Heartaches

By Dave Hansen
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On May 17, Mike Thomas will go to a cemetery and put flowers on the grave of the man who gave him his heart two years ago. Thanking him for his second chance at life, Mike will sit for a while, acting as if the man were alive.

"I actually talk to him," Mike says, remembering the other times he has spent on the cemetery lawn. "I act like he's not dead because he isn't. He's in my chest, he's in my heart."

Mike, 36, is Sutter Heart Institute's longest surviving transplant recipient. But this likeable, plain-talking former biker's recovery story is hardly the stuff of rosy Reader's Digest profiles of plucky patients bucking the odds. Depression, poverty and a suicide attempt have haunted Mike Thomas since the day in 1989 when he was discharged from Sutter Memorial smiling for the video cameras and clutching a bundle of shiny, heart-shaped balloons.

Mike and his mother occupy a second-floor flat of a converted Victorian house off Broadway. She sleeps on the couch, allowing him the bedroom where bright orange bedspreads cover the windows. A nylon rope, a white plastic sheet and a garden hose suffice for a bathroom shower. Dishes are washed with water hauled from the bathroom to a dingy kitchen sink with a busted faucet. In the living room, next to the mother's bed, is an aluminum foil lamp shade. Once a month they go to a local food bank to get a week's worth of free food.

"This is not storybook," Mike says. "We live in poverty."

Growing up, Mike's poverty was intensified by failure and drug use.

He often went to McClatchy High School so stoned that he could barely talk. He remembers teachers holding him up as an example of how not to behave. He finally got the boot for threatening to blow up a teacher's house.

After a stint in the Army, a failed marriage and a child, Mike fell back to the partying that defined his younger years. He hung out with his old biker buddies in South Sacramento, picking up the large, winged motorcycle wheel tattoo that now adorns his back. He also began sticking needles in his arm.

"They used to call me 'the doctor,'" he says, "because I could shoot 'em up real good, without nicking the vein or missing."

The real doctors at the Sutter Heart Institute wince when Mike talks about his past. Ideopathic cardiomyopathy, the deadly weakening of the heart muscle that almost killed him, is a mysterious disease, perhaps caused by a virus. Mike believes his drug use exacerbated the condition.

It's a pretty grim story. Before his transplant, doctors told him he had no more than a year to live. "It tore my family apart," he says. "I couldn't breathe; it got so bad that I was drowning in my own fluids. My body all of a sudden told me this is the end of the road. It's a strange feeling, that this is the end of the fight."

His mother, Nancy, was devastated and had to quit working as an aide for the elderly to devote her time to caring for her son. "It was hard because I just knew he was going to die," she says. "I never got over it; I just broke down and went on Social Security and haven't worked since."

It was a lucky combination of factors that allowed Mike to carry on.

Sutter Memorial's transplant program was just beginning, and after hearing on the radio about their first patient (Randy Wall, who later died), Mike just presented himself at the hospital. He was ideal: young and, despite his heart, relatively healthy. Forty-five days later he had a new heart.

Getting free of drugs and old habits has proven a difficult part of the recovery process for Mike.

Several months after his release from Sutter, Mike was feeling depressed, let down, alone. "I was drinking, you know, with my motorcycle friends and took some crank (methamphetamine). I was partying all night ... I kind of flipped out because I had no one to talk to, so I called Sutter - I was crying, saying that I didn't want to live ¬and I told them I had a gun."

When he arrived at Sutter Memorial's emergency room, he showed one of the doctors a .38-caliber revolver strapped to his leg. He was admitted, cleaned up and released against his wishes four days later.

"I didn't want to go, but they said there was nothing more they could do for me."

Two days later his mother found Mike groggy and dazed in his bedroom lying next to an empty pill bottle. He had swallowed 50 1¬milligram tablets of Xanax, an anti-anxiety drug.

It was back to Sutter for a stomach pumping and a brief stay on the psychiatric ward. Later, he spent a few days in a drug and alcohol rehabilitation center. He is still battling depression and the often conflicting feelings associated with transplant recovery.

Mike is certainly not proud of some of the things he's done but feels it is important to tell his story so that other transplants my benefit from his sometimes bitter experiences.

He recalls, for example, a time he was in the hospital fighting an infection after the transplant (the first year alone he spent over three months at Sutter with various medical problems), and amid a foggy haze of antibiotics, steroids and anti-rejection drugs, he went on a seemingly irrational hunger strike.

"I couldn't think - I mean, you are so loaded up with medicines you're not who you are; you're a different person," he says. "And I started feeling sorry for people who weren't able to go to that hospital and have a transplant, so I went on a hunger strike in the hospital. For three days I didn't eat."

Eventually he was coaxed into eating and his medicines were adjusted, but he still has problems with the emotional changes that sweep over him unannounced.

"I'm down to only taking 25 pills a day," he says with unintended irony, indicating the row of plastic medicine bottles lined up neatly on top of a small table in his room.

The modest reduction in the medicine has helped, Mike says, but there are long-term changes that go with the territory when you have a replacement heart, a lifetime need for special diets and regular anti-rejection medications. He is still adjusting. "Once a month I have this little depression," he says, "but most of all there is a big change in my feelings. I don't know how to explain it other than you care; there's more feeling. Sometimes I get teary-eyed when I watch TV - never before did I do that."

His favorite TV show is "Alf," a series about a fuzzy creature from outer space living with a human family, because he identifies with the humor, the honesty, the alienation. "He has the same outlook on life as I do. He's very open; he'll say anything, even if it is not the right time. And he's stuck in a situation, stuck in the house. Like me, he has to watch out for certain things. He's the closest thing I have to my life."

Mike's life now consists mainly of exercise. He goes to the local YMCA six days a week, lifting weights and building a trim, powerful physique. He can't use the pool because of all the germs, or the sauna because it affects his blood pressure, but he jogs three miles a day. The YMCA trainer, Ryan Meier, marvels at Mike's training.

"He's in better shape than most of the people who come in here," he says. "He's in excellent, excellent condition." Meier adds, "He's a great guy - a really nice guy. I train a lot with him and we share our stories."

No doubt about it, Mike Thomas is lucky to be alive. The hospital covered his massive medical bills, and so far his body has cooperated by accepting the strange new organ occupying his chest cavity. But there was little Sutter Memorial could do to change his life after the operation. "They gave him a new heart," his mother says bitterly. "But he can't get a job."

Sue Ellen Hawley, Sutter's heart transplant coordinator, notes, however, that Sutter provides referrals to job training centers and placement assistance for their transplant patients. Of the 15 surviving transplant patients (only one has died) from Sutter, she says most are either employed, in school or retired from the work force. Sutter would not comment on Mike Thomas' problems.

Mother and son get by on combined Social Security checks while Mike saves up to buy a used car. If he had his way, of course, he would buy another Harley Davidson bike, but he worries that only peril lies down that road. "Trouble comes your way when you're in that lifestyle. It was so fast paced - party, party, party every night; do this, do that ... I can't live that life anymore."

Now he is left trying to decide where to go, what to do. He has no real career skills, no education and a history of odd jobs and odd habits to go with his new heart and complex medical needs. He worries about losing his Social Security and his medical insurance to a minimum-wage job; he is afraid that no employer will take a chance on him. He is straddling two worlds without really wanting either. He is in limbo, waiting for something unknown.

"There's a reason why I'm here on earth, but I don't know what it is.

Maybe I'm here to discover something, maybe learn another lesson in my life. I was given a second chance for a reason. Maybe my reason in life is just to keep on living, to live as long as I can."

Despite his post-operation blues, he is thankful to Sutter for giving him a chance at a new heart. He feels that if he can continue to live, he will make amends with Sutter for his failures and setbacks. Sure, he's made some mistakes, he says, but they're over. He wants Sutter to say he's OK.

"I want to please Sutter, but I feel I failed the dream when I took the drugs and tried to commit suicide. It's like I'm a wild horse that once in a while has to come into the old trough and drink water and be normal, and then I trot off and be a wild stallion - but I'm still me, I'm still Mike Thomas; I've always been Mike Thomas."

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