

Bill Gluba

ACUTE RESPIRATORY DISTRESS SYNDROME (ARDS)



One Saturday morning in July of 2015, while doing yard work, I pulled on some work gloves and noticed that they were very tight around my wrists. A few minutes later, I felt like something was biting or stinging my wrist. I pulled off the glove but did not see anything, so I finished trimming the hedge.

Afterwards, I noticed my left arm was starting to swell, so I went to a walk-in medical clinic. I told the nurse what had happened. She did not think too much about it, and prescribed me an antibiotic to take every day for 10 days. She also prescribed an ointment that I was to rub into my arm until it got better.

I religiously followed the directions. One night, my wife woke me and asked what was wrong, noting that my breathing was very irregular. I ignored her and went back to sleep.

A day or so later, I went to a local political rally. A number of my friends asked me if something was wrong, noting that I didn't look well. I left the rally and drove to another outpatient clinic. A nurse took my temperature and told me to drive myself to the emergency room of the local hospital.

I went to the emergency room, but was released a few hours later.

Two days later, I could not talk, and by the following morning I was delirious. My wife and oldest son rushed me to the hospital and our parish priest gave me the last rites. I was intubated and air- vacated by helicopter 55 miles to the University Hospital in Iowa City.

Bill Gluba was a patient speaker at the ATS 2018 International Conference in San Diego, California.

“One night, my wife woke me and asked what was wrong, noting that my breathing was very irregular.”

For the next 21 days I laid in the ICU unit with round-the-clock nurses and medical staff monitoring and checking on me constantly. They even ran tests through the CDC in Atlanta to check to see if I had been bitten by a deer tick, which I hadn't. I spent another 10 days recovering in the hospital. Eventually, I was transferred to Select Specialty Hospital in Davenport.

During that recovery period, I felt great discomfort in the left side of my chest. An x-ray showed that the chest cavity between my lungs and heart had filled with fluid. Doctors put a small hole near the left top of my chest, inserted a small straw like tube and put me on a pumping machine for a few days. That relieved the pressure and I felt much less discomfort until a few days later, when I asked my family doctor to give me something that would help me sleep. During the night I became delirious, and ripped the large band aid off my upper chest where the tube had been. The pressure and discomfort returned until my pulmonary physician drained about a quart of fluid from my lungs. After that, my oxygen level improved and I began to get progressively better.

After loads of tests, the best conclusion the University of Iowa Hospital and Clinics medical staff could come to was that I had had a very severe reaction to the original antibiotic medication that was prescribed by the first walk in clinic. They said it contributed to a cascading effect that almost killed me.

I cannot say enough or give enough accolades to all the people in the health care profession who had something to do with my hospital stay and treatment. From the house keepers, to the food servers, to the aids and orderlies, to the social workers and therapists, to the nurses and doctors, they were all very caring professionals who treated me with the utmost dignity and respect. They truly did save my life and for that I will be eternally grateful. ■

Acute Respiratory Distress Syndrome (ARDS)

Acute Respiratory Distress Syndrome (ARDS) is a life threatening problem in which the lungs are severely injured. Inflammation (swelling) occurs throughout the lungs. In the lung tissue tiny blood vessels leak fluid and the air sacs (alveoli) collapse or fill with fluid. This fluid buildup keeps the lungs from working well. People with ARDS generally have one or more of the following symptoms:

- Shortness of breath.
- Cough (often with white or pink frothy sputum).
- Fatigue.
- Fever.
- abdominal pain (in pancreatitis).

Learn more: ATS Patient Education Series. "What is Acute Respiratory Distress Syndrome?" New York, NY. www.thoracic.org/patients/patient-resources/resources/acute-respiratory-distress-syndrome.pdf