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Voyage to the Center of My Gut

Over the years any number of my friends and colleagues, each with his own reason of course, has earnestly informed me that I have my head squarely up my ass. This week I had the chance to experience this juxtaposition of *Caput* and *Rectum*, not literally but through the medium of modern electronic technology.

After years of nagging from my doctor, who pointed out repeatedly the need for colon cancer prophylaxis, I dragged myself to the Palo Alto Surgecenter for a full-blown colonoscopy. It is always comforting to find yourself in the hands of competent, self-assured, experienced surgical professionals. If they don't cross the line into Nurse Ratchet-ism, the people who tell you what to do in this sort of medical setting can banish all fears of catastrophe, despite the boiler-plate language the hospital lawyers make you sign.

Theresa, the four-foot eight nurse who escorted me into the preparation area, was cheerful and friendly, but all business. She went through all the preliminaries, then introduced me to Angela, the nurse who would be handling my personal welfare during the "procedure". Nurses like Angela have seen and heard it all, dealt with every kind of patient, and learned to be assertive without becoming unpleasant. "Will there be an anesthetist?" I asked. "I'll be handling your sedation," she bristled, while setting her body in a somewhat defensive posture, "Do you have any questions?" Since she was standing over my supine body, and I was bare-ass in a backless gown while she was clad in workmanlike green surgical garb, I decided to be diplomatic. I explained that I was immune to morphine. Could I please have Demerol? No problem. Could I skip the amnesia-producing muscle-relaxant? Maybe. I'd have to talk to the doctor.

As I waited in bed inside my curtained-off space, I suddenly realized how little privacy one has here with regard to the spoken word. A lady opposite me with a vaguely European accent was giving the nurses and doctor all kinds of information they really didn't need to hear. She was obviously one of those people who enjoyed talking about herself – and her health problems – as a form of recreational therapy. My favorite

overheard tidbit was this one: “I had brain surgery but they didn’t find anything.” Exactly!

About this time my gastroenterologist, Dr. Colin Bowel (not his real name), a sixty-ish old-fashioned surgeon -the kind who you would imagine giving “doctor’s orders”- appeared on the scene. As it turned out, he was flexible and willing to discuss my request. Arrogant, he was not. We danced around the issue of my wanting to watch the scenery along the voyage up my own colon, and struck a compromise: they would give me only half the usual dose of amnesia-producing muscle relaxant. If I really wanted to, I could probably see and recall the proceedings.

In the operating room, I soon found myself being handled by Angela, Dr. Bowel, and another nurse whose name I never caught - whose job it was to push the colonoscope up my ass while Dr. Bowel steered. Thanks to a day of “bowel prep” - i.e. swallowing a gallon of salty solution in an hour! – the coast should be clear, or so I hoped. Once they got under way upstream, I could see glimpses every now and then of my colon. I have to say with some satisfaction that it looked pretty good to me: a fleshy pink, clean, open tunnel (open because it was inflated like one of those long balloons they tie into shapes at childrens’ parties). Going upstream they wasted little time. Periodically they would have to knead me like a lump of dough or get me to roll on my back while they finagled around the corners - take Sigmoid to the corner of Descending Colon and make a left - all the way up to where the appendix used to be.

The real scenery, and the serious business, came on the downstream leg of the trip. Here the views were magnificent, chamber after chamber of fleshy bowel, smooth, free of those pesky side streets called diverticuli, scenic and satisfying, just like that cruise we took down the Yangtze before they turned it into a lake. And then we saw the first one: a small fleshy blob about half a centimeter in diameter, a *polyp*. These are the reason people subject themselves to the indignity of a colonoscopy. These innocuous little things can turn, over time, into cancers.

The colonoscope is not just a CCD camera intended for your viewing pleasure. No. It’s a Swiss Army Knife sort of a thing, and at this point I got to see it swing into action. A little tapered tube moved into the scene, out came a loop of what I guess was sharp wire.

The wire lassoed the polyp, cut it off at the base and cauterized the wound all in one smooth motion. Then we continued on to the next one. At this point, my recollection gets vague. May some of that amnesia from the muscle relaxant kicked in. or maybe I dozed off. They tell me there were three of these little polyps, but I only remember one. In any event, we soon were back at the corner of Sigmoid and Descending, and I was wide awake for the main event.

It was here that they found the big boy, a one centimeter polyp hanging like a ripe apricot from the wall of my intestine. This would require special care. Dr. Bowel had the nurse pull the colonoscope out so he could insert a special tool, a sort of basket-like affair with one of those cutting wires built in. Once all the tools were in place, they shoved the camera back up my colon and positioned it for a closeup view of the main event.

There was a bit of finagling required at this point. Imagine trying to grab a squirming goldfish with one of those little aquarium nets and you'll see what I mean. Every time they grabbed, the polyp dodged and they had to start all over. Soon enough they had the little guy by the neck and lopped him off, sort of like castrating a sheep with a miniature Clip-n-Pick fruit picker <http://www.frostproof.com/catalog/m9735.html> . At this point, sounding like one of those Navy captains in the old WWII movies, Dr. Colin Bowel issued an order: Put in a clip! A Clip??!! What did they think I was, one of those Thanksgiving turkeys whose legs get tied together by the butcher with a wire gizmo? But given the circumstances I was in no position to question the captain's order. Soon enough they had a bright silver bit of metal clipped to my gut, right where they'd picked off the grape-sized polyp and that was that.

Soon enough we were back in port, the voyage complete, the video turned off, the electrodes and IV needle removed –an operation involving the quick but painful yanking of gobs of my hair – and that was that.

Afterwards, I lay around in the recovery room while Dr. Bowel paid a visit to my wife. He said “We had a really good time in there.” “He's fine: here's what we found.” After drawing her a sketch of the voyage, complete with a cartoon of my gut that looked like the sort of lines a kid would draw to represent clouds, with little dots for the small polyps and a big “X” for the catch of the day, Dr. Bowel addressed my wife. “I don't know how old you are, but I'd sure like do your colon too.” Whether this was a commercial or a hit,

I don't know. I'm just glad to be back from the scenic voyage under Capt. Colin Bowel. I think it will be a while before I travel that way again. At least I hope so.