

Counting milestones

UW professor fights a debilitating stroke with determination, ingenuity and humor

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After 26 years, professor Michael Gordon has "been all over" the UW School of Medicine and published 50 articles. In 1992, he was selected from 2,500 candidates to receive the 1992 Society of Teachers of Family Medicine Education in Excellence Award.

Five years ago, a branch in one of professor Michael Gordon's carotid arteries became blocked. When blood carrying oxygen and nutrients could not reach his brain, the affected nerve cells died within moments.

In minutes, the stroke had caused Gordon to lose control of his ability to walk across a room, write a recommendation, talk with his wife and hold a coffee mug. Within weeks, Gordon would begin to relearn those daily tasks as though rebuilding his lost life savings.

Only there was no guarantee he would have it all again - especially what he missed most: conversation.

For a professor and department chair, losing the power of effortless and effective communication was tragic.

"I used to have ideas about where this program would go," Gordon said about family medicine. "I was an idea person. When I would say, 'I have an idea,' everyone in this office would brace themselves."

Gordon's stroke resulted in a condition known as aphasia, a total or partial loss of certain aspects of language, such as reading, writing, comprehension and language production.

His type of aphasia does not affect his memory or intelligence. Gordon's brain can receive and retain information and images, but its ability to process information has slowed down.

"I remembered everything," Gordon said about the early stages following his stroke, "[But] my brain was working like molasses."

For stroke survivors, rehabilitation is overwhelming. Recovering the simplest linguistic abilities and motor skills - such as coordination, balance and grip - requires hours of practice per day. Even with practice, many activities cannot be performed to their full potential.

"This is really a devastating disease," Gordon said. "There are things I can't do - I just remember them being fun."

Gordon's determination to recover, however, is translating "can" into "will."

The long and patient road

"It's really funny with strokes," Gordon said. "Some people take it on, some people sit at home."

No one factor predicts how successful a person will be at adapting to the impairment, but a number of variables influence recovery: age, severity of the stroke, disposition, support structure and the opportunities available for communication. According to Margaret Rogers, associate professor of speech and hearing sciences, Gordon had everything on his side.

"Mike was so young, he wasn't ready to give up his career," she said.

To Rogers, who treated Gordon at the UW Speech and Hearing Clinic, Gordon's attitude said, "I'm not going to let these problems stop me."

And he didn't.

Within five years of his stroke, he was considering a kayak trip up the Pacific coast to Alaska - "open water

cycling" in a kayak that replaces oars with pedals and a rudder. And if he hadn't suffered the stroke, he may not have wanted to.

"I always pick these impossible goals," Gordon said, "and then I do them."

Understanding that the ticket to recovery was forcing himself into challenging situations, Gordon returned to the UW just 90 days after his stroke.

"Having a home right here in family medicine is the best medicine I could get," Gordon said.

He was not able to teach, and he lost his position as head of family medicine, but he still had an office and work to do.

At the same time, work was no longer just a job - it was therapy. He relearned to shake hands. On his first day back, he "sat in this room and tried to make the telephones work." His brain would not let his fingers find the correct numbers.

In the back of a crowded elevator he quietly practiced forming the words "excuse me," so that he could announce them at his floor.

Many stroke survivors fear re-entering the world. Their aphasia gives them a sense of separation from the rest of society.

After stroke survivors relearn vocabulary and "compensatory strategies" to communicate, they must then find opportunities to practicing their techniques. Social interaction is an essential part of adapting to aphasia.

Not only did Gordon return to work so shortly after his stroke, he became a Toastmaster.

Patience ... and a little ingenuity

Speech therapy just didn't seem to help, Gordon said of the one-on-one treatment he received after his stroke.

Then, his daughter and a group of friends came home after a long train ride from Wyoming. His daughter wanted to embark on a long drive immediately, but Gordon thought the group should rest first. In the presence of his daughter's friends he was able to confidently and successfully contest his daughter's decision.

"I spoke better with an audience," Gordon said.

So he sought a captive one.

Toastmasters is an international organization that helps people allay their fears of public speaking while developing general speaking and organizational skills. For Gordon, the pressure of performing plus the demand Toastmasters places on organizing one's thoughts made the club just what he needed.

"What makes [speaking] hard is that I'm organizationally impaired," Gordon said. He will spend a great deal of time getting things right but "just can't get organized."

Gordon attended his first meeting at the UW chapter of Toastmasters three years ago. The group of around 20 people meets weekly to deliver brief presentations and critique each other's speeches. Although there were no individuals with aphasia in the group, Gordon was not really alone. It was a support group as well as club. "People who are scared too" are all around, he said.

Gordon immediately realized the group was for him. His first speech was supposed to last four to six minutes. He went for 10.

"I couldn't talk in meetings at all. And here, I just couldn't shut up. And that was three years ago."

Fifteen speeches in three years has helped his speech and mental organization considerably. But Gordon doesn't limit his progress to weekly meetings.

"I make progress all the time," he said.

Gordon does exercises at the bus stop. On the bus, he twirls a golf tee he keeps in his pocket to regain control of his finger movement.

Gordon suffers significant hemiparesis - literally, "half-paralysis" - half of his body is weakened. As a result, he has a hard time using both hands at once. To combat his difficulty opening jars, he uses a thin piece of foam that the jar sticks to while his hand works the lid.

Last year Gordon earned a significant "triumph."

"I rode a bicycle on the Burke-Gilman trail to Marymoor park. That's tough," Gordon said. Two weekends ago, Gordon rode the Daffodil Classic, a 20- or 50-mile ride starting in Orting, Wash.

The kayak trip to Alaska is still in the works.

Back in the saddle

"Most people think individuals with aphasia have cognitive problems, like those with dementia or traumatic brain injuries," Rogers said. "It causes a great deal of frustration for individuals with aphasia when others consistently underestimate their intellectual abilities."

The verbal demands of teaching have kept Gordon from his station behind the lectern. But he's found other work to do.

One of his first tasks was to prepare a speech for the Society of Teachers of Family Medicine. The 20-minute presentation took him a year to write. It was a major victory.

"I was flying high," he remembered. "I gave it in Boston and I could have flown all the way back to Seattle."

Last year he wrote another, and is currently preparing his third. Now, speeches take less time to write, and Gordon has developed "tricks" to make speaking easier.

Gordon fished out a sheet of paper with drawings of kitties and elbows and proudly announced his new discovery - "hieroglyphics," a prop to aid his speaking.

He tapes all the words that tie his mouth up in knots to a pencil holder. He practices developing "muscle memory" for his mouth and jaws, since most of his effort goes into saying the words. Such effort allows him "no time to process what's coming next," and forces him to memorize only three seconds of his speech at a time.

Speaking was not the only injured faculty from Gordon's stroke. His writing suffered too. Before, he had published 50 articles in his UW career. Since then, he's completed two.

While the writing may be difficult, Gordon asserts that the illness affects not his ideas, but his organization.

"All the thoughts here are mine," Gordon says as he reveals a copy of his most recent article. "I didn't say things the right way, but I'm having help with that."

About three months ago, the School of Medicine granted Gordon his first assignment with students since his stroke. All medical students are expected to work 300 hours at an Independent Study in Medical Science and need advisors for guidance. The school appointed Gordon to be one of those advisors, to meet with students about their papers as often as they choose.

For students like Mary Bergum, who had an undergraduate business degree and no research experience, organizing a paper was as difficult for her as for Gordon.

"He knew what it was like to relearn something," Bergum said. Gordon offered basic tools that Bergum found extremely useful.

"It's just so nice to come to somebody on a weekly basis and say 'I can't do this, what is wrong?' and have him point out what is wrong," she said.

A folder of glowing advisor reviews backs up Bergum's assessment, and Gordon's enthusiasm for his students is equally evident. His new responsibility satisfies the teacher-student contact he had been abruptly denied. It is

yet another milestone on his journey back to a world of minimal limitations.

After recent tests, Rogers reports that Gordon is "mildly aphasic" these days.

"His efforts to adapt to the language and bodily impairments coupled with his ingenuity have allowed him to minimize his activity limitations and his participation restrictions," Rogers said.

Fellow Toastmasters who have seen Gordon's progress over the years agree that he has come a long way. Gordon's ambitions have grown as well.

"I had it as a hope (that I would teach again)," Gordon said. "I didn't ever think I would."

Today he smiles, "I did it before, and I'll do it again."