

Three-Year-Old Swallows Acid Pipeline Cleaner Retains Smile, Voice, Life In Amazing Recovery

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behavior had concerned the family.

"The nurses said they thought she felt she was being punished because she'd been bad," relates grandmother Barb. "You could see that sort of scared look in her eyes at first." The family and medical staff made special efforts to reassure Rebecca that she was not being punished.

By the end of her first weekend back home, Rebecca was unable to keep any food in her stomach. Tuesday, November 24, two days before Thanksgiving, she was readmitted to Hershey. Still unable to keep any nutrients in her system, doctors put her on intravenous feedings and continued to run numerous tests and another throat scope to examine the esophagus and stomach damage.

"They did minor procedures to see if major surgery could be avoided," says Lona.

On the Friday following Thanksgiving, a "broviac" tube was inserted to allow feedings to the little girl who was unable to eat and losing weight. Another throat scope on December 1 showed that the opening of Rebecca's stomach had closed to the intestine; vomiting remained a continuing problem due to the liquids manufactured by her throat and stomach.

Though she had been a wonderfully cooperative patient, Rebecca finally became a little "grumpy," Lona remembers, at the tube doctors then inserted through her nose to her stomach, to drain off the liquids. It remained there for a week, when another throat scope was scheduled.

"They told me she might be okay, they might be able to dilate her esophagus if it wasn't too bad, or she might need feeding tubes surgically inserted," says Lona. The prognosis was not favorable; Rebecca was taken to surgery on December 8.

When she next saw Rebecca, the little girl was back in ICU, with a six-inch incision, numerous tubes and monitor wires, and oxygen. Again, Rebecca made rapid improvement.

Within a week, only three tubes remained attached to her body, those to the stomach and the intestine, and the broviac, which would remain for feedings and antibiotics. Lona was instructed how to operate the feeding pump to which Rebecca would be attached 12 hours nightly plus two each after-

noon, and on the changing and cleaning of the dressings.

On December 17, Rebecca celebrated with a strawberry lollipop. And, three days before Christmas, she was allowed to go home, although she remained on a clear liquid, very limited, diet. Her ordeal, however, was far from over. She had to return weekly for dilation of her esophagus; if dilation failed, more surgery would follow.

Lona's January 27 trip with Rebecca to the Center did not start out well.

"I had a flat tire on the way; a state trooper changed it for me," she relates. "Then, we waited four hours because the doctor was in emergency surgery. I knew what they were going to say about Rebecca before they said it."

Although the lining was beginning to regrow in Rebecca's stomach, the severely damaged tissue in her esophagus and the area of her stomach attached to the small intestine would need to be removed, to prevent likely development of cancer. Once again, this undaunted, three-year-old cheerfully packed a few special toys for yet another hospital stay.

"They had put her back on a liquid diet; but she got upset with me because I threw away a pickle I took out of a sandwich. She wanted me to save it for her when she could eat," Lona recalls with a grin.

While waiting for the February 3 esophagus-replacement surgery, Lona and Rebecca received special visitors. Michael Stuber, 2-1/2 year-old from Shaffertown, was Hershey's first esophagus replacement patient. He and his mother, Gretta, spent most of a day with Lona and Rebecca.

Michael had swallowed a diluted solution of Red Devil Lye, but hadn't been diagnosed until six hours later. Several months passed until partial esophagus replacement surgery was attempted.

"It was so nice to have someone like that, someone else who had gone through a similar thing, to talk to, to answer questions," Lona says. "It really helped a lot."

After a sleepless night for Lona, Rebecca was taken to surgery at 9 a.m. In a 14-hour-long operation, doctors removed her esophagus and a quarter of her stomach, replacing the esophagus with a section of her colon. Waiting through the duration with Lona was her friend, Troy Wilson; at 1:30 the following morning, Lona

was allowed to visit her daughter in intensive care.

Again, more than 20 tubes and monitoring devices were attached to her body. With a badly-swelled face and a breathing tube, she was unable to talk. Doctors had warned that it was possible damage could occur to her vocal cords through the surgery, an immediate concern for Lona that later proved unfounded.

Through that weekend, she remained in considerable pain; medication seemed to be adding to her discomfort and disorientation. At Lona's request, the morphine Rebecca was on was reduced and Tylenol added. By Monday she was much better and her improvement continued rapidly through the week.

Ten days after her esophagus replacement, Rebecca was given an ounce of juice every hour. The next day, Valentine's Day, she was put on a clear liquid diet. Satisfied with her progress, Rebecca's doctor told her she could have anything to eat she wanted.

"Out of an assortment of things like cookies, crackers, chips, doughnuts, she picked out cheese and crackers," Lona remembers.

On February 17, Rebecca was discharged. A plastic "button" opening had been inserted in place of the plastic tube, allowing for nighttime pump feedings to continue for another month. It will remain inserted indefinitely as a precaution, should problems develop in the future requiring interal feedings. Monthly visits to Hershey are likely to continue as long as the button remains inserted, and to check her weight. A barium-swallow test is scheduled in August to check the healing and progress Rebecca makes.

"The doctors are amazed at how well she has healed," says Lona of her daughter's miraculous recovery. "She really likes fruit, though tough membranes like those in oranges, and seed must be removed. Anything with shells and meats she has to chew for a long time."

"Her prognosis is fairly good," emphasizes Dr. Dillon. "The colon tissue doesn't function quite like an esophagus would, but there is no reason why she can't live a fulfilling life."

The operation is not particularly difficult, notes Dr. Dillon, but it is long; and it involves a "pretty good rearrangement" of the body's physiology. Helping Dr. Dillon with Rebecca's surgery

was Dr. Robert Cilley; the two surgeons practice in a partnership with a third physician, Dr. Tom Krummel, and have performed three or four esophagus replacements through their careers, two since practicing at Hershey.

"We don't like to have to do this, because obviously it's a severe injury," stresses Dr. Dillon. "Kids are the most likely to have this happen because of their ingestion of such substances."

On Sunday, June 6, Rebecca will appear on the Children's Miracle Network Telethon carried on Channel 8 WGAL-TV. Her appearance is scheduled for about 8:40 a.m. on this telethon fundraiser event, to be broadcast from Hershey Park, to benefit the Penn State Children's Hospital.

"A lot of prayers went up for her," says grandmother Barb Taylor. "To God be the glory for her miraculous healing." And, to the numerous area churches which included Rebecca in their service prayers and prayer circles, the family expresses deep appreciation for such caring community support.

"I've learned I can handle a lot more than I ever thought I would be able to," relates Lona of the challenge of learning to change, clean and attach Rebecca's tubes and incision dressings. "And I've tried to look on the good side as much as possible and try not to be so hard on myself."

Though Rebecca has no restrictions on her physical activities — even swimming is allowed — the button does pop once in awhile. On one such occasion, caregivers at the Dallastown High School student child care classes she attends nearly panicked, while Rebecca matter-of-factly told them what happened and what to do.

"So while some parents stock diaper bags for their children,

Rebecca has a medical supply bag that goes with her," adds Lona.

Far more knowledgeable of medical terms and procedures than many adults after her extended hospital stays, Rebecca does not seem to have been emotionally traumatized by her life-threatening experience.

"They tell the kids everything they're doing and have dolls in the playroom where the children can pretend to give IV's, change dressings, check blood pressure and use stethoscopes. They tell parents to just listen to their children while they're playing," Lona relates in praise of the Hershey Medical Center staff. "Rebecca does surgery on her dolls and changes their dressings using supplies we brought home with her. I've overheard her tell her doll that 'It's okay, mommy's out in the waiting room.'"

Due to the newness of the esophagus replacement surgery, Lona and her friend Gretta Stuber are interested in helping to form a support group for parents facing such a crisis with their child.

"You have personal, little problems, questions, concerns, experiences that another parent can share, but that a doctor wouldn't know," she explains. "It went two months before I really had anyone to talk with who had personally gone through this."

Lona willingly shares the story of the health crisis faced by Rebecca in order to remind other farm families of the danger present everyday from hazardous chemicals commonly used in dairy houses for milk equipment cleaning.

"Make sure that all solutions are out of reach!" she vehemently stresses. "And never put them in any kind of a cup that might be used for drinking."



Hilary, a Holstein heifer, is a favorite pet of Rebecca's.



Drawing and coloring was one way for Rebecca to pass time during her hospital stays after taking a swallow of dairy pipeline acid last November.



Three generations enjoy working with cattle and calves at the Taylor farm; from right are Rebecca Watkins and her mother Lona, and grandmother Barbara Taylor, left.