreadable. Without the decree number, the clerk could not retrieve the certified copy of the decree that we needed. I had to use a large magnifying glass to read the retrieval number of the divorce decree.

Around us were other sick old veterans, nearly crying tears of frustration as they tried to deal with the decrepit machines and the ruined microfilm. It was a struggle for me, too, and I had the advantage that I'd spent my thirty year career as a reference librarian working with old microfilm readers and with ancient microfilm. These old guys had never seen a microfilm reader or microfilm before today, and they weren't doing well. They didn't know which end was up on the microfiche.

We got our retrieval number, gave it to the clerk, and received our copy of the decrees and paid and were on our way. The other sick old vets were still struggling. Good luck to them. I saw the clerk come out from behind his counter and go over to them. It looked as though they would get professional help. Good.

Michele and I then drove down I-5 south to the Tacoma Group Health Building in rush hour traffic. We checked in with Dr. Norman's office and completed the process of qualifying for the thalidomide.

It's part of the Thal-Dex treatment. We went down to the pharmacy and learned that the thalidomide cost \$9600.00 of which we had to pay \$4,000.00 out of our pockets, due to something called "the donut hole." This was the first I heard that Medicare had anything called a donut hole. What is it? I'd have to look into that. But for now we chanced maxing out our Visa card to pay for the needed medication. I wanted to start taking the stuff right now as my life depended on it.

We left Group Health feeling poor and bereft. Shouldn't the VA be paying for this? Dr. Norman had informed us that some of his cancer patients did get their medication paid for by the VA. He didn't know what process they went through to get the VA to pay for the medication. Neither did I, but I would try to find out. I knew it wouldn't be easy. The book on Federal benefits for Veterans and Dependents says that I met the presumptive conditions for disability compensation. But when? In the fullness of time? When I got them every marriage and divorce document that they required?

Time passed. I took the thalidomide and the steroids as prescribed. Michele and I drove to American Lake and I registered for a VA medical card and got put into the VA system for medical care. That involved filling out a three page form that required detailed information about our income last year when Michele was still working fulltime as a principal, well before she quit her job to spend more time with me. Now she's working part time, just enough to pay for our medical coverage.

Everyone I dealt with at the American Lake VA Hospital was kind and helpful. Michele and I watched the sick old vets (many of them Vietnam vets younger than I) stumble past us. Some of the veterans around us couldn't even walk at all. The passing scene made me feel lucky. I looked good and felt good, except for the pain in my ribs, the pain in my back and the pain in my right leg. We waited about an hour while our paperwork was examined and entered into the system. Then we were called to Room B for our interview. We were informed of what was available for us and that I'd get my ID card in 7 to 10 days. We were informed that free valet parking would be available for us when we went to the VA Hospital in Seattle for the next step in this process, which would be the Agent Orange Registry. Then I was sent to Room A where my picture was taken for the ID card.

When I got home I called the Agent Orange Registry Office at the Seattle VA Hospital and was given an appointment for 10:30 Monday morning. This was on Friday. Things were moving along a bit faster. Good. I felt that I was making progress.

Saturday we got our mail. There was an 8 1/2 inch manila envelope from the Department of Veterans Affairs. I checked my name and address. Both were wrong, again. This is not an agency that will be easy to deal with. Why can't they get my name and address right? How is their mail even reaching me with the address so wrong? They want service treatment records from the service

department. Those records will help them determine how my claimed disabilities are connected to my military service. How? They have my name wrong, my address wrong, and they think my service treatment records will have something to do with my recently diagnosed multiple myeloma? They are incompetent or fools.

I am in a world of hurt. They prefer original records to copies. How would I have originals? The Army keeps the originals. I was a stenographer in the U.S. Army. I know how Army records keeping works. Soldiers never get the originals. The Army keeps them. That's how it works. Included in the envelope was VA form 21-526. Many pages of mind boggling questions, questions that I'd struggled to answer with Roosevelt Ward's help in the VVA Office. I need to call him and see if he's got enough information now to submit the forms to the VA to move this attempt on my part to get disability for my multiple myeloma, and my medication paid for. I will also ask him for advice on how to correct my name and address with the VA. Writing them a letter didn't work out.

I hope I live long enough to see this process through. I've got another donut hole coming up in a couple of months and will have to put another \$4,000.00 on my Visa card, if the card will stand it. This process could get to be brutal. I wondered how those old vets that I saw in the Seattle courthouse were doing with their claim applications. I suspect that they were doing no better than I. Probably they were doing worse.

## **Part Two**

On Monday, November 24, 2008, Michele and I drove into Seattle to the VA Hospital on Beacon Hill. The hospital was the biggest thing on the hill so even though we took a wrong turn, we spotted the place. Soon, we were driving around the parking lot searching for a parking place. I'd rejected the free valet parking option because there was a long line of cars. All the handicapped spots were full. I found an empty parking space conveniently close to the building, but wondered why it was empty. There was a pickup truck in the adjacent space, and it was obvious from the blue tarps tenting the truck bed and the eyeball high rubble in the cab that somebody, probably a vet, was living in the truck. I went ahead and parked. There appeared to be nobody at home.

As we walked along the rows of parked cars, I noticed that these cars were very different from the cars parked in the lots on Mercer Island at lacrosse practices. I spotted no new high end SUV's, and not one Hummer or Escalade was in sight. Conspicuous consumption didn't seem to be a consideration of the customers of the VA Hospital.

Michele and I went into the hospital and got a map from the nice lady at the front desk. She drew out our lengthy route to Leigh Hayes Agent Orange Registry Office with a marker. We began our trek into the labyrinthine depths of the hospital. I kept making wrong turns, and Michele pulled me back onto the right path. Was I more confused than usual, due to my chemo, or was this my normal confusion? I wasn't sure. Soon we found our destination.

We met briefly with Leigh. She gave us an Agent Orange form, three pages long, to fill out. I did my best with it, but had no idea what Corps I had served in. I, II, III, or IV? No idea. Leigh got out a map of Vietnam and helped with that. I was stymied and ready to throw up my hands in defeat, but Leigh made it look easy. I was assigned a December 18<sup>th</sup>, appointment with an Agent Orange doctor. Because I'd already been x-rayed and blood worked to death as part of the Group Health process of diagnosing my multiple myeloma, I'd asked if I could avoid duplication of those tests. Yes, Leigh said, if I brought the doctor my Group Health records. Okay, I'd do that. We left, retracing our path through the VA Hospital, back to the parking lot. We saw a lot of veterans during our journey and none of them appeared to be doing well. No surprise there. Why would they be in a VA Hospital if they were doing well? We carefully navigated around many men (and a couple of women) with canes. Even though I wasn't any too steady on my feet myself, due to the thalidomide, I felt lucky to be walking without an aid. I was holding on to Michele for balance, but doing fine, I thought.

We walked out through the crowded entryway towards the curb. As we stepped off the curb, an old red sedan in the valet parking lane lurched towards us. We hastily stepped back onto the curb. I felt a wave of pain in my spine. I have to remember to stop, look and listen. I am not the quick responder I was. I have to come to terms quickly with the changes that have overtaken my body.

We walked to our Ford, and I noticed that the truck's resident was now home. A youngish man, he was in the back of his truck, rooting around under one of the rumped blue tarps. His head was down, and his butt was up in the air. His jeans were riding downwards. I could see a red scar on the back of his closely shorn head. Michele and I got in our Ford, backed out carefully and left for Maple Valley. The young man in the truck never even glanced our way. He was still rooting in the rubble of his truck bed the last I saw him. I had the thought that perhaps he lives in the truck and rarely leaves the VA Hospital parking lot. Perhaps he uses the hospital restroom facilities and the snack bar.

The next step for me is the December 18<sup>th</sup> Agent Orange doctor's appointment. Between now and then I'll try to communicate with someone at the VA about my name and address being wrong. That should be fixable. Also I need to connect with Roosevelt Ward in the Seattle VVA Office about progress

with my claim application. Did I provide him with enough of the official copies of my divorces and marriages to make the VA happy? Lots to do. I gave Mr. Ward a call and left him a message.

I reread my most recent letter from the VA. It indicated that I could use email to communicate with them. I thought, it's worth a shot. They have a system they call "Iris." One of my favorite flowers. We had a row of them in Yakima at the house I grew up in, that ran from the front of the property all the way to the back. Lately I've found that my mind often is wandering back into my past. Iris. VA.Gov. I did get into the system, and I muddled around with it for about thirty minutes. I got nowhere. They don't make it easy. I did get to a piece of information about address change where I was informed I had to write a letter to my regional VA office to change my address. I've tried that, to no avail. Besides, I am not changing my address. I am trying to get the VA to correct the wrong address that they are choosing to send my mail to. It's an address they made up. Also I'd like them to fix the misspelling of my name.

Before I wrote another letter, I decided to try a phone call to the regional VA office. I rang them up and explained my plight. I was told that to change my address I needed to write a letter. Okay, that's familiar information to me. I was told that to change my name, I needed to get an official copy of my birth certificate and send it to the regional office. I tried to explain that I didn't want to change my name, that I wanted them to change the way they are choosing to misspell it. She said that any name changes would need a birth certificate submitted. I questioned why I should have to submit a birth certificate when I served in the Army under the name David A. Willson, spelled correctly with two "I's?" She said that's just the way it was. She said again that I could get my address changed by sending a letter to the regional VA office. I explained again that I'd tried that already. I gave up on trying to get anywhere with her and said goodbye.

I sat down and wrote another letter. I addressed this one to M. R. Murphy because that was the name stamped at the end of the most recent letter from the VA. The name was stamped in excessively large print as though it's possible that I am losing my eyesight. Actually, since I began the maximum dosage of the thalidomide, my eyesight has blurred some, so I suppose I should be thankful for the large print. My most recent letter follows.

26 November 2008  
346/Prd/ckm  
File Number 24 330 676  
David A. Wilson

Dear M. R. Murphy,

Please correct above name error. My name is David A. Willson, spelled with two "l's." Not one. My address is also wrong. I live on 201<sup>st</sup> not on 210st. This is not an address change. Far from it. I've lived here for 16 years and will continue to live here until I die of the Agent Orange caused multiple myeloma which I was exposed to in Vietnam.

I look forward to your fixing the above errors. If you can't get my name and address right, how are you going to process my disability claim in time for me to benefit?

Thanks. Yours, David A. Willson

I hope this letter does the trick, but I am beginning to doubt that my letters are being read. The good thing about this process with the VA is that it forces me to reflect. I remind myself that I started this interaction with the VA as a hobby, designed to take my mind off of my real troubles. I don't want to dwell on the fact that the chemo I am administering to my body could provoke a thrombosis which could kill me dead, just like the bugs assaulted with Raid. I'd rather focus on a paperwork dance of miscommunication with the VA.

I never expected to live much past sixty-six anyhow. Fatalistically I've dwelled for years on the facts of my heritage. My father, Robert, the Marine Corps veteran of Iwo Jima, was dead from brain cancer at sixty-six. His father, Homer, a veteran of the aftermath of the Philippine Insurrection, was dead at sixty-five. My Norwegian grandfather, Halvor, was dead at the age of sixty-four, from a lifetime of halibut fishing. So here I am, at sixty-six, staring my own mortality in the face. Platitudes waltz through my brain. Live each day as though it's your last. Savor each moment. Don't go to sleep with anything bad on your mind. Don't count on the dawn arriving so you can apologize for the sins of the previous evening. He who waits for dead men's shoes shall long go barefoot. Leave 'em laughing. They got to laugh, just to keep from crying. Give me flowers while I'm living.

### **Part Three**

**2 Dec 2008**

I called the number on the VA printout scheduling my Agent Orange Registry medical appointment. I'd hoped to get a hold of the office of one of the Agent Orange doctors. Instead, I got Leigh Hayes extension. I called the number Leigh Hayes gave for the clinic and got a recorded voice. I left a message asking to be called concerning my 18 Dec appointment. I'd hoped to ask the Agent Orange doctor where this process was leading me. I'd like the process to lead me to a point where the VA would pay for my medication. There is no flow chart showing how one interaction with the VA leads to another, or

how one step relates to another, Maybe they don't relate. It all seems like a Magical Mystery Tour to me.

I then called Roosevelt Ward at the Seattle VVA office located in the Henry Jackson Building, which is the same building that the Seattle VA offices are located in. I was told that he'd just stepped out for a cup of coffee. I was asked to call back in ten minutes.

I got a call back from Mr. Ward. He told me that my claims application was in the process at the VA office and that I would hear from the VA in about four weeks "about something." He said that he's trying to straighten out the name and address problem. So wait a month and see what happens. Meanwhile, I have the Agent Orange Registry exam to look forward to.

Mr. Ward called back later and our conversation left me with the uneasy feeling that the claims application Mr. Ward had forwarded to the VA office had been lost or at least misplaced. Mr. Ward said that he'd try to locate it. I tried hard to think of this pursuit of the VA claim as a hobby, just something to keep my mind off of my troubles with multiple myeloma, but I failed in that struggle. My dealings with the VA and my MM have become intertwined. I need to work on separating the two or my mind will be condemned to be a complete muddle. I must work to clarify.

## **2 Dec 2008 / Evening**

I got a call from Bob Mower, multiple myeloma survivor. I found out quickly that he's about my age and that he's survived MM for ten years. That was positive information for me to chew on. I spoke with both Bob and his wife. They kept using a word I wasn't familiar with, "caregiver." What's that all about? I dodged their questions about who was my caregiver as I didn't know what they were getting at. Finally, Mrs. Mower asked me if I was married. "Yes, I am," I said.

"Oh, then your wife is your caregiver."

"What's with this "caregiver" stuff?" I asked.

Mrs. Mower proceeded to give me a long list of things that a caregiver provides.

"Nobody does those things for me," I said. Nobody needs to do those things for me. I've been doing that stuff for myself for sixty years. I didn't like the thought that I was going to reach a stage in which I wouldn't be able to get myself to the bathroom and back. I am still the same person now that I've been for decades, and I am not eager to contemplate that change is in the offing.

Uneasy silence. My thoughts ran away from me. Are they implying that Michele is soon going to be doing those things for me? I remembered stories from my mother about what she had to do for each

of her three husbands as they died of cancer. Each time the process of providing care almost killed her. I hadn't pictured myself in that sort of condition.

I thought of mother's story about walking into her bedroom and discovering her third husband, Dick, with a loaded gun in his hand, about to do away with himself. He was suffering from the affects of his chemo and had had enough. My mother had to wrestle the gun away from him. Perhaps it's those memories that make my mother so weird to deal with on the phone these days. She's said that she is afraid to call me. I guess it's because of her fear about how the chemo might change me. She's projecting all those bad memories of her three dying husbands on me and my current situation.

When I'd asked her how long those husbands of hers took chemo, she said she couldn't remember, but she didn't think they stood it long, so they quit and waited to die, which hadn't taken long.

I'd always thought of the men of the Greatest Generation as Hard Men, men who didn't show much emotion, except for anger, of course. They prided themselves on not letting anything bother them, on soldiering through. Maybe that stereotype is wrong.

I've tried to explain to my mother that my appetite is good, and that my hair is not falling out, but her memory images of those three dying husbands are too powerful for her. All three of those men were warriors. They all fought in World War II, and they won their war, a fact that was always made clear to me, a veteran of a war that we lost, a war they sent us off to, a war that our current national leaders dodged serving in. All of this swirled around in my brain as I talked with the Mowers, and some of it came out of my mouth.

My struggles with the VA triggered some of the thoughts. When the Mowers mentioned a website that could help me pay for some of the chemo, about \$500.00 or so a year, I commented that wasn't what I was looking for. Mrs. Mower said that even \$500.00 was better than a poke in the eye with a stick. Sure, that's true, but I feel that the VA has a moral and ethical obligation to pay for my chemo because I was drafted into the U.S. Army and sent to Vietnam where I was poisoned by Agent Orange. Bob Mower's advice, repeated several times was, "Don't take no for an answer. If you are told "no" go around that person and find somebody who will say "yes."

Good advice, but hard to put into action. I need to actually have somebody real to talk to. Perhaps the Agent Orange doctor will be such a person.

The phone call with the Mowers left me in an optimistic mood. Bob Mower sounds like a strong and optimistic person, and he's survived MM for ten years. Thanks for the call. I will work on a different mindset.

### **3 Dec 2008**

I got a call from Leigh Hayes concerning my question about what would transpire at the 18 Dec appointment with the Agent Orange Registry doctors. I didn't really find out what's what, but that I should bring with any medical records that I have, if I wish to avoid further blood work and more x-rays. I guess I am willing to go through all that again if it would lead to the VA paying for my chemo. As I'm anemic, I'd rather not have unnecessary blood work, but I guess I've got more blood to spare. I'll just have to show up for the appointment with my records and see what happens. Leigh Hayes said it's about my getting on a list. Then what? I have no idea, and nobody has told me. Maybe the doctors will tell me. I asked Leigh Hayes if I'd get a chance to talk with the doctors, and she said that I might get a little time to talk with them. I am going to make an effort to connect with them. I'd like to get some information.

### **Part Four**

### **5 Dec 2008**

I got a letter today from the VA addressed to me by the right name and to the correct address. False alarm. It was only my new Veterans Identification card with a grim color picture of me affixed to it. This card was sent from American Lake (VAMC) Tacoma, WA, not from the VA Regional Office in Seattle. The left hand doesn't know what the right hand is doing. The notice under the attached card warns, "This card is only for use as a means of identification VA medical facilities." They continue to say, "This card cannot be used as a credit card or an insurance card, and it does not authorize or pay for care at non-VA facilities."

Okay, what will it do? Will I be able to get the VA to pay for the chemo I am taking for my Agent Orange related multiple myeloma? I have no idea, and no idea of how to find out.

The letter ends with, "If you have questions regarding VA Health Care benefits, please call 1-877-222-VETS (8387)." I have lots of questions, but I'll call that number on Monday with my long list of questions and hope I get a live person to talk with. If my previous experience with VA phone numbers can be trusted, odds are that I'll get a recording. If I get a live person, I will eat my hat. I can hardly wait until Monday.

### **6 Dec 2008 / Saturday**

I picked up the mail today and found amongst all the catalogs, two letters from the Department of Veterans Affairs. Both letters were addressed correctly to me, and both my name and my address were

right. Wonder of wonders. I opened the thin one first. It was one sheet informing me that they had received my application for benefits. They warn me that they have a great number of claims, that mine might be delayed. They are deciding if additional information is needed. They will contact me. There's no reason for me to contact them. I look at the upper right hand corner of the letter and check the file number. It looks right. I am still payee 00. My name is listed as D A Wilso. I'd like them to add that second "l." But I do admit, progress is being made.

I opened the fat second envelope. On this letter my name is spelled right everywhere, including in the upper right hand corner. Progress is being made here, too. This letter informs me that they are working on my application for service connected compensation for multiple myeloma, right knee conditions and tooth damage. I shake my head at the inclusion of the knee damage and the tooth damage. I included those on the application form only because Mr. Roosevelt Ward, my VVA rep, asked me if I incurred any other physical injuries in Vietnam. So I mentioned those. I wish I hadn't, but the process of filling out forms makes me so anxiety ridden that I told him what he asked for. Now the VA wants me to produce dates and locations and names of the dispensaries and hospitals or facilities that I received treatment in for these conditions.

More than forty years have passed since those events. I clearly remember eating mashed potatoes and gravy in the mess hall at the USARV HQ Compound and biting down on a bone in the gravy and cracking the molar in my upper left side. Pain, great pain. I received some temporary dental treatment from an Army dentist in Vietnam, but it wasn't meant to last. I was told by the dentist to get permanent treatment at my first Stateside assignment after I left Vietnam. I never got one. I was separated from the Army the day I arrived Stateside. When I got home to Seattle after separation, I paid a dentist to put in a bridge and I've spent many thousands of dollars on it since. Not a penny from the government. When I contacted the VA, they said it wasn't covered as I'd waited too long. I had one year, they told me. That was the first I'd heard that. It would have been nice if they told me that the day they separated me. I have no dates or other details of that treatment in Vietnam. I assume the Army has detailed records of that dental treatment.

As for the knee injury, I well remember the late evening when a Red Alert was sounded. We were told by our company sergeant that a battalion of NVA were threatening to take over the golf course, and we had to check out our unloaded M-14's from the gun room, load into the deuce and a halves and go to the edge of the golf course and await the arrival of the NVA. We did all that. But when I jumped out of the truck to do my duty, I landed funny on my leg and my knee popped. It's hurt intermittently ever

since. I sought no medical care for the knee in Vietnam, so there's no military record of that knee injury. Sometimes it bothers me so much, I can barely hobble. Much of the time it's okay.

My real concern is the multiple myeloma. I have a nice new bridge where the broken tooth used to be and the knee feels fine at the moment. But the multiple myeloma is a constant concern. Lots of back pain, rib pain, blurry vision, unsteadiness on my feet, tingling in my fingers and toes. Getting up and down from a chair is agony. Getting a jar of jam out of the fridge is a major undertaking.

The letter from the VA makes the point that they've requested information about my multiple myeloma from Group Health, but they go on to say, "it is your responsibility to see that the VA receives it..." How do I do that? I know that Roosevelt Ward received the Group Health records and that he sent them along to the VA with my application. I know that Group Health sent records to the VA. Nowhere does this VA letter acknowledge that they have received those documents. The letter seems to say the opposite. That's not reassuring. I will append further copies of the medical documents to this new form when I send it back to them.

Their letter states that veterans are covered because "VA may conclude that certain current disabilities were caused by service, even if there is no specific evidence proving this is in your particular claim." They continue to state that "the cause of a disability is presumed for veterans who were exposed to certain herbicides, such as by serving in Vietnam." That would be me. I was all over South Vietnam with the Inspector General and I was assigned to Long Binh for four months during time I was exposed to Agent Orange on a daily basis during guard duty, while taking showers, and by ingesting the stuff when eating the mess hall food and drinking water. So what's taking the VA so long to decide my case?

All my life, filling out forms has terrified me. Especially forms that I sign and date at the bottom. The first form is a 21-4138. At the top of the form they tell me that it's estimated that it will take me fifteen minutes to review the instructions, find the information and complete the form. I wonder where they get this estimate from. I am tempted to think they pulled it out of their ass. I fight that negative thought. More likely they spent a million dollars of tax payer money on a scientific study and then they pulled it out of their ass. They go on and on about a valid OMB number being required or the form won't be accepted. What is an OMB number? They never say, not in terms I recognize. There is almost a full page of undirected space I am supposed to write in. What do I say? I have no idea. And there's no clue given on the page that I pick up on. I sample answer would help. Something giving me an idea of an acceptable format. I'll have to wing it, I guess. I'll tell them about my knee and my tooth and append

duplicates of my Group Health medical records pertaining to my multiple myeloma. If that doesn't do the trick, then what? I guess I will wait and see.

Here's the text of the statement I came up with to try to satisfy the latest demands of the VA. I used some of the above information, but presented it a bit differently. I think a comparison of the two can be edifying.

#### **Statement in Support of Claim / VA File No 24 330 676**

The Multiple Myeloma is the main issue I am concerned about. You should have received at least two sets of paperwork from Group Health by now that verify and detail my affliction with multiple myeloma. You have my DD214 which verifies that I served in the Army in Vietnam for thirteen (13) months. Your own literature states that "the cause of a disability is presumed for the following veterans who have certain diseases." I've got that certain disease, multiple myeloma, and I was exposed to "certain herbicides" while serving in Vietnam, from September 1966 to October 1967. Open and shut case from my point of view. I hope you see it that way, too. (See attached forms from Group Health that verify my multiple myeloma.)

As for the other two issues, the knee injury happened one June night in Tan Son Nhut when our company at the USARV HQ was called out on a so-called "Red Alert" to defend the golf course against an attack by a battalion of NVA troops. That's what our sergeant told us when we asked what the fuss was about. We checked out our unloaded M-14's from the weapon room and loaded into deuce and a halves and were driven to the golf course where we were unloaded. When I jumped out of the truck, I landed funny on the tarmac and twisted my knee. I felt it pop. It has hurt intermittently ever since that injury. I sought and received no treatment for that injury while in the Army. I reported it to nobody. There's not one shred of evidence that links my knee injury to my Army service. Furthermore, we never saw an NVA battalion, not even one VC.

The other injury is a split molar in my upper left jaw. I was eating mashed potatoes and gravy in the mess hall at the USARV HQ compound and bit down hard on the mashed potatoes, and my molar hit a bone, and it split up the middle. I sought and received emergency dental care of a temporary nature. Nothing meant to last for the long haul. This was the summer of 1967 as I remember it, but I have no records written

down about that incident. The Army dentist made no offer of a bridge, but said when I got my assignment in the States I'd get it taken care of. I never got such an assignment because I extended in Vietnam to get an early out from the Army. I was separated the day I got back to the States. I had nothing but problems with it, but when I approached the VA about it, I was told that I'd waited too long to let them know about it. They said there was a one year deadline and I was out of luck. They said I had nothing coming. Thanks for nothing. I had to pay for all the dental work myself. I've spent many thousands of dollars on that broken molar through the years. Just recently I spent another \$4,000.00 on a new bridge. It never ends. Well, I guess it will when the Agent Orange related multiple myeloma kills me.

As I have no records of the U.S. dental care, I assume that the VA can access those records. If so, fine. If not, so what. Not knowing there was a one year limit on care, I waited too long anyhow. I think the VA is off the hook on the knee and the tooth, both of which have troubled me for over forty (40) years.

I am hoping I get some acknowledgement from the VA for this multiple myeloma. If I do, it'll be the first time the U.S. government has taken any responsibility for the damage done to me after I was drafted and sent to spend a year in Vietnam. Unlike the knee damage and the molar damage, this multiple myeloma, caused by exposure to "certain herbicides," will be fatal. I feel like a time bomb is ticking away in my system. The severe bone pain in my back and ribs and legs limits my mobility. My blurry vision and numbness and tingling in my extremities (caused by the thalidomide) make it difficult to read or to use my computer. These are constant reminders that my days are numbered. I am shaky on my feet and going down fast. Getting a jar of jam out of the fridge is a major operation. That's all I am going to say about that.

I hereby certify that the information I have given is true to the best of my knowledge and belief.

David Allen Willson

**7 Dec 2008**

VA File No 24 330 676

Next I go to the Copy Center, make copies of all the forms I will send back to the VA, and wait to see what will happen. I predict that I will get more forms to fill out, or I'll get these forms back with demands for better or different information. More hoops will be presented to me for jumping through. The hoops are never ending. I predict that I'll not hear back about these forms until after my 18 Dec appointment with the Agent Orange Registry doctors. I realize as I type these words that I am pinning too much of my hopes for progress on that appointment. I've already been warned by Leigh Hayes that I won't get much chance to talk with those doctors. It's really hard to get useful information from the VA. I must be doing something wrong. But I don't know what it is.

### **7 Dec 2008 / Sunday Afternoon**

Michele and I drove into Seattle to the Multiple Myeloma Fighters Holiday Open House, from 2 PM to 5 PM at Trude and Carl Donovan's house on NE 60<sup>th</sup>. We brought a couple of cans of food for a food bank donation as suggested. As we came through the door, I remarked to Carl Donovan that he had a beautiful front door. We had quite a discussion about that front door. It was a brand new door that Carl had found a craftsman to build for him to replace the one that had rotted out. It was made of mahogany and had a curve at the top to fit the curved doorway of a house built in 1929.

Michele and I met many MM survivors and fighters. The other MM people were on the wrong side of the grass somewhere else. Many of these folks had survived MM for years, some as many as ten. We discussed medical treatment options and stored up questions to ask my oncologist, Dr. Norman at our next appointment. For instance, why haven't I been prescribed a medication to take for my bones which need strengthening, something like Zometa, a bisphosphonate? Why am I not getting that, or something like it? Also why is my dosage of thalidomide so high? 200 mgs per day isn't necessary for a good result. And I am getting the tingling and numbness of nerve damage which isn't a good thing. Peripheral neuropathy. I got to meet Bob Mower and his wife and chat with them. They were the nice people that I talked to on the phone a few days ago. Bob has survived MM for ten years and he had a triple bypass just a few weeks ago. He looked great and was full of optimism and energy. It was a pleasure to feel his energy and to get hope from his fighting spirit.

Michele and I spent an hour at the Donovan's and will go to the MM meeting next month. We got much food for thought at this gathering and will be better able to advocate for me when we meet with Dr. Norman at Group Health on Dec 15<sup>th</sup>.

### **8 Dec 2008**

I called Dr. Norman's office to ask several questions. Eventually I did get to talk to Dr. Norman's nurse Vicky. Dr. Norman is out of his office until Wednesday. I got no real answers to my questions as the answers would have to come from the doctor. I wanted to know if I should continue to take all of my thalidomide even though I was experiencing the tingling and numbness that I was warned about by Dr. Norman. The nurse told me to finish out the prescription. I have just a day and a half more of the capsules to take. That's six capsules. Okay. I don't like my face feeling numb, though. And it's hard to type with numb fingers. Also, I remember that all the MM literature emphasizes that when these symptoms appear, that action must be taken, action that involves reducing dosage of the thalidomide.

I wanted to know if there's something I can take to relieve the pain in my lower back. It's getting hard for me to get up and down from a chair. I'll need to talk to Dr. Norman about that. Okay. Is there some medication I can take, such as Zometa, to strengthen my bones? Only Dr. Norman can answer that question. Okay. Is there a week break now between this cycle and the next cycle of thalidomide? Vicky called the pharmacist and called me back and said that yes there's a week break. One answer. I'll have to wait until I have access to Dr. Norman for the other answers. I guess they aren't life and death issues. I hope they aren't.

## **Part Five**

### **Thursday / 18 December 2008**

The days between 9 Dec and 12 Dec are a confused haze of narcotic influenced dreams and pain. Michele loaded me into her CR-V the morning of the 10<sup>th</sup>. I was howling with pain, and I felt as though my vertebra were broken and trying to get past each other on a bumpy country road. The act of getting my pants on, hobbling out to the car left me dripping with sweat and seeing double. Michele drove me to Group Health Urgent Care in Tacoma to see Dr. Norman. He and the nurses looked me over, put me through more x-rays and further tested me. I was there from 10 a.m. till 5:00 p.m. Then I was taken via an ambulance to St. Clare's the two medics in the ambulance were great guys and gave me something that made most of my pain go away. Morphine, maybe. I felt a little better. Then I arrived at St. Clare's and entered the blur of days in a hospital bed.

How to address the lost days between this entry and the previous entry on 9 Dec.? I spent one week in St. Clare's. First off, I'll get out of the way the one bad thing that happened to me at St. Clare's. It happened to me during the first two days when I was so drug and pain addled I didn't know which end was up. I was being prepared for an MRI or a CAT scan, so stock could be taken of what was wrong with

my back. The nurse explained to me that I had to drink two glasses of a noxious liquid containing iodine. That's not how she put it. Those are my words.

"I shouldn't drink that," I said.

"You must drink it," she'd replied.

"I don't want to drink it."

"Are you allergic to it?"

"No, but I'm not supposed to drink it. I know I am not supposed to."

I couldn't remember why. A couple of days later I remembered that it was due to my acute kidney failure, and that the iodine wasn't kind to what was left of my kidney function. But that recollection was too late to help me communicate with that nurse.

She poured me a tall glass of the beverage and stood over me urging me to drink it down. I choked it down. She poured me another glassful.

"Isn't one glass enough?" I'd asked.

"No, you must drink two glasses. That's the requirement."

"I didn't have to this the last time I got an MRI."

"You must drink two glasses."

I choked down the second glass of the poisonous concoction. I slumped back into my bed. I could feel the fluid welling back up from deep within me. I jolted up in my bed and puked over the side of the bed railing onto the floor. I puked and puked. Every last drop of the stuff came up. Some of it splashed on the nurse.

I could feel her anger. She was really pissed off.

"Look what you did."

"I told you I shouldn't drink that stuff."

"You said you didn't feel nauseated. You lied to me. You did that on purpose."

"I lied?"

"Now I am going to have to put a tube down your throat so that you don't choke to death. It's for your own good."

"Are you threatening me?"

"You must now have a tube," she said in a voice that brooked no argument.

I sat up in bed as tall as I could, encumbered by tubes and sheets.

"Don't threaten me. You don't want to go down that road. I don't want to see you in my room again," I said.

I don't remember what happened after that, but I never saw that nurse again. Another nurse came and cleaned me up. I was wheeled down the hall to the room with the tunnel thing and put through it, flat on my back. Apparently, that disgusting iodine cocktail is optional.

I never got a tube stuck down my throat either. I theorize that the absolute power nurses can wield sometimes goes to causes them to over extend themselves. There must also be enough checks and balances in place at St. Clare's to protect the patient. Me, in this case. I did have thoughts of Big Nurse from One Flew Over the Cuckoo's Nest, but fleeting thoughts only. Would anyone notice a prefrontal lobotomy in me at this late date anyhow? I don't think those are being done any more anyhow.

One evening a couple of days later, an armed, uniformed guard appeared in the hallway across from my room. There was a new resident in the room directly just across from mine. When I asked a nurse what was up, I was told that new patient was a transfer from Western State Hospital for the Insane, that he was here for a medical procedure and would be gone in a day or so.

Later that night around ten o'clock or so, it started to sound like party time across the hall. I was more or less trapped in bed, but I disengaged the alarm system/vital signs tubes from my left arm, climbed out of bed and rolled my wheeled IV stand past my bathroom near to the door.

The new patient was propped up in bed and was holding forth to a couple of guys he'd found as an audience. I'd thought I'd heard some buzz words which resonated in my brain as uncomfortably familiar. I lurked in the entrance of my room, hanging onto the IV stand for support, my dank hospital gown flapping around my hairy shanks.

"I did four tours of duty in 'Nam. I seen everything there was to see, done everything there was to do. That My Lai Massacre was nothing. We did stuff like that every day. That's what we did. That's what we come to do. I had so many loops of commo wire strung with gook ears, that I couldn't have held my head up if I'd put them all around my neck at one time. I made boom boom with so many of those gook girls I lost track of the numbers. One of my buddies caught a case of the black clap from one of them girls and he got shipped out to an island in the South China Sea where he's still rotting away if he's not died by now."

I'd listened no longer. It was as I suspected. The guy was a damaged, crazy Viet Nam vet or thought he was. He told a long story about getting shot in the head when he started to enter one of those tunnels at Cu Chee and how he now has a metal plate in his head that he can receive TV shows on. He did have bandages around the top of his head. Maybe he was in the hospital getting the stations changed on the plate.

Whatever, I knew I didn't want to hear this guy further. I retreated into my room, shut the door, pulled my curtain, turned on the TV, and I could still hear the endless rumbling monologue of his stream of consciousness memories of his time as a soldier in Vietnam. Every cliché, every tall tale, every bone head maneuver I'd ever read or seen in a war movie, made an appearance with him as the character, front and center. When I complained to a nurse about the guy and his noise, she said, "You can't choose who is going to be in a nearby hospital room." She said a mouthful. You surely can't.

The next day, I had spinal surgery on 16 Dec. from Dr. Tobin. I had two vertebra that were broken into pieces, and the broken pieces were grating against each other, causing me pain in the ten range of the one to ten scale that doctors and nurses kept asking me about.

Dr. Tobin's nurses got me prepared for surgery, naked on an operating table, face down, my nose buried in a plastic donut, and drugged to the gills, and then Dr. Tobin cut open my back and packed concrete into the broken vertebra, to strengthen them, relieve the pain and get me back on my feet again.

Yesterday, I had a morning appointment with Margaret, the PT specialist at St. Clare's. She put me through some paces to determine if I was ready to go home. She observed me get out of the sick bed I'd been confined to for most of a week. She showed me a walker and explained how it is used. She asked me what sort of aids to mobility I'd used (cane, walker, wheel chair) before I arrived at St. Clare's. She spent a long time adjusting the walker higher and higher for me to use. I struggled with it, but wasn't very good with it. She pushed it aside and asked me to try to walk on my own. I did so. She told me to walk the length of the hall.

I found it a bit difficult to walk on the highly polished linoleum floor, as depth perception was a problem. Also, I had bed socks on, not shoes, so the going was slippery. The hardwood sections of the floor were easier to walk on. But I did okay. After the walking, she took me to the far end of the hall, to the stairwell, and instructed me to walk up the stairs to the landing and then back down again. I did so with no problem. The stairwell was icy cold, as there was a snowstorm going on outside and the stairwell was unheated. There was some tenderness, and some shivering. No pain. I could feel sensitivity in the small of my back. But the pain was gone. We walked back to my room.

"You are independent," Margaret told me.

"Is that good or bad?" I asked.

"It's good. You don't need my services," she said.

I was glad to hear that. One more hurdle, the daily bowel movement. I could do that, with gritted teeth, but I could do it. Dr. Kervin came to my room and told me that I could call my wife, and let her

know she could come and get me that afternoon around 3:00. I could go home. Great news. I was sick to death of being tethered down to this stinking hospital bed. An alarm attached to my left hand, several IV's attached to my right hand.

For a couple of days I'd had my head confined by tubes of oxygen. The confinement was beginning to drive me bonkers. My nurse had left an excrement receptacle she referred to as a "hat." I was told to deposit a stool sample for the lab to analyze for excess red blood cells. I fumbled around with that project, gritted my teeth, tried to figure out how to use the "hat" as the thing came with no instructions for use. I'd never seen one before. The thing did look like a clear plastic cowboy hat. No doubt about that. I did my duty, with my eye on the prize, escape from St. Clare's.

I received excellent care at St. Clare's, but I could now walk again, so I didn't need their specialized services, not today anyhow. Maybe tomorrow or next week. I wasn't kidding myself about that.

Michele showed up at around 2:30 to get me. I was still flat on my back in the sick bed, still tethered, still in my shapeless, nasty hospital gown. The thought of a hot shower appealed. I imagined that down wind I could be smelled further than a ripe, roadkilled polecat. Within an hour of the girls' arrival in my room, I was dressed and discharged. I was offered the choice of walking to the front door or being wheelchaired to the front door. I knew the nurse wanted to push me in the wheelchair, so I opted for that. Soon I was in the front seat of Michele's CR-V and we headed for Tacoma Group Health to get the prescriptions refilled, pain pills and the muscle relaxers.

We did that. Allie and I sat in the car and waited for Michele who chose to go through the prescription ordeal on her own. I told Allie the tale of the stool sample and about how the old cliché concerning shitting in my hat had come true. It was a bit different from a cowboy hat, but still too close for comfort. We had a good time chuckling together. When I was laughing with Allie, I could feel occasional sharp twinges of pain in my chest. During our exit interview, Dr. Kervin had mentioned, almost in passing, that the x-rays had displayed some nodes in my lungs that would need to be further explored and discussed with my oncologist, Dr. Norman. Okay, we'll do that, perhaps next week. Right at the moment I was headed home to Maple Valley to my terriers, a hot shower and a decent homecooked meal. Those things dominated my mind.

### **18 Dec 2008**

Today is the day I've been looking forward to for weeks, the appointment with the Agent Orange Doctors at the Seattle VA. But we won't go there today as we are snowed in. The highways are chaos. When we got up, we watched the snow coverage on TV, watched the long lines of slow cars on the

freeways, headed to Seattle, but many of them not ever getting there. The advisory is, Don't go anywhere today that requires driving. Good advice. I could easily picture myself in a car along the freeway, stalled or wrecked. Not a pretty picture. In my current condition I can take chances like that. How long from now will the VA set a rescheduled appointment? Weeks? Months? I don't have clue. I look for the phone number of the AO Office and do find it. I call and leave a message for Leigh Hayes. I ask her to call me, to please reschedule my necessary appointment with the AO doctors so that I can get on with the process of getting on the AO list.

How does anyone ever get on that list? Does anyone? What does it take? Am I any closer now than I was a month ago? It's all a mystery. Why isn't there anything printed on the VA website that explains this process? Is it a plot, or is it just the way the VA does things? Could I get the VA to pay for my chemo without my being on that list? I'd like to know. I was hoping to chat with the AO doctors about some of this. But it won't happen today.

I think of our last trip to the VA and the long winding journey from the front entrance to the AO office. The next time we make that trip, I'll be one of those vets who has trouble with ambulation. Will I need a cane, a walker, a wheelchair by then? Anything is possible. At this rate, we may never get to find out. Why does the VA make it so hard? Why don't they level with us about the process? I felt compassion for the halt and lame I encountered on the previous trip to the VA, but I feel closer kinship now. This is not country to be a veteran in. Perhaps there is no such country.

## **Part Six**

**Tuesday / 23 December 2008**

I had received no response to my phone message left for Leigh Hayes at the Seattle VA's Agent Orange Registry Office, so I called again. Leigh didn't answer, and I hadn't expected she would, this close to Christmas. I left another message asking her to reschedule my AO doctor's appointment. I continue to have the same concerns and interests related to the AO Directory. Right or wrong, I think that if I got on that AO list, I'd be making some progress with the VA. At this stage, any little sign would make me feel better about the process. I also kept in mind that Leigh Hayes had pointed out to me that my relationship with the AO Directory has nothing to do with progress or lack of same with my VA Disability Claim. Another situation where the right hand doesn't know what the left hand is doing. Sometimes it seems that life consists exclusively of such situations.

I called my oncologist, Dr. Norman, and talked to his nurse, Vicki, and informed her that I'd called the thalidomide people and taken their survey or interview or whatever it was. I told her that it was the

weirdest, most intrusive series of questions I'd ever responded to. Mostly the focus of the questions was a promise from me that I'd not had sexual intercourse with a woman who could get pregnant nor given the capsules to any woman who could get pregnant. I'd been told the interview was mandatory for me to continue receiving the thalidomide prescription, but not that the interview would display no concern for me or for possible side effects of the drug, but rather be totally dedicated to an exercise in ass covering by the corporation. I should have known better as I'm old enough to clearly remember that the first go-around with thalidomide in the 1950's resulted in many children being born with defects such as malformed arms. A photo of such a child decorates the literature that comes with the thalidomide capsules, and it's more effective than a skull and crossbones in sending the message about thalidomide's special properties.

Vicki and I discussed some of the above and she said she'd immediately call the company and do the interview that she is required to do, and call the pharmacy and verify that the thalidomide would be waiting for me when I came in to buy the stuff. By doing it this way, I will avoid the January donut hole in the Medicare plan that would require me to pay another \$4,000.00 out of my pocket. If anything goes wrong with the above plans, it becomes likely that I will have to once again pay the \$4,000.00. I am feeling positive at the moment that we will avoid that. But only time will tell.

Much later in the day, Dr. Norman called and talked to Michele and asked her if we'd be okay with rescheduling our appt for 3:40 Wednesday to a few days later. We were fine about that. Dr. Norman said that his nurse would call us later to nail down the precise day and time. We have a long list of things we wish to talk to Dr. Norman about including whether I should reduce the dosage of the thalidomide in response to numbness, tingling, double and blurry vision and nausea, and if so, by how much. Also should I be taking a bone strengthener and will there be a problem with getting refills for the oxycodone I am taking for pain and the muscle relaxant? What's the next step in diagnosing what the nodes in my chest are? Can I get a referral to a back specialist so that I can get a prognosis about that pain? All the usual worries that a patient needs to talk to a doctor about.

### **Tuesday Morning / 23 December 2008**

I got an email from Roosevelt Ward responding to an email that Michele had sent him on 15 Dec 2008 informing him of my hospital stay. His email was brief and to the point. "Has Mr. Willson been admitted to the VA if not let me know and I can put an emergency review on the case. Please contact me regarding his whereabouts. Thank you."

Michele responded with the following. "David Willson received hospital care and spinal surgery at St. Clare's Hospital in Tacoma through Group Health. He has yet to have his appointment with the Agent Orange Registry so is not on their list. He is now home, recovering from the surgery. I will contact you if he has a relapse or decides that an approach to the VA for medical care is appropriate. We got the impression from the VA, that until he'd been seen by an Agent Orange Registry doctor that there was no medical care available to him as one suffering from Agent Orange connected multiple myeloma. Thanks for responding to my email. Signed, Michele Willson."

And there it rests. Perhaps there's lots of action being taken in the Seattle VA Office related to my application for a disability claim. Will we ever know?

### **Wednesday / 24 December 2008**

We had a telephone conversation with Vicki this morning. Our appointment has been rescheduled for Friday at 3:00 p.m. I discussed with Vicki the thalidomide dosage question. She said that Dr. Norman wants me to continue to take the thalidomide at the maximum dosage of 200 mgs per day until we sorted out whether the side effects that had bothered me (numbness and tingling in my extremities, double and blurry vision) were related to the thalidomide or to the problem with my crushed vertebrae. Okay by me, but I am convinced that after a couple of days of taking the thalidomide, the above side effects will make their presence known. When they do, I will immediately stop taking 200 mgs and drop to 150 mgs. I have yet to have a conversation with Dr. Norman about what sort of differences for my life expectancy that 50 mg difference could be expected to make. Vicki assured me that the thalidomide capsules were in the GH pharmacy and were ready for me to pick up.

I hung up the phone and thought about how much my personal situation had changed since my previous appointment with Dr. Norman, just a few weeks ago. At that time I felt mostly like my old self. I had no clear idea what multiple myeloma survivors were talking about when Michele was referred to as my "caregiver." I couldn't imagine what changes might be in store for me, even though I'd read the literature. Now I know. Michele sleeps in our marital bed. I sleep nearby in a reclining chair in the same room in front of the gas fireplace. I've tried to sleep in our bed, but when I must get in and out of the bed, the movement triggers back spasms. Those spasms are painful enough that I prefer to sleep in the chair. Nothing else I do in the course of a normal day triggers those spasms. I've eliminated the common, ordinary everyday things I used to do that might trigger the spasms. Just writing those above words, made me think of two of my favorite songs, Going Down Slow sung by Howling Wolf and Things

That I Used Do, sung by Guitar Slim. I'll have to dig those CD's out of the CD storage case and see how much self pity there is in those songs. Listening to the blues helps.

I think tactically and opportunistically now. I remind myself of thinking about Joaquin the way my Aunt Nellie Mae has thought of me. But I am no longer a resource of that sort for Nellie Mae. Now it's no easier for me to take her car to the service station and fill up her tank than it is for her to do so. So, when Joaquin is around, I get him to do the stuff that needs to be done, that I think best I not do. He changed the high light bulb in the light fixture in the mudroom. It was hard for me to change that bulb in the good old days. It's impossible now. I dug up a 5 year bulb for Joaquin to screw into that fixture, so that should do it for a few months. He took down the three hanging plants from the back eaves of the house and tossed them over the fence into our woods. I used to get great pleasure in doing that, but the act would no provoke spasms of pain, so Joaquin is deputized for that task from now on. Joaquin and Allie switched the two matching reclining chairs around in the master bedroom, so that the chair that reclines to a horizontal position is the one closest to the windows, and that's the one I now sleep in. Moving those chairs would have been an act of stupidity for me. Allie now takes out the garbage, and she's in charge of changing the water in the dogs' water dish. All of the above tasks were ones I enjoyed doing. I could lift the dogs' water dish, but when I bend down to replace it, full of water, the back spasm is on the scene. Actually, now that the weather is freezing, the dog dish is full of ice, so I can't even lift it.

Some of the above things are no big deal for me to give up, and put no dent in my self image of being a man, but the end result is much more work for Michele. More work, more responsibility for her. I am in the position of mentioning to her that those things need to be done, because they were my responsibilities, so am very aware whether or not they've been done. So I've ended up in the position of being a nag. I'd rather just do them myself. For instance, right now, as I write these words, Michele is making a fire in our woodstove, an act that's always been mine in the 16 years we've lived in this house. When I crouch in front of the woodstove, that position causes me great pain. When I tried it a few days ago, I lost my balance and fell over, bruising and scraping my right leg and putting torque on my spine. Pain, great pain resulted. Now that task falls to Michele, but I am hovering in the near distance, wanting to gently move her out of the way and take over. She's not doing the task the way I used to do it.

Another aspect of the above changes is the cost. I don't want to continue sleeping in front of the fireplace in the reclining chair. I want to sleep in the marital bed with my beautiful young wife. We plan, if and when the current series of snowstorms abates, to go to the Back Store in Tukwila and look at a Bed Wedge System that might possibly, when installed in our marital bed, allow me to give up sleeping

in the recliner and take back my proper place in bed with my wife. We will also price a reclining chair that will replace the old rocking chair in the family room, so that there will once again be a comfortable place for me to sit there, and to possibly nap there. The rocking chair is the chair that my grandmother nursed my father in back in 1920, and it's the rocking chair that her mother sat in when she was nursed. But it's got to go. Sentimentality must not rule this situation. It'll be stored in the barn, but Joaquin will have to take it out there. I can supervise only. Perhaps we need a new office chair for in front of the computer. I will sit in a few and decide. All of the above will cost lots of money. I feel that the VA should pay for all of the above, but they don't even pay for the chemo, let alone the furniture. When I get the reclining chair, I will see it installed in the family room, and I will listen to both Going Down Slow and Things That I Used to Do and decide how much self pity they contain.

One story I've heard from my mother many times is how much money she and father spent when he was dying of brain cancer twenty-three years ago, mostly to accommodate his pipe dream that he'd survive for a lengthy period of time and need changes made in the double wide trailer that they were living in in Mesa AZ. So a ramp was installed at the front of the dwelling for which improvement the carpenter charged \$1000.00, so that when father died, mother had no husband, no money and unnecessary remodeling of the place she was living. Father never used the ramp. Mother says that she knew it wouldn't be finished in time to be useful, but chose not to tell father that fact. I don't want to do that to Michele. Of course we are more prosperous than my parents were, so we can afford a new reclining chair for the family room. And we can easily afford a ramp to be installed in front, if that's deemed appropriate. Or am I kidding myself? Am I in denial as my father was? I need to call my mother and ask her to refresh my mind about what changes were made to accommodate my father's physical changes due to brain cancer. I am painfully aware of how much I am like my father, every time I get up from a chair. He was exactly the same age as I am when he was dying from brain cancer.

#### **24 December 2008 / 11:00**

I received a call from David at the Seattle VA Hospital Agent Orange Registry. You could have knocked me over with a feather. I was that shocked. David called to reschedule my AO Registry appointment. We decided to reschedule the appointment for 12 January 2009 which is on a Monday. David told me that the AO doctor didn't make it to the VA Hospital on 18 December either. The doctor made it to the Columbia Way exit of I-5, but the police were set up there and refused to let him proceed. He was less than one mile from the VA Hospital. That information made me feel better about missing that appointment. It would have been stupid of me to drive through the ice and snow to try to

get to an appointment with a doctor who wasn't there. Maybe the weather on 12 January will be perfect. Maybe everything will go as smooth as silk on that day. If it does, it will be a first.

Three to four inches of snow fell last night. In the morning for breakfast I ate several slices of cardamom bread thickly spread with butter. Steve P.'s wife had dropped off the bread as a Christmas treat. It reminded me of the bread my Grandma Aspen used to make at holiday time. I think cardamom is a popular spice to use in holiday cooking by Norwegians. Michele drove away today into the snowstorm to QFC to get groceries, and made it back alive and well. I talked on the phone to my old friend Jeremy.

When Joaquin got up, he and I and Michele watched the movie he wanted us to see, *Smoking Aces*. We all enjoyed it. Christmas Eve dinner was cracked Dungeness crab. Michele made a batch of homemade clam chowder to go with it, and of course there was plenty of French bread. After dinner, I sat in the living room and watched the TV weather which warned us that more snow was on the way. After that we all watched *Christmas Story* which is a family tradition. I always hate it when that exotic lamp gets broken. After that was over, Michele worked on more Christmas related stuff, such as the stockings. I wrapped up my presents for the family, including the gold locket that I'd bought for the girls, with the inscriptions on them. The one to Michele said "I will always love you." The one to Allie says, "Good night, Little Woodchuck." And the yin yang box that I got Joaquin has a brass plaque that warns him to "Watch out for those damned speed traps." I also dug up a snakeskin wallet that I bought in Viet Nam, but gave to my father who never used it, so it's brand new, and wrapped it for Joaquin, too.

After that I read *Old Flames* by John Lawton, and went to bed at midnight in my chair in front of the gas fire place. I was up and down all night long. But I did sleep some.

#### **Thursday / 25 December / 2009**

We were up at 8:00 and Michele finished up her Christmas stocking stuff. I wrote a note to Joaquin to put with his snakeskin wallet gift so that he'd know what it all meant. I read more of the Lawton book. Michele toasted me some cardamom bread and I ate it with lots of butter. Michele and Allie made us a waffle breakfast, one of my favorites. Joaquin got up then, and we ate our breakfast and cleaned up the kitchen, and then we moved to the living room to unwrap our presents. That took us an hour or so. Lots of presents to unwrap. Joaquin loved his snakeskin wallet and his yin yang box. The girls loved their lockets. A few tears were shed by all. I called my Mom and my sister Leanne and told them "Merry Christmas." Joaquin ate the hum bows that we'd bought him the day before at The Great

Wall Mall Chinese restaurant. I ate one, too. They were delish. Michele called her mother and wished her a "Merry Christmas."

Later in the day, around 5:00 Michele served us a great dinner of t-bone steaks and baked potatoes with all the trimmings. Also more clam chowder which was still delish. Allie had clam chowder and an English muffin with tuna on it. Michele cleaned up the kitchen, and Joaquin hugged us all, and headed out into the snow to drive back to Ellensburg. He did stop at his grandmother's to wish her a "Merry Christmas." He had to wear a pair of my shoes, the duck shoes, as he'd forgotten to wear shoes over here from Ellensburg. Walking in the snow at his grandmother's out at rural Hobart would have given him mighty cold feet. I read more of the Lawton book, and wound down from the big, emotional day which had gone well. Michele and I watched Dexter, and then Michele folded some clothes from the dryer. I listened to the new Seal Sings Soul CD that was one of my many Christmas presents. Went off to bed. Well, Michele did. I slept nearby in the oak chair in front of our gas fireplace. I am eager to get back to our marital bed, but that could be a long, long time.

### **26 December 2008**

All I want out of life is for everything to go smoothly. Michele and I left for the Tacoma Group Health for our 2:00 appointment with Dr. Norman, my oncologist. We allowed plenty of time because of the snow and ice on the roads. The trip down there was quite painful for me as the road was rough and bumpy with frozen snow. Especially bad were the side roads. We got to the Tacoma Group Health at about 1:30 and reported to the pharmacy to pick up the chemo, specifically the thalidomide. The pharmacy assistant showed us the packet of capsules. Only one small packet. Last time we got a fistful of packets, so this didn't look right. It wasn't right. We looked at the packet and the capsules were all the 200 mg type, the maximum dosage. That dosage allowed for no option for me if and when I got the side effects of numbness and tingling in my extremities and double and blurry vision. Dr. Norman had prescribed 200 mgs of thalidomide, to start, but with the idea that the dosage could be decreased if necessary, which necessitated the capsules being in 50 mg increments.

We asked for the 50 mg capsules. They don't have any. They are on order. When will they arrive? They don't know, maybe tomorrow, maybe Monday or Tuesday. We are alarmed as if they don't arrive until 2009, we will once again be caught in the Medicare donut hole and will have to pay another \$4,000.00 as our part of the cost. Two times in a row. We left the pharmacy, and didn't get the 200 mg capsules. We took the elevator to the third floor and reported to the oncology window. We were told that our appointment was next Friday at 3:00. I was plunged into a fit of depression. Nothing was going

right. I would swear that I was told that today at 2:00 was the appointment with Dr. Norman, but I am terrible at dates and times, so had no real confidence that I didn't screw up. Vicki came out and talked with us about the thalidomide and the dosage. The pharmacy had told her they had the thalidomide we'd be picking up. She called them, and they told her the same stuff they'd told us. What options did we have? None, really. We left. We went to C. I. Shenanigans and ate lunch but it wasn't fun. It's hard to have fun when you are powerless over your destiny. I munched down my Reuben sandwich and clam chowder with little attention to them. I took no notice of what Michele ate, as I was too occupied with my impotence. I never glanced at the view of Vashon Island and the salt water. My funk and my pain took precedence. To enjoy the moment is always smart, but sometimes it's very hard to do so.

All we could do was eat our lunch, and hope that the thalidomide came in before the 1<sup>st</sup> of January. We had no recourse if it didn't. We'd have to dig up the \$4,000.00 and pay the money. As for all the questions we had for Dr. Norman, we'd still have them, and perhaps other, newer questions next Friday. Let's hope there'd be no snowstorm next Friday. I've felt no further twinges of pain in my chest, but knowing that there are nodes in there, and remembering the twinges makes me uneasy, as if my own body is my enemy. Not a good feeling. Maybe the nodes are little knots of dead hope. When I start thinking like that, I know I need to give myself a good shaking and to think more about pastrami and less about how I feel.

## **Part Seven**

### **Monday / 29 December 2008**

I called Dr. Norman's office and talked to Monica, one of Dr. Norman's nurses. Vicki was not available. I asked Monica if she had been called by the pharmacy and told that my prescription for 50 mg capsules of thalidomide had come in. She didn't know. She said she'd call the pharmacy and check and call me back.

She did so. We got a call back from her a few minutes later. She said the pharmacy has the 50 mg capsules on order, but that they had not come in, due to the snow and ice. They expect them any day now. I expressed my dissatisfaction with this situation and Monica in so many words said "What difference does it make. The prescription will come in soon. I got no sense that she had any idea who I was or what my concerns were.

I talked to her about how the previous time we got the prescription of 50 mg capsules of thalidomide that I got caught by the Medicare donut hole and had to pay \$4,000.00 for the thalidomide and that we'd been assured by Dr. Norman and by the pharmacy that the next time that wouldn't

happen, but now it seemed to be happening again. I asked Monica how could it take weeks for the Group Health pharmacy to get the 50 mg capsules in stock. Monica said that Dr. Norman had prescribed the 200 mg capsules for me. I replied that I had made it clear in a conversation with her that I didn't wish to be locked into taking the maximum dosage of 200 mgs of thalidomide daily for the next cycle of chemo, that I wanted the option of reducing the dosage when I got the side effects of numbness, tingling and blurry vision and double vision. Monica seems to know nothing about that. "Dr. Norman prescribed the 200 mg capsules." I handed the telephone to Michele at that point, because I wasn't getting through to Monica.

Michele tried to explain the situation to Monica. Monica said she'd check further and call us later about the 50 mg capsules. She also said I'd probably have to take the thalidomide interview again as I took the interview for the prescription of 200 mg capsules not for the 50 mg capsules.

I was overtaken by the feeling that I was getting nowhere with Dr. Norman or his nurses. It seemed inevitable but unnecessary that I was once again trapped by that donut hole because nobody in Dr. Norman's office was looking out for me.

I asked Michele to call the Bellevue Group Health Oncology Department and make an appointment for me to see Dr. Keith Chen in January, so that I could get a second opinion and also so I could see if he was easier to communicate with than Dr. Norman. Michele did so. The appointment was made for 26 January 2009. Meanwhile I wait to hear from Monica. It seems certain we'll have to come up with another \$4,000, sooner rather than a month later.

We never got a call back from Monica. Not that I expected one. Will we get a call before 1 January 2009 informing us that the 50 mg capsules have arrived in the Tacoma Group Health Pharmacy? I doubt it. I find myself thinking about the multiple myeloma that inhabits my body. It'll soon be a month since I took any thalidomide or 'roids to try to deal with the MM. What is the MM doing in my body right now? Is it on holiday too, waiting for the thalidomide? Or is the MM running amuck in my bones right now, increasing its hold on me? I have no idea nor have I had a conversation with Dr. Norman about this. I must add this to my list of discussion topics to be brought up at next Friday's appointment.

Later, I received an email from Roosevelt Ward, Jr. my Vietnam Veterans of America representative who is trying to get my claim accepted by the VA. "I am praying for him [David] and resume checking on the progress of the claim." Michele responded, thanked Mr. Ward for his prayers and for his help in preparing the disability claim for the VA.

Monday afternoon Michele and I decided to take what action we could. We drove to South Center Mall and visited the "Relax the Back" store. We have no way of making Group Health cough up the 50

mg capsules of thalidomide, and even less chance of making the VA pay for the expensive chemo that my Agent Orange caused MM is being treated with, but we can shop for a chair that will be comfortable for me to sit in and nap in.

The traffic between Maple Valley and Tukwila was brutal, but I decided to do the driving for the first time since I got out of St. Clare's after my spinal surgery. I thought that maybe I could navigate my Ford mini-van around the worst of the chuckholes and frozen lumps of snow. And if I could not do that, I had only myself to blame, and wouldn't snap at Michele who would be doing the best that she could to avoid them. I am the worst passenger in the world, and it's not fair to Michele to subject her to having to be the driver with me in the suicide seat.

Mike Hartgrove, Back Care Consultant, greeted us when we entered the "Relax the Back" Store. Michele and I spent about an hour in the store with Mike. I tried all of the chairs and Michele tried some of them. Mike explained to us what "zero gravity" meant in relation to the PC085 Power PC 8 chair. When the chair was full extended, my body was in the position that the astronauts' bodies naturally fell into when they were at zero gravity when in space.

I was very comfortable in the chair at all the settings. At first I was quite wary and stiff in my approach as I was fearful that a chair might jolt me and precipitate a painful back spasm. That didn't happen. I tried the chair which operated manually, and even though it didn't jerk or jolt me, I opted for the electrically powered chair, as it was smoother yet. Mike had a chair in stock (at one of the other stores) in Aize cashew. It's sort of a brown/grey. I preferred the chocolate brown, but we went ahead and bought the Aize cashew colored chair, as it would take two to three weeks to order the brown chair, and I didn't want to wait. I was already waiting for the 50 mg capsules, the VA claim to be processed and countless other things related to the MM, and I didn't want to add one more thing to that list.

Mike assured us that the chair would be delivered to our house in Maple Valley this week, and he said that the delivery man would be willing and able to move our furniture around the family room to accommodate the new chair. We put the cost of the chair, (\$2,108.17) on our already overloaded Visa card, a Visa card that soon would also have to accept \$4,000.00 because of the cost of the thalidomide. More money spent because of my MM. Why is it that the VA isn't paying at least some of these costs? We'll have to dip into my pension fund to get the money to pay for these costs. We are lucky we have money there to dip into.

Michele and I then drove back home though the heavy traffic and the ice and the snow and took stock of our living room and family room. We decided that the new chair would be installed in the family room. Ideally it would be nice to have one of the chairs in the family room, one in the living room

and one in the master bedroom. That would be about \$6,000.00. The delivery man will have to move our huge heavy hide-a-bed sofa in the family room to another place, so that the new chair can be installed next to the windows and the other light sources for my reading. Also the immigrant chest and a heavy shoe shine stand that I use as a side table will have to be moved. I can't lift or even scoot any of these pieces. My days of heavy lifting are done.

We'll await that call from "Relax the Back." I suspect we'll get the call that the chair is on its way before we hear from Group Health about the thalidomide or from the VA about my disability claim being accepted. I think we can count on that. It's good to have something to count on.

## **Part Eight**

### **Tuesday / 30 December 2008**

I received a letter today from the Department of Veterans Affairs, sent to me at the correct name and correct address. No errors. The letter was sent to remind me that I have an appointment on Monday, January 12, 2009 at 2:00 p.m. at the C & P Peterson Clinic for an Agent Orange exam. The clinic is located in the VA Puget Sound Health Care System, 1660 S. Columbia Way, Seattle WA 98108. I can hardly wait for this exam. I am still hopeful that this exam will in some way get me into the VA system so I can find out about how to get the VA to pay for my chemo.

At 3:00 Michele called the Tacoma Group Health pharmacy to inquire if they had thee 50 mg capsules of thalidomide for us to pick up. After a ten minute wait on hold, Michele was told "yes" the 50 mg capsules were now in stock and they could be picked up tomorrow morning.

Later in the day Judy called from Dr. Norman's office and left a message for us with the same information that Michele had received earlier in the day. Michele decided that she would drive down to Tacoma tomorrow morning and get the thalidomide capsules. She's prepared for things to not go smoothly. We'll see.

### **Wednesday / 31 December 2008**

Michele left at 9:00 to drive down to Tacoma to the Group Health pharmacy to pick up the 50 mg capsules of thalidomide. It's now 10:15. I think she'd have called me by now if anything had gone wrong with her attempt to get the 50 mg capsules. That probably means that I can start my second cycle of chemo after three weeks layoff due to my having to spend a week in St. Clare's Hospital with compressed vertebrae. I can't help but think that the MM has been running amuck in my body during this hiatus. Sometimes when I turn quickly and put my full weight on my left leg, I feel a sharp twinge in

my left knee, a weakness, and I think, Is that knee the next place to collapse? I live in fear that my legs or my spine will let me down and that walking will become a thing of my past. I know that millions of people live long lives without being able to walk, but I can't get my mind around the concept that I could be one of those people. I associate not being able to walk with being at Death's Door.

### **11:00**

Michele got home with the thalidomide. No wrinkles. No problems of any kind at the pharmacy. This bunch of capsules cost us about \$500.00. The next batch will set us back \$4,000.00 unless a miracle transpires and the VA steps up to pay the cost of my chemo. Now I need to call Dr. Norman's office and ask if I must take the 'roids today and the thalidomide tonight. I discussed this with Michele and decided not to call Dr. Norman's office. Tonight I'll take the 150 mgs of thalidomide, and on the seventh day of the thalidomide, I'll take ten of the 'roids, just as I did with the first cycle. Why would this cycle be any different?

### **12:30**

The delivery man from Relax the Back called and said that they were running early and was that okay? I said, Yes. They showed up in a large delivery truck, and once they successfully battled the accumulated snow and ice blocking my driveway, they backed their truck in and unloaded and installed my new \$2,000.00 Zero Gravity chair. I sat in it and was happy. I could feel the stress on my spine decrease. As the operator's manual says, "The neutral position immediately puts your back in the correct resting posture, in which the S-Curve of your spine is properly maintained and virtually all pressure on the lower back is relieved." Every word of that is true.

After I fully tried out my new chair, I drove up to the mailboxes and got the mail. There was a mailer from Group Health which contained a refill of my prescription of pain pills the oxycondone. I'd figured that today those might arrive as I just took my last one at noon.

Three positive things related to my multiple myeloma have happened in one day, and that day happens to be the last day of 2008. Surely these must be signs, signs that 2009 will be a good year for me and for my MM. I've turned a corner and all the things related to me and my MM will start coming home to roost. The 50 mg capsules of thalidomide, the new Zero Gravity chair and the oxycodone. Maybe I am reaching a bit with the third one.

Auguries and harbingers and good news for me. Maybe on Friday, Dr. Norman will tell me good news about my blood work numbers. Perhaps I'll get a letter from the VA informing me that my

disability claim has been approved for 100%. Maybe pigs will fly. I am trying to live one day at a time. I am trying not to think about too many things at once. Today was a good day. Tomorrow might be another one, or it might not. But today was a good day. If I wish to, tonight I can sleep in my new Zero Gravity chair. But first I will take three 50 mg capsules for a total of 150 mgs of thalidomide. I will take one of the new oxycodone tablets tonight as well. I will feel no pain. That's always a good thing.