

MY BRUSH WITH TETANUS

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In 1964 I was young enough and foolish enough to love fast cars. Nothing but the most powerful and attractive satisfied my craving. That is; until I saw someone riding a new breed of motor bike. Its mechanical perfection overcame me. One of these I had to have – and I wasted no time purchasing one of these wonderful creatures. It lived in the house with me – not in a dirty garage.

It did not take me long to discover another thrill – riding a motor bike without a shirt to cover me. And that is how the inevitable happened.

One day while riding on a bush track the bike decided that it wanted to go its own way while I decided to go in another direction. We parted company. The result? I lost a lot of skin, broke a few bones, and partially destroyed the bike.

Unknown to me a mob of sheep had just crossed the track. They had recently had their tails cut off – a procedure that helped prevent their rear ends becoming fly blown. And a number of these sheep had developed tetanus – and later died.

So, my torn skin became infected with tetanus spores – in great numbers. This did not bother me, because, during my student days I had been taught that fully vaccinated individuals **could not get tetanus**. I went home and had a bath, gave myself a tetanus booster, and some antibiotics. According to the rules of that time I was **fully protected**. Furthermore, I had been taught that during the second world war, no soldiers had suffered from tetanus because they were fully vaccinated. Later, I met doctors who had cared for soldiers during the war, who told me a completely different story. Fully vaccinated soldiers had indeed, got tetanus, but they were told not to report it. In other words, what I was taught and what was true were two different things.

A few weeks after the accident, I awoke one morning feeling strangely ill. When I tried to get up, I collapsed onto a portable radio and re-broke several ribs that were still not fully healed.

The pain was strange. Attempts to move caused painful spasms. After a few hours the spasms appeared spontaneously. At that stage the senior hospital nurse insisted that I placed myself in the hands of another doctor. It was a painful journey, of over a hundred miles of unsealed roads to a hospital where three doctors who were greatly respected worked as a team.

They were mystified. So entrenched was the myth of total vaccine protection against tetanus, that the diagnosis was not even considered. That night I slept on and off in a hospital bed while a nurse sat by my side. Sometime after midnight the truth could no longer be hidden.

I knew that I had tetanus.

A huge air-force plane flew me to Sydney. I remember awaking for a short time as I was carried on board. Already loaded was a great mass of equipment that had been hastily assembled – together with specialist doctors. I was, to state the obvious – deeply moved by all this attention.

Two other patients suffering from tetanus were in the same hospital. The nurses did not know that I was partially awake when I heard one say to her assistant, ***'The other two have died and we don't think that this one has much chance either'***.

But I did survive. In fact, the disease did not pass onto the stage that I was dreading. I did not need to be artificially ventilated.

What I did not like was the huge volume of anti-tetanus serum that was forced into my veins. For weeks I smelt like a horse – and I hate the damn things!

James, - one of my older brothers, was the senior radiologist in the hospital. Because of this I was frequently visited by specialists of all sorts. One relatively young man had a bee in his bonnet – he did not believe that I had tetanus. How he accounted for the spasms was never explained. Many years later I was provided with the answer. I certainly had tetanus – but there was more than one variety; the sceptic was partially right.

Tetanus occurs when a wound become infected with tetanus spores from bacteria that live in the soil, dust or animal waste. The spores become active and produce a powerful toxin – that is responsible for the deadly spasms.. There are 4 forms of the disease:

1. Generalized tetanus – the severe form with a very high mortality rate.
2. Local tetanus that has a low mortality rate of 1 to 2 percent. This is obviously what I had .
3. Cephalic tetanus that affects the face.
4. Neonatal tetanus that is similar to generalized tetanus except that it affects neonates. This is rare in developed countries.

Why it took so long for these forms to become recognized is a mystery. Obviously, there remains much to be learned.

During my wanderings in the hospital wards I came across a young Greek who was quadriplegic. He had been an opal miner in Coober Pedy in Central Australia. This involved sinking shafts up to 80 feet through rock in the hope of finding opal. In those days this was dangerous because while the shaft was being dug the miner below was faced with the possibility of a bucket full of rock falling off a hook and crushing the man below. So various hooks were designed in the hope of preventing this. The miner under discussion had 'invented' a fool-proof hook... which came off and crushed him – hence the paralyses.

After I recovered from tetanus I ceased practising medicine for 3 years, and became an opal miner in Coober Pedy. Some of the equipment used by the unfortunate miner was purchased by me. The fatal hook rested on a nail above my bed. – just to remind me not to take many risks.