

# Christine Lentz

SEPSIS/CRITICAL CARE



*“My mom asked if I wanted to keep fighting or let go. I don’t remember this, but I said ‘I choose life.’”*

On Dec. 27, 2013, with a high fever and feeling very ill, I went to the emergency room.

When I entered the ER, they drew blood. The ER doctor did an examination and determined, like all the other patients in the ER that night, I had the flu. I explained that seven weeks prior I had abdominal surgery, shared the details of my surgery and my complications post-op. But this information did not seem to be taken into consideration. I insisted on a flu test to confirm the doctor's diagnosis, and it came back positive. Unfortunately, the diagnosis masked the other condition I had at the time, which was sepsis. A more diligent review of my history should have resulted in a blood test that would have revealed sepsis.

I left the ER with a packet on how to care for the flu, not knowing my body was septic. Over the next three days, thinking I was recovering from the flu, I was actually going into septic shock.

Early on Dec. 31, suffering from unbearable leg pain, my husband took me to the ER for the second time. This time, however, after they drew blood and tested it, the results showed significant bacterial growth. I was admitted to the hospital for further evaluation. During this period, my blood pressure dropped and my heart rate rose dramatically. I was rushed to the ICU and put on life support.

For the next 16 days, the doctors in the ICU worked diligently to save my life. I don't remember anything from those days. It was determined I was in septic shock from a Strep-A bacterial blood infection and diagnosed with toxic shock syndrome. Unfortunately, the result of using presser drugs for a prolonged period of time is necrosis of the extremities.

On Jan. 17, I was transferred to Presbyterian/St. Luke Hospital on the advice of the infectious disease specialist. At the time I did not know the real condition of my limbs. Within several days of being in the ICU at PSL, my family was informed that both hands and both feet needed to be amputated. Although I was mostly conscious during this time, I was, in fact, unaware of what was happening. My mom asked if I wanted to keep fighting or let go. I don't remember this, but I said "I choose life."



Sepsis is a severe and toxic response to infection and inflammation. Sepsis occurs when your body is trying to fight infection and that fight is having negative (bad) effects on your body. The problems that develop with sepsis can affect multiple organs in the body. Sepsis can be life-threatening and requires prompt and skilled medical care.

Common signs and symptoms include:

- Shivering, fever, or chills
- Pain and discomfort: usually aching all over the body
- Pale, clammy skin, that can change colors
- Difficulty breathing
- Feeling sleepy, "appearing like you are drunk," agitated, or confused
- A feeling of dread that "I'm going to die"

*Learn more: ATS Patient Education Series. "What is Sepsis?" New York, NY. [www.thoracic.org/patients/patient-resources/fact-sheets-az.php](http://www.thoracic.org/patients/patient-resources/fact-sheets-az.php)*

## *Christine Lentz...*

One leg was amputated first. It was still believed I was not going to survive much longer, and surviving this surgery was the test. To the amazement of all, not only did I survive, I started getting better!

The next three amputation surgeries were completed, and on Feb. 3, I was transferred to an acute care hospital. This would be my recovery site for the next five months.

During the first three months in acute care, I was not very coherent due to the pain and medications. I couldn't eat or drink anything for weeks. My protein levels were dangerously low, and my weight dropped down to 70 pounds. I also lost all of my hair. My husband scaled back at work, with the support of his boss, to be by my side during late afternoons and evenings for much of my recovery. My parents moved to a nearby hotel so they could remain with me constantly for the first month. I was extremely lucky to have so much support. I was in the hospital for seven months, and I was rarely without family by my bedside. I emphasize this, because I believe this was key to my successful recovery.

I was transferred to a rehabilitation hospital for the final six weeks of my recovery, where I learned to use my prosthetics and perform the activities of daily living.

Finally, on Aug. 1, 2014, I returned home.

During my many months in the hospital, it was surprising how far reaching my sepsis diagnosis was. There were my three teenaged boys, and their mom was absent for seven months. Rumors surrounded us on social media and spread in the hallways of school.

My life at home involved many changes. We have a den on the main level of our house with an attached full bathroom. It has since become my bedroom. I've knocked holes in the walls, pulled down railings, scratched every piece of wood, you name it.

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I also got my driver's license, but what a process. I had to jump through so many hoops, but it was worth it. I had modifications done to my car, and the biggest help is the driving ring. Really nothing else was needed because I can "feel" my pedals.

However, life as a quad amputee is not easy. My energy level has been zapped. I now get "complex migraines." Most of the time the medication will keep them from becoming severe, but a few times they have become so violent they mimic the symptoms of a stroke or seizure. The worst symptom I deal with is losing the ability to speak. However, this is becoming less frequent.

I was a very athletic person, and my leisure activities always involved some kind of sport. When I became disabled, I lost a big part of my identity and ability to keep myself entertained, as well as a big way to connect to my boys.

Now I am keeping myself busy with volunteering. I work with organizations involved in raising sepsis awareness. I also work with many groups, in various capacities, involving limb loss. My goal is to do more public speaking and someday—to get back on the ski slopes.

*Christine Lentz was a patient speaker at the ATS 2017 International Conference in Washington, D.C.*