

BRAIN SURGERY AND STUDIES

'I was told that if I wanted to survive this I had to fight for myself, because although the doctors could give me medication to alleviate the pain there was nothing that would cure me'

SURVIVING THREE years away from the comforts of home, juggling the mind numbing tasks of cleaning, food shopping, and laundry is a feat in itself, something most university students will testify to. But surviving all that with a rare illness is unthinkable to most. Rebecca Daniels started at the University of Lincoln three years ago studying Criminology and Psychology, literally months after having brain surgery.

"Just before Christmas the year before, I found a rash that didn't disappear under the tumbler test. The doctor diagnosed it as a fungal infection, but a week later I was having blurred vision, sensitivity to light and intense headaches that left me screaming in pain." At this point Rebecca was taken to hospital where she was diagnosed with Meningitis C. "I was told that if I wanted to survive this I had to fight for myself, because although the doctors could give me medication to alleviate the pain there was nothing that would cure me".

"After the symptoms didn't disappear after two weeks I was diagnosed with Benign Intracranial Hypertension." BIH as it is abbreviated, displays symptoms so similar to Meningitis that it was impossible to know when one started and the other ended. "It was literally like one day I woke up and I had gone from being told I had Meningitis to having this new, daunting illness."

BIH is the build up of high pressure within the fluid around the brain; it can be treated by medication or in more extreme cases surgery. The condition occurs in one in 100,000 people, and is usually caused by obesity, or from a hormonal imbalance caused by taking

certain medications. Although Meningitis can cause this the chances of this occurring are even more remote. "When I was first diagnosed they tried to solve the problem with medication, and continued to up the strength of the drugs until it was clear it wasn't working. At this point they told me that surgery was my only option if I wanted to have any kind of normal life at all. At that point I was spending one to two weeks a month in hospital, and although the brain surgery wasn't guaranteed to work, for me it was the only option. I was determined to continue with my A-Levels and come to university."

"After investigatory surgery and a battery of tests I finally went in for surgery on July 4 2005. I was having a shunt fitted that would drain some of the fluid from my brain, thus relieving the pressure. I can't describe how I felt before surgery; I was so scared, especially after having to sign forms that stated I knew what could go wrong, and that I could be left with all kinds of disabilities afterwards. I woke up after the surgery in the Intensive Care Unit, while people asked me what seemed like stupid questions like 'What's your name?' 'Who is the prime minister?', while people shone lights in my eyes. It seemed especially insensitive since my condition means I am extremely sensitive to lights. Eventually I was moved back to a ward, and was finally allowed to leave on July 7. I had the surgery at Addenbrooke's Hospital in Cambridge, and because of the bombings in London they needed the beds, so I was discharged under the conditions that a district nurse would visit me everyday."



Rebecca Daniels

Two months later Rebecca was moving to Lincoln to start university.

"It was daunting because if I got ill again my parents were so far away. Also I was worried that people would think I was disabled or treat me differently because of my condition. But I had to tell at least one of my flatmates about it just in case. I was also worried because it's hard to explain what it feels like for me. The best way I can describe it is if you imagine your head feels as though it's been crushed by a vice, a headache unlike anything you've ever felt before, where every part of your head hurts and the pressure is unbearable, and it's a pain no-one can see. The world becomes soft focus, where things come in twos, and you can't tell how deep a step is, bright light is a pain you can't stand. Things sway around you, you feel seasick - yet you're standing still. You're so totally exhausted

by Hannah Moore

that your body doesn't want to move and all you want to do is sleep, yet an incessant roaring in your ears keeps you awake. It's strange because it is something you have absolutely no control over, in a way you know when your brain is malfunctioning, and you know you have absolutely no say in what it makes your body do. I don't think anyone who hasn't suffered from this can ever really understand."

"Everything was fine to begin with, being away from home took some getting used to, but we were all in the same situation. Depression is common among BIH sufferers, as it is with anyone who suffers from a long term illness, but I think my determination to keep going helped me get past that. So I went out with my friends and continued to have a normal life. The only things that differed between me and my flatmates was that I generally had to and still have to do more work."

"Because of my condition I have problems with concentration and my short term memory, but this just means I have to repeatedly read things so that I learn them. Dealing with my concentration span is another problem, particularly in lectures, but I have learnt to just persevere and work through it"

It wasn't until the final weeks of the Christmas semester in Rebecca's second year that things began to go wrong. "I still get headaches even though I have the shunt in place; they just aren't quite as bad. But they seemed to be getting worse, lights were becoming increasingly bright again, and I had to hold on to things when I went up

or down stairs because my spatial awareness was being affected. I was ill over Christmas again and had to go into hospital. Because of the severity of my headaches I had to see my professor because they were worried there was a problem with my shunt. I had been told that shunts can last between 10 and 25 years, so it wasn't something I had been prepared for. But unfortunately, something was wrong so I had to have surgery again just 18 months after my first one. The valve that drains the fluid had malfunctioned; it was still draining fluid but not nearly enough."

"My shunt was replaced and resited, it wasn't quite as scary as the first time because I knew what to expect, but it was just as painful. This time though, I was out of hospital and back at university within two weeks."

"I had to work extra hard to make up the work I missed while I recovered from surgery, and in the end had to apply for mitigating circumstances for one of my essays. Thankfully, I managed to pass with a 2:1 which I was pleased with. Now I'm in my final year, I still have to work just as hard. Some days I wonder if it's all worth the effort, and if choosing to come to university was the best decision. But then I remember the time I spent in hospital, and know I made the right decision. If I had not come to university I would not have met so many people who I now know will be friends for life. Hopefully all this effort will pay off, and I will get the first I am hoping for, and be able to go out into the world and help people. I know that at some point in the future I will have to have surgery again, but hopefully that is a long way off."

What you lookin' at? Ricki Dewsbury looks deeply into the problems of staring

"OI, WHAT you looking at?" A stout-swilling brute's reproach to an unwanted gaze.

In haut-couture the response may be more refined but the reason the same: nobody likes being stared at.

It's a lesson learned by the Italian man jailed recently for staring at a woman on a train. He's spending 10 days in prison and is being fined 50 euros after a 55-year-old woman sitting opposite him complained of sexual harassment.

Is it political correctness gone mad or a shining example of human rights and sexual equality?

Staring intensely can create fears of violence. English law deals with it under the Protection from Harassment Act 1997.

"In nature a silverback gorilla will rush at you and start beating his chest if you have encroached on his territory," says counsellor and

psychotherapist Jim Bamber, from Grastang.

Mr Bamber's analogy of English law with a gorilla's primal instincts is understandable. The intimidated Italian woman contacted police rather than beat her chest.

"I guess some people have fear. We are basically animals and if somebody stares at us then that is threatening," he adds.

English law has no legal provisions dealing with sexual harassment, but the European community says it includes any "non-verbal conduct of a sexual nature with the purpose or effect of violating the dignity of a person when creating an intimidating, hostile, degrading, humiliating or offensive environment." So sonny-jim's staring was in the wrong.

The grey-area surrounding sexual harassment is like the grey area

around staring - especially when it comes to different cultures. Whether riding a bus, or travelling on the London Underground, British people prefer averting eye contact. Yet the Spanish and French are comfortable holding a slow gaze over fellow commuters.

"In some ways I think my country is more open minded," says Spanish mature student Alex Garzon.

"Staring is the normal thing to do."

You'd think that being used to Spanish starers he would be prepared for Asia. Not so. When Alex and his partner holidayed in China they were shocked by gaping natives.

"My girlfriend felt violated. She could not even go to the supermarket because she felt intimidated by everybody looking at her with their mouths open.

"The Chinese have different culture and politeness values so they don't care if they upset you and they just carry on staring."

According to Mr Bamber this type of staring is natural. He said: "Staring is usually because somebody is unusual either physically or in the way that they dress, examples of which are people with strange growths; the elephant man syndrome, almost."

"Then there's also a kind of staring when people slow down on motorways to look at a crash and horrible things."

Elephant man syndrome? This is a bit unfair on the innocent stare - especially when a flirting gaze is the cupid's arrow of many Saturday night discos.

"If you are gob-smacked by somebody sexual attractive you're going to stare at them what ever race,

gender or culture you are," added Mr Bamber.

So staring can be offensive, criminal, incendiary and sexual - not to mention a sign of drug-crazed insanity. It's all about the right place and time. As the Italian girl found - it's not with the women sitting opposite you on a train.

I was in Italy a couple of years ago and people were running around pinching people's bums. My girlfriend was pinched on several occasions.

I have been guilty on hundreds of occasions of staring at beautiful women but I have never been arrested.

I have been on the underground and nobody even makes eye contact. That's the complete opposite.

I had a person on the tube open their magazine and put it between us after saying 'hello, how are you?'