

'Above and beyond' for new mom

DELIVERANCE: Maternity staff sees mother through life-threatening medical crisis

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ROYAL COLUMBIAN
HOSPITAL

Amie MacNeil was a high-risk maternity patient. She had a heart attack on the delivery table that put her in a coma temporarily. Her husband, Todd, recalls the days and nights he thought he would lose her, and how Royal Columbian Hospital's team of experts saved her and their infant son.

WILLIAM MBAHO
SPECIAL TO THE PROVINCE

Amie MacNeil was a healthy 27-year-old living in Aldergrove when her labour was induced at Royal Columbian Hospital.

Little did Amie know at the time she would undergo a medical crisis, and if it wasn't for the staff and services at the Lower Mainland's oldest hospital, she may not have survived the birth of her son, Jacob.

"My baby boy was delivered by caesarean section on Dec. 7, 2009," Amie says.

"He was perfectly healthy, but shortly after the C-section, the doctors noticed I was starting to hemorrhage."

Before being hospitalized, Amie's pregnancy had been routine, but near the end, at about 39 weeks, she developed mild hypertension.

"My feet were swollen and my blood pressure was rising, and my obstetrician thought it would be wise for us to start the induction process a bit early," Amie says.

What followed was a medical miracle that Amie, her husband Todd and even her doctors are at odds to explain.

"Our anticipated due date was Dec. 17, but we began in early December when we started the induction process," Amie recalls.



Amie MacNeil holds her newborn baby, Jacob.

"After a lengthy labour and delivery process, I was still able to hold my son Jacob and feed him for the first time."

That is all she can remember before the post-natal ordeal that followed. Todd was asked to leave the room while the doctors examined her.

An hour later a doctor told him they would have to perform surgery to remove Amie's uterus.

"I didn't see her again for hours and waited in the maternity room with family," says Todd.

"When the doctor came to see us, I could tell things were not going well. He said Amie's heart had stopped and that she had gone into cardiac arrest. I told him to do whatever he had to do to make it right."

The doctor came back and told Todd they had Amie stabilized, but she was still in rough shape and they weren't sure if she was going to make it through the night.

"Her heart wasn't working, and she

RCH fundraiser

Oct. 2 is Donation Day on CKNW's Bill Good Show from 8:30 a.m. to noon. Tune into CKNW-AM 980 and listen to interviews of patients, physicians and donors of Royal Columbian Hospital and find out their reason to give and care. Supporters plan to raise \$50,000 on Donation Day toward the hospital's \$1.5-million equipment campaign. Support RCH on Donation Day by giving online at rchcares.com.

was on an extracorporeal membrane oxygenation machine," says Todd.

ECMO is used to provide both cardiac and respiratory support oxygen to patients whose heart and lungs are not functioning.

When Todd saw Amie again, she was unrecognizable because her appearance was swollen.

"I asked the nurses to bring Jacob down because nobody knew if Amy would make it through the night," he says, holding back the tears.

Todd remembers the Royal Columbian nurses expediting the process. "They helped me bring him down, got him snuggled with her," he says.

That was their first day and night in hospital. Over the next several days, doctors fought repeatedly to take Amie off the ECMO, a respirator and out of a drug-induced coma.

"She was petrified waking up to find herself on a respirator," says Todd. "They had to get her to relax to take the respirator out, and when they did she was still struggling to breathe."

Her doctors decided to perform a tracheotomy to help her breathe without the respirator.

After the tracheotomy was performed, the patient was finally on her way to recovery.

"Amie was moved from intensive care to critical care," says Todd.

After Boxing Day, Amie was moved to a surgical ward. It was another big milestone leaving critical care.

"On Dec. 29, the staff at Royal Columbian said I could finally bring Jacob in to see his mother," says Todd.

"I had been there 23 days, and I was so excited to be reunited with Jacob," says Amie. "I was so excited, but all I could do was stare at him. He was so cute, and a pound bigger than when I had delivered him."

Amie was finally discharged on Dec. 30, but she still had a long way to go from there.

"My heart works at 100 per cent now," Amie says. "We were lucky to have been at Royal Columbian. Not only did all the staff do what was expected of them, but they also went above and beyond."

Jacob turns three this December. And he has company. The MacNeil family adopted baby Nolan nearly three months ago, and no one is more happy than Amie and Todd that it all worked out in the end.



DR. GROVER WONG

Doctor gives back to his workplace

Dr. Grover Wong loves Royal Columbian Hospital — so much that he contributes to it generously.

"I donate on a monthly basis back to the hospital," he says. "I started about four years ago. The more you give, the more you get back."

"I thought, 'Why don't I try it?'" Dr. Wong says. "It's a great place, so why not put my money back into the place that makes me my money?"

Even though his family practice is based in Port Coquitlam, Wong has also been practising obstetrics at RCH since 1992.

"When the chance came for me to do my internship at Royal Columbian I applied," he says. "The reputation of the hospital as a trauma and cardiac hospital meant there was a lot to learn there."

Since then, Wong has delivered up to 3,200 babies at Royal Columbian. About 3,000 babies are delivered each year at RCH.

Wong thinks there is something else that make his situation there very unique: "The relationship between the obstetricians, pediatricians and family doctors is the best I can think of."

The Columbian "doesn't receive a lot of funding, because it's efficient." And he thinks the staff and work environment there "are the best."

He likes RCH "because the people you see are young, healthy, happy and appreciate the work you do," Wong says. "Obstetrics is one of the toughest practices in family practice, but it's the most rewarding."



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