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We are a plucky band here at WebWhispers. Plucky is kind of a quirky little word. I like its spirit, sort of resilient but with bit more edgy spirit...just like us. It was the word that came to mind as this issue came together.

The UK Head and Neck Cancer Conference in Brighton, England that Dave Kinkead and I attended in November perfectly captured that plucky attitude with the program subtitle “Laughter is the Best Medicine”. I knew it was going to be good when they were showing old Monty Python skits on the big screen as we all milled around and registered before the actual program started. Dave has a great summary and some pics in the Travel with Larys column.

But we have more examples of plucky larys in every other column. Be sure to read VoicePoints. It’s not our standard fare. Shout at Cancer is a unique approach to rehabilitation. Check them out on YouTube and Facebook. Don Renfro and WC Baker also capture that spirit as they write about life as a lary.

Doc Holmberg certainly has shown pluck through out his life as we read more of his wonderfully entertaining memoir. And no December issue would be complete without our dear, late Len Hynds’ Christmas tale of the Cameroon Soldier.

Happy Reading!  

Donna McGary

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Be the Light in Someone’s Darkness

This is the time of year when many of us in parts of the world commemorate Christmas, Hanukkah, something else, or just enjoy the celebration of being with family and friends. Some of us indulge a in a few extra martinis, a little too much egg nog, an extra shot of Scotch, or too many Bloody Marys in our attempt to deal with the aftereffects. Many of us devote a lot of time deciding on and shopping for gifts for the people in our lives. Of course, there are those who spend more time thinking of what they might receive and in telling others what to get them, but that is an entirely different subject. We get caught up in the season, just as the retailers love for us to do. This is their busy season, often comprising as much as 80% of their company’s annual revenue, or more. There are gifts that are actually needed, appropriate for any number of reasons, or just simply a wonderful and fun surprise.

At 62, I still remember some of the surprise gifts I received in childhood that I had not even thought of, and that were fantastic selections for this boy. I’ve even written about some of them. There was the min-bike, the puppy (which I named Sam Clemens because I was into Mark Twain at the time), and of course my 8 track tape player, complete with tapes of my favorite “artists”. (in quotes as my parents did not consider my selections to be art). God forbid I play the music of those long haired, hippy freaks, The Beatles.

Some of the hustle and bustle, though a lot of fun, is insincere and can be little more then people spending money they don’t have on things people don’t want or need an then giving them to people they may not even like very much. There is the obligatory giving. Some of these are accidentally good gifts, some not so great. These are the ones that end up in the Spring yard sale, are hauled off to the Goodwill or Salvation Army donation centers, or
maybe given to the Daughters of the American Whatever. Then there is the re-gifting. I’ve actually watched someone unwrap an item that was obviously re-gifted. It was dusty from being under the bed for a year or two, and still had a clearance price sticker on the bottom. A great idea and a way to win friends and influence people, don’t you agree? Many gifts are easily forgotten, especially the not so good ones.

I’m not knocking holiday gift-giving. We do participate here on a somewhat limited scale and I thoroughly enjoy the house being decorated as a winter wonderland, as long as the thermostat is functioning and I have wood for my beloved fireplace. I have also been known to throw back a glass or two.

Most of the best and more memorable gifts are those not wrapped up in fancy paper with ribbons and bows. They are remembered because they touch someone’s heart while meeting a true need. Many of our patients-survivors live alone or almost and are nowhere near a medical facility that understands larys. They may not even have the privilege of an Speech-Language Pathologist, at all. Along with a caregiver, if in the picture, they feel bruised, worn, and tattered and are often depressed about it. We encounter people online who are obviously dealing with sadness or depression. A unrequested doo-dad, hicky madoodle, or brand new flocka majigger is of little use here. What is needed is someone to reach out and into the lives of people who need us. Doing so most often takes very little time and little or no money, but the gift is meaningful, memorable, and encouraging to those on the receiving end. A card, email, online message or sometimes a brief phone call can do wonders for a bruised soul or a broken heart, and they don’t end up at Goodwill. Let’s reach out to one another.

Live, Laugh, and Learn,

Tom

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**Voice Points**

**Written by Professionals**

Shout at Cancer

Shout at Cancer is the only charity in the world that implements singing, acting and beatboxing techniques in the voice rehabilitation for patients following a laryngectomy. We try to support the patient and family through different psychosocial mediums. We use concerts and other social activities to engage the public and educate on the layered impact of this invasive surgery. The hole in the neck and the change in voice is just the tip of the iceberg.

Surgery affects the quality of life in many different ways. Patients have to overcome changes in smell, taste and swallowing. They also suffer from altered neck movement and difficulties in building up abdominal pressure; both compromise static exercises and the latter complicates the opening of the bowels.

As a junior doctor in ENT and with my experience as a chorister (singer), as my interest in voice pathology grew, I became particularly intrigued by voice problems after laryngectomy and the difficulty these patients face in their emotional expression. I wondered: “Will singing techniques make a difference?”

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Coordinated by Kim Almand M.S., CCC-SLP

kbalmand@gmail.com

Laryngectomy patients have to deal with significant psychological distress. The combination of all previous mentioned factors makes post-operative coping difficult and challenges social reintegration. Patients have to manage the fear and anxiety that comes with the diagnosis of cancer. Then, the change in physical appearance — a hole in the neck — and the change in voice are the most obvious difficulties to cope with. Even though most patients are hoarse preoperatively due to their laryngeal malignancy, the permanent loss of their normal voice has a negative impact on their self-esteem and the effort involved in speech makes communication difficult. It does not come as a surprise that they often fall prey to mental health issues and social isolation (Brown et al, 2010). This further complicates treatment and negatively influences their quality of life. However systematic review has shown that the use of music may improve general health and reduce anxiety, depression and mood disorder (Bradt, 2011).

Both the anatomical change of the airway and stoma breathing have an important impact on respiratory function, a key component in voice production. However, most laryngectomy patients have not only post-operative
but also age- or smoking-related changes in respiratory function. They have to learn how to maximise the use of their limited lung function and how to apply it in their speech.

Music is powerful; it facilitates intrapersonal contact, which is a basic human need. (Harlow, 1958. Steinbeis & Koelsch, 2009). Music appears to play a role in social functioning on different levels and participation in musical activities may have a health-protective role.

Music also has a strong effect in bonding, making inter-individual differences in emotional states more homogenous, and it leads to increased social cohesion of a group (Huron, 2001). From early on in our lives, music is present: for example, it is partly through musical communication in child-parent singing that social ties are created and emotions are regulated (Fitch, 2006).

Singing together demands more concentration and adjustment of the voice to the other auditory inputs around you. Patients are forced to control their breathing and voices even more; they end up more efficient in phonation and intonation. This Shout at Cancer project intends to take it to the next level and aims to get patients socially interactive in a creative way. Getting patients interactive in a choir is a social activity that really boosts their confidence.

It is, therefore, that together with a team of singers, actors and beatboxers I have established the charity Shout at Cancer. We introduce simplified techniques to laryngectomy patients to help improve their speech. The effect of breathing and specialized vocal exercises helps them to explore and control their voice, and combining it with music and poetry has an uplifting effect on their mood.

Our sessions are attended by a group of people sharing similar vocal and health issues: they are participants rather than being labelled as patients. If interested they can join our choir group. Attending rehearsals and sharing the same goal in learning exercises and music is very motivating and supportive. Taking up the challenge to perform together on a stage is a big thrill. We are proud to have performed in prestigious venues (Belgian Embassy in London; Royal College of Surgeons in London; The Barbican as part of the Global Health Film Festival in London; The Victoria and Albert Museum part of the exhibition Opera: Passion, Power and Politics; and at Theatre at The Sea, an international festival in Ostend, Belgium). The choir has enabled us to spread our inspirational message to the laryngectomy community and to a broader audience thanks to numerous coverages on national television in the U.K., Belgium and France, and global news services such as BBC World and The Guardian. As a result, we bring positive attention towards a small and scattered group that had been relatively overlooked in research and our society before.

We also encourage participants to become involved with the rehabilitation of others who are less accomplished in their speech and to create opportunities to perform in art. These activities are not only important to increase awareness and improve public education but also in fundraising for investment in further throat cancer research and to improve voice rehabilitation and social reintegration after laryngectomy. It is a unique project where members can take part in the care of others, whilst they are still improving and maintaining their own communication techniques. Voice training also becomes an important free-time activity. At the same time, participants contribute to research, the outcome of which ultimately affects them directly.

Dr Thomas Moors MD DOHNS

Dr Thomas Moors is a junior doctor in otorhinolaryngology (Ear, Nose and Throat or ENT) with a special interest in voice pathology. Driven by his passion for music, he has gathered a team of opera singers, actors, speech therapists and laryngectomy patients. Together they incorporate music, acting and art into post-laryngectomy rehabilitation and social reintegration.

Complete references provided upon request.

Exciting things to come:

Bill Brummel is a Peabody award-winning and 5 times Emmy nominated movie director who had a laryngectomy. He has produced the film “Segue” that will be released in a few months. The documentary tells the inspirational story of the laryngectomy choir and its members, how they use music and friendship to find a new balance in life after the operation.

In 2020 we are participating in the verbatim opera “A sound Voice” with composer Hannah Conway and Writer Hazel Gould at the Snape Maltings Festival. We will take part in an adapted version of Beethoven’s “Fidelio” with Rosetta Life at the Garsington Opera and we will be at the Bloomsbury Theatre with The Peter Edwards Trio for “Outspoken Jazz: Still Growing” funded by University College London (UCL) Culture and Atos Medical.

Email info@shoutatcancer.org. Visit www.shoutatcancer.org. Follow us: Facebook and Twitter: @ShoutATCancerU
Brighton Conference
By David Kinkead

I had the opportunity in early November 2019 to attend a head and neck cancer conference in Brighton, England. The conference was conducted by The Swallows, a head and neck cancer support group that offers support for all head and neck cancer patients, survivors, and their caregivers in the UK. The Swallows started in 2010 as a small group of patients meeting to discuss how they were dealing with any issues and to share stories. In early 2011 the group achieved full charity status. The stated purpose of the charity is “Supporting patients both locally and nationally, and now internationally”. The name “The Swallows” was chosen because many head and neck cancer patients have problems swallowing during and after treatments. As a patient and caregiver group for those affected by head and neck cancer, they offer 24/7 support for caregivers and patients. The charity is run by patients, caregivers, family and friends so everyone understands the issues we are dealing with.

The opening day of the conference was geared toward the health care professional and was attended by around 200 people. There were patients, SLP, Doctors, along with several patients and caregivers. The conference started with a humorous look at the city of Brighton. Brighton is located on the shore of the English Channel in the south of England about 70 miles south of London. It is a town of around 400,000, so a fairly large town. The conference was held at a beach front hotel but it was a little chilly to enjoy the beach. The biggest tourist attraction in Brighton is called the Royal Pavilion. It is an over the top “castle” built by George the IV in 1823 as a getaway place to indulge in his tastes in art, music, and dining. While taking a tour of this palace, it was fun to see the decadence with which it was decorated. Along with the grounds being so beautiful it reminded me a little of the mansions in Newport RI, or the Hearst Castle in California.

The speakers on the first day included dentists, surgeons, survivors, oncologists, and radiation therapists. I will not spend a lot of time on what everyone talked about and names are not real important, but let me say I was impressed with the lineup of speakers. There were speakers from all over the world. To list a few obviously the UK, the US, Czechoslovakia, Romania, India, and Scotland. The topics included: early detection of H&N cancer, restoring form and function in surgery, new surgical techniques in reconstruction, Survivorship, role of caregiver, multi-disciplinary team, proton therapy, carry on smiling (dental care), and two very inspiring talks from survivors of mouth cancer and larynx cancer.

Some of the interesting thing I heard were:

- Survivor isn’t just a title, it’s an attitude
- Focus on what we have, not on what we lost
- Cancer is not a character flaw
- When there is hope you can persevere
- Cancer is a family affair
- It’s not about the length of your life, it’s the breadth of your life
- When I is replaced by WE, Illness becomes Wellness

One of the overriding themes was early detection. If something doesn’t seem right get it checked out. Do not let your doctor send you home and tell you to watch for changes. They are the professional and we should not have to do self-diagnosis. Another thing I noticed is that the Swallows spend a lot of time on caregivers which I believe is lacking in the US. They have a 24/7 hotline and all support group meetings include caregivers. There are also several caregiver only meetings held monthly in the country. Granted they are a relative small country and can have fewer meeting to reach a lot of people. There have been semiannual focus groups with caregivers to learn what they need. They try to get down to the specifics of each cancer, especially the more common types.

One doctor from the US talked about a care center in Massachusetts that uses a multi-disciplinary approach to cancer care. All professionals from doctors to oncologists and social workers to radiation people. I am very familiar to this approach since the hospital where I had my original surgery worked the same way. I had meetings with all professional involved every two weeks for two months before my surgery and every week after surgery for two months. I realize this is used in a lot of places, however in the UK you must meet with your GP then got to another
I’m sure some of you went through this in your treatment. This talk was well received in the UK. All of the presenters talked about the HPV virus. The UK just recently approved the HPV vaccine to be given to all children in their 13th or 14th year. I think it is getting more play in the US.

The second day of the conference was geared toward the patients and survivors. There was over 60 people attending this day. A lot of the speakers were the same but they made their talks more for the patient. By that I mean there was less gory pictures of the operations and easier to understand talks. The day started off with a live link to Australia. The doctor is a cancer survivor and his main message was again early detection. If it doesn’t feel right, have it checked out. He talked a lot about the HPV virus. Australia like the UK has recently made the vaccine available at no extra cost through their National Health System. He told us that over 90% of the young people between the ages of 12 and 16 are vaccinated. The last figures I saw for the US was less than 50%. We heard about some of the exciting research Australia is doing in the fields of immuno-therapy drugs, skin cancer especially that caused by radiation of the head and neck area, and mask free radiation.

One general theme of this patient day was doctor patient conversations. A lot of the speakers realize this could be an issue with a lot of their patients. The consensus is that sometimes doctors will not give the whole truth. Either because they are worried about unduly alarming the patient or their family or they are not sure how to approach the subject. I have not seen this from any of my health care professionals but a lot doctors, at least the one who spoke at the conference feel this is a problem. They realize how important complete information is and are striving to get better.

One big thing The Swallows do is work with the caregivers. Their mantra is that the caregivers are the unseen heroes. They did a survey of caregivers (they say Carers) in the UK and had several hundred responses. The survey showed that the carers had a life changing experience just as the patient had. Carers highlighted the need for support at the point they need it which is both before and after treatment. They want understanding, someone to listen, support groups, mass communication, and mask free radiation.

I had the opportunity to attend a rehearsal of the Shout at Cancer group. This group was started by an ENT with a background in music. Shout at cancer is the only charity in the world that uses singing and acting techniques in voice rehabilitation of laryngectomees. Thomas Moors, the founder, says “I became intrigued by voice problems after laryngectomy and the difficulties these patients face in their emotional expression. I wondered if singing would make a difference.” This group was amazing and a lot of fun. They do shows all over the UK and even have traveled abroad.

Now I’ll talk about a little of the fun part of the trip. I had a chance to take a tour out of Brighton to the White Cliffs in southern England. They are fascinating. We spent a lot of time just marveling at them. That trip also included a tour of South Downs, a range of chalk hills across the coastal counties of southern England. Brighton was a great town. I spent most of my time there by the beach. The shore area is just like any beach area in the US. There is a pier with food and games, a nice walking esplanade, and a very wide beach. The unusual thing is the beach is not sand but pebbles. I never got a good answer why. After the conference I spent three days in London. We went to a play in the West End which is London’s Broadway and took a HOHO bus all over the city to see sights such as London Bridge, Tower of London, Buckingham Palace, St. Paul’s Cathedral and others. The highlight of the trip was tour to Windsor Castle, Stonehenge, the unique town of Bath and finishing with a traditional English dinner in a 15th century tavern. Over all the trip was great. I learned a lot I can bring back to the clubs in the US and the IAL to improve the things we can do for the laryngectomee community. I also had the chance to sightsee around England and see some of the things I have only heard about and wondered if I would ever see. I am planning a trip to Dallas to the Texas Laryngectomee Association Conference in January 2020 to talk up the IAL and our conference in 2020 and also to pick up more ideas to help the laryngectomee community.
It is Never Too Late
By Don Renfro

“It is never too late to be what you might have been” George Eliot. I once rolled my truck down an embankment. It rolled over several times and while it was rolling I came to believe I was going to die. I had always heard that when death is imminent that your life passes in front of your eyes. In those moments I waited for death and for everything to go dark, my life did not pass before my eyes. Instead I thought of all the things I would not do now that my life was over.

Well that was then and certainly my life did not end at that time. When I had my laryngectomy I had a similar experience. I felt that because I had a laryngectomy that there were now all these things that I had not done up to now, that I would never be able to do.

The reality is that after having a laryngectomy I now have the opportunity to do things I never dreamed possible of doing.

I have fought my weight most my adult life. After my laryngectomy, radiation and chemo I lost about 90 pounds and now just work to maintain a healthy weight. Instead of losing 2 pounds and gaining 5 pounds, I now just eat what I want sensibly, to not gain weight. It is so much easier.

I worked for the state of California for over twenty years. One of the benefits was the great retirement plan for state employees. Retirement planning started early in my employment so it truly felt that for me, it would never get here. I always dreamed about retiring early, before age 65, but did not see how that would be possible due to the fact that I would rely on social security as well as my pension to support myself in retirement and I would not be able to begin to draw my social security before age 62 and then at a reduced rate. After my laryngectomy my leave credits ran out from my job after about 6 months and I decided to retire as I could not see myself returning to work anytime soon. Utilizing my voice was an essential function of my job. As it turned out I was eligible for SSDI which was a higher award than if I was claiming my social security two years later and with my pension and SSDI I would make more now than when I was working. Because of my laryngectomy I am able to realize my dream of an early retirement.

Because I struggled with my weight, I have tried to maintain some sort of exercise routine in my life. I like to ride my bicycle, about 35 miles per week. It was so hard trying to come home after working all day and go on my workout. So many times I would not go and then feel bad about missing my workout. Now in retirement I am able to have the time to enjoy my ride and complete my workout routine.

I have lived alone since 2007. One of the difficulties I was faced with almost immediately was not having someone here sharing in the duties of running the house. I took for granted the things my wife had done in the house not realizing that those chores freed me up to get done the things I do for the household. I found that there were many chores to be done for the household that were real challenges to complete while working full-time. Not to mention the 2 hour commute per day. I found myself constantly behind in the things I needed to accomplish. Now in retirement I finally have the time I need to accomplish the things necessary for my household. For the first time, in as long as I can remember, I am caught up with my chores and able to enjoy time without the nagging pressure of worrying about what I “should” be doing. As a result of my laryngectomy I now have the time to invest in my life and not have an outside obligation monopolizing most of my time.

With my new found additional hours in each of my days, I am able to utilize weekdays to experience enjoyable activities that I could only experience on weekends, while I was working. Since most people work, activities on the weekend are usually very crowded. Being able to attend during the week, while others are working, provides for a less stressful experience. I feel that I am now living life as the person I have always wanted to be.

I have met people and become involved with organizations that without a laryngectomy I would never have had the opportunity to experience.

I have always enjoyed writing and have dreamed of writing at different times in my life. I had thought of writing a book, or a play, or maybe a movie. When I heard Donna share at the IAL Meeting (which I would never had attended without my having a laryngectomy) they were looking for people to submit articles for the newsletter, once again I was provided with the opportunity to live my life as the person I had wanted to be.
I am not suggesting that having a laryngectomy is the answer to how to live a great life. There are many challenges I have faced as a result of having a laryngectomy. In this article I am taking a look at the “flip-side of the coin”. To see some of the positive aspects experienced with my laryngectomy, that have allowed me to be the person I have wanted to be, even though that at times in my life, I felt I would not be able to become that person.

I do not wake up grateful that I have had a laryngectomy, but I do spend much of my time grateful for my experience I have had since my laryngectomy.

The women in the group had to wear body-covering chadors and men had to cover bare arms. The tomb of Imam Reza – the 8th of 11 great Imams (descendants of the prophet, who ruled the Shiite equivalent of Sunni Caliphs) is off limits for non-Muslims. His shrine is the foremost pilgrimage site in Iran.

To get from Mashad in the northeast of the country, to Shiraz in the Southwest, we had to take a 5:00 am flight to Tehran, and then take a 5:30 pm flight on to Shiraz. This gave us enough time in Tehran to visit the National Museum. Our bus driver skillfully fought his way through the traffic which has a character all its own. My second piece of advice for Americans visiting Tehran: Do not attempt to drive. Any semblance of traffic norms with which we might be familiar, is non-existent. They may appear to be crazy drivers, but they must really know what they are doing to make their “system” work. There are few traffic lights and most of those are blinking red or yellow. There seems to be a weft and warp to weaving of fabric of traffic, both in and out of intersections. Although I don’t know why they would want to, women are permitted to drive, and do so quite skillfully. Unskillful drivers are probably weeded out pretty quickly. If you cross the street, take some time to study how the natives do it. You will be joining the fray of what might be a game of challenge and daring. If you survive the first few ventures, you may lose some of the fear that you had, but don’t be over confident.

An occasional emotional reaction for me is to choke up to the extent that I am unable to speak. The national museum was one such occasion. The excitement began as I saw marvelously well preserved and superbly crafted and painted cups, bowls and footed vessels and ornaments from the 6th millennium B.C.E., several millennia before the pyramids. My excitement grew through the bronze age and peaked to the

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Mitra escaped the Shah’s oppression of the Bahia in Iran, and now sells real estate in San Rafael. A couple of decades after her escape, she brought her father, Javad, to a summer gathering of laryngectomees at my home in San Rafael. Javad, a TEP user, was visiting the U.S on a medical visa to see Dr. Singer in San Francisco. When I had an opportunity to visit Iran four years later, I began an odyssey that included nine countries over three separate trips in eight years. Americans could travel to Iran only if they were with a tour. I signed up for a tour that started in Tashkent, Uzbekistan and ended in Tehran, Iran one month later. The apprehensions that we held upon entering Iran from Turkmenistan were mitigated by the soldier at the border. He set the standard for his countrymen with a wide smile and a warm “welcome to Iran”. From little children to gray bearded men and chadored women, everyone was wonderfully warm and welcoming. My advice to Americans thinking of visiting Iran; divorce your thinking as far as possible from the political situation and open yourself to enjoying these sincerely friendly people.

Our first stop on the trip to Mashad was at the tomb of Hakim Ferdowsi, one of the most honored of the Persian poets. Our local guide, in stentorian tones, recited a few lines from Ferdowsi’s 60,000 line epic poem Shahnameh ("Book of Kings"), reputed to be the world’s longest poem.

In Mashad we had time only for a quick Friday nighttime visit to the Haram E. Razavi dazzling shrine and the city within a city, with minarets and domes of blue and gold separated by vast, fountain cooled courtyards crowded with worshipers at Friday services.
aforementioned speechlessness on seeing the massive pieces from Persepolis. Most imposing is a section of wall with a seated Xerxes backed by his son Darius, attended by Zoroastrian priests and guards, while foreign dignitaries approached from the front.

We had time to visit the Tehran bazaar, a place that reflects what we usually take as the meaning of the word “Bazaar”. It is 25 square kilometers of labyrinthine alleys packed with people and shops selling everything Islamically legal. Large push carts work their way, the crowds opening for them and closing behind them. Then there are the 150cc motorcycles delivering huge loads from storage areas to shops throughout the maze. Often the loads were so large they pushed the driver off the seat, onto the gas tank, reaching back to grasp the handlebars. We tourist, we sometimes silly tourists, strode into the mob and quickly got lost. It is said that mapping the bazaar has been beyond the capabilities of mere mortal cartographers. I took a photo of the entrance we had used to enter, and used it to get directions to get us out in time for our flight to Shiraz.

Gold Fever

Before I leave my tales of being stationed in Fairbanks, I want to tell about flying over the country around it and how I’d thought I’d struck it rich seeing a layer of gold covering the bottom of a stream bed. Then I’ll tell how I had another case of gold fever.

Another buddy of mine at the hospital named Hank took flying lessons at the local airport during our tour of duty there. When he finally got his pilot’s license I told him I’d go flying with him and I’d pay for the gas which was very pricey in Fairbanks. He took me out three times and each time we saw a magnificent panorama of moose and bear as we flew for miles over the surrounding country. There were little landing strips everywhere and we’d land and take off on some of them so he could practice his skills. On our third flight we’d gone farther out than we’d ever been and ran into some unexpected weather. The wings began icing up which was something Hank hadn’t experienced before. He said we needed to head back to Fairbanks and nervously watched instrument panel with what was obviously a growing concern. He didn’t say anything and I didn’t bug him because he was as nervous as a flea on a hot skillet.

He was sweating when we landed and later told me why. There was only about a minutes worth of fuel left in the tank. When the wings iced up, it made the plane heavier and sucked up a lot of fuel and the needle on fuel gauge plummeted. He was scared to death we wouldn’t make it back to Fairbanks.

I definitely get the feeling I have a guardian angel, or a bunch of them, looking out for me. There’s no doubt in mind I live in a world, a universe, designed by infinite intelligence. I call that intelligence God, but over the years I’ve come to realize my conception of God is totally unique to who I am, and what I believe. There are no two people on earth who have the same conception of God, or whatever deity they believe in. It’s not possible because every life is unique to the person living it and only they know who their God, or deity, is if they believe there is one.

Now let me tell you about the two events that took me into the fantasy world of thinking I might become as rich as old King Midas. The first happened when I was selected to be one of two medics awarded the opportunity work at the officers retreat at a good sized lake near Fairbanks. It was a resort area that was used for the officers and their families who were stationed at the air force bases in and around Fairbanks.

I spent a week there with another medic. We each worked around the clock shifts which gave us twenty-four hours off the day after our shift. We could sleep during our shift which made it a doubly plush assignment because there was little for us to do. The only thing we were there for
was to take care of minor scrapes and bruises and pass out medications for headaches, upset stomachs and other minor ailments. We’d call for an ambulance if anything serious developed.

During the times I had 24 hours to myself I’d grab my camera and take one of the many outboards they had there and cruise around taking pictures of Moose as they fed in the lake. It was fantastic to see a huge bull plunge his head, horns and all, underwater and come up with a mouthful of plant life that had been growing on the bottom. The stuff would be hanging off their horns too. There were huge Alaska Brown bears always hanging around the camp dump too. I took my trusty camera to the dump one evening to take pictures of them, being the naive knot head I can sometimes be. I could hear them before I could see them and knew I didn’t want to be seen by them. I snuck up behind the huge mound of dirt that had been pushed up to make the garbage pit and cautiously poked my head around one end of it.

There was a huge female and two cubs rooting through a fresh batch of garbage that’d been dumped earlier and I saw the female swing her head in my direction sniffing the air. That was enough for me, I totally forgot about taking pictures and high tailed it back to camp as fast as my legs could carry me. I’m sure I had flashbacks of my episode on White Pass, and that added to the speed of my retreat.

One evening when I was out cruising the lake I passed the mouth of a stream and caught the flash of something on the bottom. The sun was at just the right angle to reflect off of whatever was there. I swung the boat around and very slowly passed the mouth of the stream again and nearly fell overboard. The bottom of the small shallow stream was covered with gold.

There was dense vegetation growing into the lake from the lakeshore and I couldn’t find a place to land the boat so I could wade into the stream. I didn’t have anything to get the gold with anyway and was sure I’d have to have a gold pan, or something like it, to get the gold. There was absolutely no question in my mind I’d found gold.

I was across the lake from the officer’s retreat so I kicked the outboard into high gear and headed back to the dining hall. As far as I knew there weren’t any gold pans at the retreat but I thought a pie tin would work and that’s what I was going after. Besides I didn’t want to alert any one to the fact I’d found gold.

While I was crossing the lake I just knew I was going to be filthy rich. In my imagination I was buying a mansion, a Rolls Royce, a yacht, you name it I was going to have it. Talk about gold fever.

As medics, we pretty much had the run of the retreat and could poke around the kitchen for snacks whenever we wanted. I waited for a chance to grab a pie tin without being seen and when I got it I headed back to the boat.

The trip back to the river of gold, that’s what it had turned into in my mind, took forever. When I finally got the boat in as far as I could to where the mouth of the stream was, I tied it to some vegetation and jumped overboard believing I’d be standing knee deep in water. I wound up in water up to my chest and cursed myself for being stupid enough not check to see how deep it was before I jumped in. The shock was only momentary though because the sun was reflecting off the gold on the bottom of the stream.

I waded in and bent to fill the pie tin with gold. All I got were glittering flakes of gold floating everywhere. As soon as I disturbed what was laying on the bottom, it turned into one of those fluid filled balls with Christmas scenes that you shake and the snowflakes float all around until they finally settle on the bottom again.

All there was on the bottom of the stream were flakes of iron pyrite, what they call fool’s gold. It’d sure made a fool out of me. I was one, very wet, very heartsick kid heading back across the lake that evening. When I got back to the kitchen an old cook took a look at me holding the pie tin and asked if I’d found the creek of gold. I asked him how he knew. He told me I wasn’t the first one to come back to camp soaking wet in the years he’d been there. He’s how I found out it was iron pyrite on the bottom of that stream.
The onset of these darker evenings, and the thoughts of Christmas which is now only a few weeks away, remind me of those halcyon days of childhood which are so strong in my memory. I was seven and could only dream of wonderful presents. I knew that mum and dad could not afford what I so dearly wanted, that wooden fort in the toyshop window. For two years I had stood outside, just gazing at it, and those marvellous Scots soldiers in their kilts, red coats and white helmets lining the ramparts. The youngest of seven children, with very little money coming into the household, you soon realise that your own personal wants are not even mentioned, so I never told anyone of my heart’s desire.

Let me convey you to our darkened bedroom on the evening of that Christmas Day. My two brothers were asleep. I lay between them in our large bed, and being the youngest, I had to sleep at the opposite end between their feet. Charlie was always on my left, and with him being shorter than Alf, I could get a clear vision over the top of his covered feet, so I always slept on my left side. What a day it had been. I loved Christmas; it was always so exciting. And this had been one of the most thrilling days of my life, and as it was drawing to a close, we had been sent to bed.

I lay there, looking over Charlie’s covered feet, at the faint glow at the window which was coming from the gas lamp outside. Even Jack Frost knew it was Christmas. He had made his own decorations on the inside of the glass window panes, as our breath froze into the most wonderful shapes. They were like sparkling diamonds, and I wondered what part of that pattern was my own frozen breath, and if it was forming those intricate close knit patterns because we were brothers.

Before falling asleep, Charlie had blown out our candle, but I could still see my present in the faint glow from the window. It was the wooden fort, with its ramparts lined with those Scottish soldiers. I could not believe it when I had been given it earlier that day. I used to stand outside that toyshop for such long periods just gazing in, that nearby stall holders, wearing mistletoe in their woollen hats, and faces glowing from their acetylene lamps, would nudge each other, and say to me, “You’ll get it if you’re a good boy”.

Well I was good, or so I thought, but would miserably say to myself, ‘I can’t even tell them what I want.’ The man from the toy shop came out and spoke to me on a few occasions, and I asked him what regiment it was, and after peering in, he said, “Why, they’re the Camerons, a Scottish Regiment and they’re fighting in a country called Afghanistan right now.”

My sister Kit had read us several stories written by a man called Kipling, and one story was about those Afghans sweeping down the Khyber Pass to ravage and ransack India, and they had been doing this for hundreds of years. As he spoke, I was with that regiment marching up the pass, kilts swirling, bagpipes playing, returning the fire from the mountainsides.

When Dad had carried that fort into the parlour with the soldiers lining the walls, I could not believe my eyes. They were the Camerons. I was so filled with emotion that I felt tears coming into my eyes, but brushed them away, knowing that boys don’t cry like girls, but wondered how on earth did they know what I had wanted. Mum said, “The shopkeeper told us what you wanted, and how you had been so good for business just gazing in. He sent you these as a present.” She produced another box with a further 12 Camerons inside.
Dad said, “There was this one who had a leg broken in the shop, and was going to be thrown away. I told the shopkeeper that you might like him.” As I took this one, the one with the leg missing, I realised that here was a hero. He had lost his leg fighting those Afghans. I looked at my fort in the faint light and there he was, in a position of honour standing to attention in the uppermost tower.

British troops are still fighting those Afghans all these years later, and now they have their American colleagues with greater fire power to stand beside them.

It was the following summer, the exact circumstances elude me, but during a visit to our home by some relation, I was given a whole sixpence to spend, and I went to the market to buy something I had long coveted. As I crossed the road to enter the market, I saw a man sitting on the pavement with his back resting against the wall. A crutch leant against the wall beside him.

The poor man only had one leg, which was stretched out in front of him, and beside it a soldier’s Glengarry cap which had a few coins in it. The poor man was begging.

As I was passing, he picked up the cap to take out the few coins, and I saw the most beautiful silver badge on it. I read the word Camerons. I put my sixpence in his cap.