

I Guess That's Me (A Reflection)

Lee Frank

Busy Me

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One solution to my social problem was becoming involved in organizations. Looking in my computer under the Orgs folder, a quick count shows over twenty folders at present. OK, so they're all not active, but then others were active in this period and aren't in that list. (Reviewing, there are only seven active organizations.) Volunteering wasn't the only thing keeping me busy. There were a small handful of mostly unsuccessful business attempts (two still active and still losing money).

Being active in so many organizations made me very visible locally. (Living here over two decades didn't hurt, either.) Attending various events, I encounter various women (men, too, but who cares) who've seen me here or there. Yet I don't know this unless they tell me and few people approach someone they've never met. I can no longer complain about not meeting enough women. If there's any problem here, it's my unwillingness to compromise. Because I'm now so particular about smokers, I hang back until I know someone is definitely not a smoker.

Was I still hanging out in bars (see My Life) looking for a non-smoker? Not as much, because I no longer had a neighborhood bar. Where I did hang out was downtown,

mostly at Monique's, a tiny combination of restaurant, coffee house, and beer and wine bar. It was an updated reincarnation of a sixties hangout. Recently I ran into Natalie, one of the Monique people (Monique is also a real person with an amazing history. Saw her only last week.) Natalie showed up one day, became one of the crowd, then one of Monique's eclectic wait staff. For a while she dated Boris, an itinerant Yugoslavian part-time bartender, guitar player, engineer, sailboat owner, and hopeful heavyweight. When his country split apart, Boris went back to fight for his side. I never asked which. What I remember most about Boris was his amazement when he discovered Sam Cooke (this, many years after Sam's death). Seen Natalie since, but I can't bring myself to ask about Boris.

Being busy, meeting women, is not what this book is about. However important these may be to me, it's not why I'm writing this. This book is about changes. As I entered the nineties, my appearance altered radically; this chapter could also be called the Medical Era.

First, some missing detail from the past. My first operation (since childhood), was on the pinkie of my right hand. The arthritis was distorting my fingers, most extremely that finger. It was bent and tucked under my ring finger. Not only useless, even for crude gripping, it was in the way. Simple solution: The doctor snipped away some of the crippled knuckle joint and inserted a pin forcing it to fuse into a more useful position. When my right hand is at rest, fingers slightly curved, you don't notice anything out of the ordinary. When I grip from this position, it moves with the others. It simply can't close into a fist or straighten from its permanent curvature.

The fun part of this was coming into my neighborhood bar (on Lido) for weeks with a steel pin sticking a full half inch out of a small bandage on my finger. And explaining the operation in detail (local anesthetic, I watched) to anyone who was foolish enough to ask.

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This procedure took place in the late seventies. Little did I know this joint operation was only the first. The next one was the big one, replacement of my right hip. If you're of a certain age, they slap these in place with glue and you're up and walking in a matter of days. The doctor said I was too young for a quickie. I needed the bone to grow and hold it in place. This, he said, would take many months.

It started with stockpiling a few pints of blood, my blood, in case they needed it for the operation. I don't know about you, but I'm not squeamish about giving blood. In a phrase, I like to watch. I want this person to know I'm paying close attention to how they stick the needle into me. I like to think it makes them just that little bit more careful.

I hadn't been in a hospital since '68, with my damaged knee. This was a bit more serious. My only worry was the anesthetic. I did not relish the oblivion of the Big Under and was lucky an epidural was successful. As you would expect, they do these things early in the morning and I hadn't eaten for many hours. I was napping in the pre-op room while my parents waited with me. (I guess they were concerned. I wasn't apprehensive in the slightest.) After the jab with the night-night juice, I was out before I could count backwards to ninety-five. The next thing I knew I was back in my hospital bed and very hungry.

As we waited for lunch, I said I felt fine. I did. I didn't realize how much of this good feeling was the local anesthetic. Lunch came. I ate it. I promptly threw it up and asked for another. It took a while, but when it came it stayed down. I felt good. The pain didn't show up until later. By then they'd hooked me up with a rig—best described as Demerol on demand. Didn't feel too bad. And I wondered, knowing how big a slice they took, knowing how they'd removed the offending joint, how they'd drilled

the thigh bone and hammered in the new ball for the joint, I wondered when the hurt would get up to full speed.

I found out. After a few days, they took away my Demerol contraption. They asked if I wanted a shot to tide me over. I didn't feel much pain so I said no. Hard to judge who was dumber: me for saying no or them for asking my opinion. What we had now were Percocets, but no more painkiller under my control. These pills were only dispensed by the nurses when requested. (I almost said demanded.)

Although this was some eight years ago, I remember that night like it was last night. I had seriously misjudged (thanks to the Demerol) my need for pain relief. Around seven, I began buzzing the nurses. I needed Percocet. Now. Badly. They didn't come. I can't remember any other time during this stay when I had trouble contacting the nurses. All I remember is the pain—for only half an hour. When I unclenched my eyes, I could see the clock. I was clenching everything. The pain was unbearable. I truly did not think I would survive it. I was squeezing the bar hanging overhead (the one you use to help change positions in the bed) so hard my hands hurt.

Eventually, after an eternity of thirty minutes, a nurse responded and brought in a pill. Seven-thirty and I was still alive. I had survived more pain than I thought I could. This realization, plus the Percocet, brought about an epiphany. Having survived more pain than I thought possible, I raised my opinion of myself up a notch. I also learned a trick about Percocets. If you're not sure, only take half. You may wake up in a few hours and need the other half. If you've taken the whole, the nurse will not bring another until the prescribed eight hours are up.

Best part of the stay were the two books brought to me by friends: Hemingway's Movable Feast and Jones' From Here To Eternity. The later—although I had seen the movie—was especially enjoyable because I'd been told the inside story over two decades before by Leo. And another

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thing: It's a great book, misjudged by many to be merely another war novel.

In a few more days, I was out and on crutches, the same crutches I used when I was hospitalized in New Jersey back in '68. My movements, however, were very restricted. I had only minimal movement about the house, without putting any weight on the leg, until the next appointment. Then minimal weight on the leg, but still no traveling. Then, after some six weeks, I was allowed to ride in a car. Social again!

All the while, I was doing the proscribed exercises. (When given physical rehab in the hospital, they were amazed at how hard I worked. I told them I was used to hard exercise from my wrestling days.) This might have been difficult had I not been prepared at home. I had a breakfast tray when I needed to eat in bed. I had a cart to take my meals from the kitchen to the TV. I had a small portable computer I used on the breakfast tray to keep moving information out of my head and onto hard disk.

Finally, it was time for the staples to come out. At home. My Dad was little help because of his poor vision. I used a small mirror to do it myself. No big deal. Getting back to normal was a bigger deal. Going up and down the flight of stairs to my front door on crutches was no small deal. It took a full year before I could stress the leg. During this time, when people asked how I was doing, I would say, "I can't kick." If I encountered any resistance, any object, when I moved my right leg forward, the pain shot straight to the hip. I could walk; I just couldn't kick.

I came away from this operation with a new hip, a new appreciation for my ability to withstand pain, and a new hair style. In hospital, the least important thing was

the length of my hair, but I made the decision there to stop cutting it. Why? To let it grow, to simply play around and see how long it would get. It's still growing. It was pretty long within a year. It's much longer now but not gaining more than a few millimeters a year. What's long in the record books is how long I've kept this hairstyle. Longer than any other in my life. You've seen the pictures. I doubt you can find a look lasting more than two years. Yet this hair is headed for its ninth year. Go figure.

Speaking of hair, there's another story about the beard. From some of these pictures you might think the beard is a later-in-life addition. Not so. I experimented with beards in college and on and off over the years. Once there was a goatee. What I don't have now is pictorial proof. What we see in the picture on page 264 is the most recent beard. This one appeared in the early eighties. At the time, I thought it was a statement of my general displeasure at the world. (And more than just the Reagan Presidency.) It was my symbolic frown. Now, I'm no longer unhappy, just used to the beard. Somehow, it's become me.

The hip operation wasn't my last, only my most serious (to date). But it soon became insignificant in the light of other operations. Not mine, my parents. Dad had a history of heart problems dating back to sixties. In January of 1991, he had open heart surgery. This was exactly a year after my operation. An ideal patient, he was well on his way to full rehabilitation when my mother went into the hospital for an angioplasty. Things were beginning to get complicated. Added to the confusion was my Father's upcoming eightieth Birthday Party.

He had a big seventieth, not knowing how many of his friends would be around for the next milestone. Or if *he* would. Now he'd made the big eight-oh and wanted to celebrate, especially in the light of his recent major

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operation, his survival. His birthday was in August. Because Mom's procedure was in July, no one thought there would be a party. Mainly because Mom had always been the big party giver. As we entered August—all of us together in New Jersey—she was out of the hospital but mostly horizontal, resting. Until she came home, no one had any thoughts of a party. Now it seemed out of reach. But not to me.

I lobbied hard. I explained to friends and relatives that it was up to them, that Mom and Dad could do nothing but show up and enjoy. Everyone said there was not enough time. I said there was and I was going to make this—most likely their last, big party—happen. I recruited, I assigned, I cajoled, I jumped in to solve last minute problems. With the help of many relatives, but primarily my sister-in-law Pam, we had their big, and their last, party. (I mostly sat in the background, exhausted. I felt as though I had willed this party into existence.)



This is part of the crowd in Robert and Pam's backyard. One thing I notice in this shot is only two black faces. I would guess this angle covers only a third of those gathered. I know there are at least another half-dozen people of color not shown. These were friendships dating back to the fifties when Newark, and the Scouts my Dad

served for over fifty years, changed color. Here he was, celebrating his eightieth birthday, being honored by many friendships spanning half a century. Leading the group in the Boy Scout Oath, is Al Hill. I remember when Al first got into Scouting and when he came to our home in Union. Whenever there's an important event in our family, Al is always there. Now, however, he has to travel from Cleveland, his home of many years. But Al was there at my brother Dennis' wedding two years ago. There aren't any better friends than Al.



This is the basic family unit, parents and sons (from left to right, Dennis, Dad, Mom, Robert, and myself). Looking closely, you note the decorations (badges) on my Dad. These were presented to him by various friends and relatives as part of the celebration. Dennis is giving a highly animated presentation of the award from the three of us. He also seems to be wearing a beard, highly unusual for him. This is August 1991, and I look pretty much as I do now, less a few pounds. The hair, pulled back in its pony tail, is long but not as long as it is now.

What you can't see here is Dennis' illness. A very rare bone marrow disease (myelofibrosis), it became progressively worse over the next five years. Here you

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see the slim Dennis, weighing less than he did in high school. There are photos (which I don't have) of Dennis at my Uncle Mike's ninetieth in 1995. Gaunt would be a kindly description. At that celebration, we learned his exact contemporary, our cousin Dickie, had cancer. Dickie looked perfectly healthy. At forty-three, he was looking forward to running in the Boston Marathon. Within the year, Dickie was gone and Dennis was recovering. After years of painful treatment and a future facing very risky bone marrow transplant (if we found a donor), he suddenly began to get better. Now he outweighs me. Even the doctors called it a miracle.

We remaining cousins might see it differently. We of the New Jersey/Mexico connection look at each other and wonder what other coincidences await. My contemporary, Larry, looks at me, and I at him. My brother Robert and his contemporary, Roberto, look at each other. Dennis looks in the mirror and sees his contemporary, Dickie, is gone. You are free to draw your own conclusion.



This is the older generation with the newer, Robert and Pam's children, my niece and nephew, Jay and Abby. My two sets of grandparents, those four people, produced eleven children. Their children, my parents, aunts and uncles, produced sixteen grandchildren. But my two

parents have produced only two grandchildren. It would be only half-joking to suggest they were going for quality not quantity.

Parties create memories and the photos help us remember. Mom's open heart operation was the following January. She was not the best patient. When we saw her in intensive care, having gone through the experience with my father, we could see this was much more critical. Instead of a week plus, she was in hospital for a full month. Instead of regarding her rehabilitation as a challenge, as my Dad did, it was another burden to be borne. What he said was, "She's not a fighter." I realized in his own way, he was. And that I had both their traits. I could also be stubborn, like Mom. A little over a year later, she had a stroke. Then, in a little over a month, she was dead.

Somewhere between my parent's two operations, I had another operation. Two, actually. One on each foot to remove the foot's equivalent of the hand's knuckle joint. The arthritis was causing these to protrude downwards, making it very difficult to walk. (Not all my toes. The doc left the joints of my big toes hoping they would help stabilize my walking. They did.) For this recovery, I didn't need crutches. Instead, I wore a modified half-platform sandal. This supported and elevated the rear of my foot, so I could walk and the front of the foot could heal without impact. I only needed the cane I'd been using for perhaps fifteen years. What I got were a lot of questions: "Where did you find such cool shoes. Are they Chinese?"

Since the seventies, my walking had become more and more difficult. Shoes were shed. I went through sandal after sandal until I found salvation in Birkenstocks. The cane also became my constant companion in the late seventies. My walk was, well, distinctive. Now, in the early nineties, I gradually relearned how to walk. First, I hadn't

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walked normally in decades. Now, I had to learn without the use of all but my big toe. But now I could wear normal footwear. Almost. My hands made it impossible to tie laces, so I searched for Velcro. My feet were no longer the strongest, so I looked for lightweight footwear. I found jogging shoes with Velcro fasteners. I also discovered the slip-on boat shoe. There were other improvements but that's covered in the next chapter.

I needed to improve my walking because I was doing more. Walking, and standing. And meetings. And art openings. And parties. I had become, despite the medical trauma, very busy. Am I the busiest person on the planet? No, and despite that it feels like I am, I need to put my activities in perspective. I'm not, for example, as busy as the average working mom. But then the average working mom is probably a lot healthier than I am. And has more time—I call it up-time—to do everything she needs to do. That doesn't make her life easier than mine, but then we're comparing apples and working moms.

Back in the early eighties, I did a time study (remember my interest in efficiency?) of how I spent my days. I found my average up-time to be around eight hours a day. Don't be misled. I didn't say I could, like most people, work eight hours a day. I said my total up-time, including all bodily functions, was only eight hours. Since few people sleep fully eight hours, most people's daily up-time is over sixteen hours. This little study of mine is about fifteen years old. Arthritis is a progressive disease and I know my available up-time has decreased over the years. Consequently it doesn't take much to keep me very busy.

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