

Surgeon Who Survived Ischemic Stroke - Dr Siva Murugappan

Dr Siva Murugappan experienced an ischemic stroke while working in a hospital as a surgeon in 2017. He co-authored a book about his experience titled FRONTIERS The Journey Of Two Surgeons Through Stroke

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Bill 0:00

Have you been able to get back to work?

Dr. Siva Murugappan 0:02

It took me almost two years, then I was able to do minor surgeries by 2019. And then since I was doing minor surgeries, that was like a rehabilitation for me, which made me because you go to the hospital, you stand you do some minor procedures.

Dr. Siva Murugappan 0:24

So all that develops endurance in yourself. And then I posted some more when for supervision for endoscopy, and I've got permission for endoscopy now. So I do both minor surgery and endoscopy. That keeps my week quite busy. So that's how I'm going, but I still can't run.

Dr. Siva Murugappan 0:44

My next phase is I'm trying to go back to full surgery, at least just to get the license and then I decide what I want to do.

Intro 0:56

This is the recovery after stroke podcast, with Bill Gasiamis, helping you navigate recovery after a stroke.

Bill 1:09

Hello and welcome to the Recovery after Stroke podcast. If you are a stroke survivor with a story to share about your stroke experience now's the perfect time to join me on the show. The interviews are not scripted, you did not have to plan for them.

Bill 1:22

All you need to do to qualify is be a stroke survivor who wants to share your story in the hope that it will help somebody else who's going through something similar. If you are a researcher who wants to share the findings of a recent study, or you are looking to recruit people into studies, you may also wish to reach out and be a guest on my show.

Bill 1:40

If you have a commercial product that you would like to promote that is related to supporting stroke survivors to recover there is also a path for you to join me on a sponsored episode of the show. Just go to recoveryafterstroke.com/contact Fill out the form explaining briefly which category you belong to. And I will respond with more details about how we can connect via Zoom.

Introduction - Siva Murugappan



Bill 2:02

This is episode 278 my guest today is Dr. Siva Murugappan, who was working as a general surgeon in the hospital when nurses were on duty. Notice that he was showing the signs of an ischemic stroke. Dr. Siva co-authored a book about his experience with his wife Prima, which is titled *Frontiers, the journey of two surgeons through stroke*. Dr. Siva Murugappan welcome to the podcast.

Dr. Siva Murugappan 2:28

Thank you.

Bill 2:29

Tell me a little bit about your story.

Dr. Siva Murugappan 2:31

I was a General Surgeon here in Ontario. I've been working in Canada since 2006. And in 2017, I was treating a patient on the ward. When I developed a stroke. It was around 4 pm. In the evening, the nurse identified that I was having a stroke.

Dr. Siva Murugappan 3:02

And they took me to the ER straight away. I had my anticoagulant given to me very fast within 20 minutes. And then I was in ICU. And then I was transferred to rehab where the whole program of rehabilitation started.

Dr. Siva Murugappan 3:25

The first few days in ICU everything was like a blur because you just had the stroke and there's I think brain cell swelling and things like that. But then the rehabilitation, I was there in the hospital for three months.

Dr. Siva Murugappan 3:46

Slow and steady progress. But the best one was when I was able to walk with the help of a walker and the physiotherapist took the cake. Because once you have had this and you're paralyzed, you can't move and they're thinking what's going you know, you don't realize it until it hits you. And yeah, that was the highlight of my whole rehab. Stay there.

Bill 4:21

Yeah. So how old were you?

Dr. Siva Murugappan 4:26

I was when I had my stroke I was 57

Bill 4:29

What does a general surgeon do? Every day. So I understand. You do surgeries but what is the general surgeon's practice what kind of surgeries

Dr. Siva Murugappan 4:43

so usually anything inside the abdomen is general surgery. Our day typically starts say about seven o'clock in the morning. You go and round the wards. You see your patients make the decisions for the day, and then you go off to either the OR, that is surgery, or you go to endoscopy or you go to minor surgery, or you go to the office to see new patients said that will be the typical flow in a week.

Bill 5:22

Your process to become a general surgeon? When did you start your studies? And how old were you when you finished?

Dr. Siva Murugappan 5:33

I became a general surgeon in 1993. I was in Malaysia when that happened, and I was 33 years old.

Bill 5:49

And when did you start your studies? How old were you when you started your studies?

Dr. Siva Murugappan 6:04

1990 was when I started being in the surgical program. Do you mean my undergraduate or

Bill 6:13

The very beginning your decision to go to university and become a medicine in 1980. The reason I ask is because I'm just trying to get an understanding of the period that it takes for somebody to become a medicine student, and then eventually get to the stage of being a surgeon.

Bill 6:14

So it's your entire life almost because up until your first few years of life you're in, in Preparatory School, and then, you know, small school for children under the age of 12. And then you go to high school or something along those lines. And then you're spending the majority of your adult life in training to be a surgeon.

Bill 7:02

Well, you might not know at the time that you're going to be a surgeon. But by the time you get there, you practice most of your adult life to be a surgeon, and then you have a stroke. And that takes and then you lose everything right? So that's the thing. And you're a medical person.

Bill 7:21

So as a medical person, I'm wondering whether or not it took you by surprise that the fact that you now are not the person providing the help, you're the person that's meant to receive the help. How did you come to terms with all of that stuff happening? All in the moment?

Dr. Siva Murugappan 7:40

Oh, boy, I you know, the thing that came to my mind always, and this can't be happening to me, you know, but once you try to get out of the bed, you can't. Okay, this has happened, then you come to terms with it. But it took me a while, but not that long. I think about a week. Come to terms Okay, now I got to see what I got to do. Rather than keep on thinking about why this has happened.

Bill 8:17

And you were in the hospital when it happened as well. You were in the hospital, that was

Dr. Siva Murugappan 8:21

the luckiest thing for me.

Bill 8:25

Did you have any idea that something was wrong? Did you get some sort of a sign? Did you in hindsight, notice that you were potentially in danger?

Dr. Siva Murugappan 8:38

No, nothing at all. Just like that.

Bill 8:44

Yeah. And then is there an underlying cause of this particular ischemic stroke? Do? Do you will be able to determine what caused it?

Dr. Siva Murugappan 8:57

No, we didn't. We were not able to find out the exact cause of it.

When Dr. Siva Murugappan a patient

Bill 9:07

How does that feel? Being a doctor and not being able to find the cause of a condition that you have? Is that challenging?

Dr. Siva Murugappan 9:17

Well, it was left with the other doctors. So I was on the receiving end. So you know, it's their problem. Yeah.

Bill 9:25

All right. Fair enough. So, you're in the hospital, you've gone through the whole process, they discovered that you've had a stroke and they've been able to remove the stroke with TPA. Was it TPA that was given?

Dr. Siva Murugappan 9:48

It was TPA? That thing just dissolves the blood clot.

Bill 9:57

And did you notice a difference Did you feel a difference? After that blood clot is gone? What is that feeling? Like? How does? Do you come back online? What? What's that? Like?

Dr. Siva Murugappan 10:09

It's like, I can explain to you exactly what I felt the TPA was going in while the thing was going into the body, I was able to move by left side. And I was like, I

was showing the nurse, look, yeah, everything is moving very well. And then say two hours later, nothing moved. That's when the swelling of the brain cells takes place and that makes it even worse, I think.

Bill 10:45

And then the swelling eventually doesn't subside, what happens to the swelling? After that.

Dr. Siva Murugappan 10:53

Run the premises, and it will subside it might take about one to two weeks, but lasting effects like constant inflammation, in that area, can be kept on going which can extend the paralysis So to your question about how was I behaving as a doctor, being a patient? I kept on reminding myself you are a patient now Siva, you don't question anybody you just take it even if it is utter ridiculousness you just accept it.

Dr. Siva Murugappan 11:35

I kept on reminding myself about that. Because you know why the slightest thing The nurse will think, Okay, the doctor is trying to you know, show his strength or something like that, so you've got to be more extra careful, so that you don't cross boundaries while receiving treatment. But I think they're extremely nice to me, but it is just me, you know.

Bill 12:03

You're not a doctor at that moment. You're a patient, and you are receiving the care so you have to allow people to make their judgments and do their work. Yeah. That must be surreal. There must be a surreal situation to find yourself in.

Dr. Siva Murugappan 12:23

Oh, yeah. Used to just give orders and walk off. And then now you are here okay? Even if you can see that they can't do it properly. You just have to close one eye.

Bill 12:41

Yeah. So it's been a few years now. It's been a few years have been able to get back to work what was the situation like for you to transition back to what is called a regular life

Dr. Siva Murugappan 13:01

it took me almost two years. Then I was able to do minor surgeries in 2019.

Dr. Siva Murugappan 13:20

And then since I was doing minor surgeries, that was like a rehabilitation for me. This made me because you go to the hospital, you stand you do some minor procedures. So all that develops and runs in yourself.

Dr. Siva Murugappan 13:39

And then I push it some more when for supervision for endoscopy. And I've got permission for endoscopy now. So I do both minor surgery and endoscopy. That keeps me quite busy. So that's how I'm doing. But I still can't run. My next phase is I'm trying to go back to full surgery, at least just to get the license and then I decide what I want to do.

Intro 14:12

If you've had a stroke, and you're in recovery, you'll know what a scary and confusing time it can be, you're likely to have a lot of questions going through your mind. How long will it take to recover? Will I recover? What things should I avoid? In case I make matters worse, doctors will explain things that obviously, you've never had a stroke before. You probably don't know what questions to ask.

Intro 14:37

If this is you, you may be missing out on doing things that could help speed up your recovery. If you're finding yourself in that situation. Stop worrying and head to recoveryafterstroke.com where you can download a guide that will help you, it's called Seven Questions To Ask Your Doctor About Your Stroke.

Intro 14:56

These seven questions are the ones Bill wished he'd asked when he was there. recovering from a stroke, they'll not only help you better understand your condition, but they'll also help you take a more active role in your recovery, head to the website now, recoveryafterstroke.com, and download the guide, it's free.

Bill 15:18

So you have to prove yourself again, is there some kind of a cognitive test as well as a physical test that you have to do to prove yourself being capable? To deliver procedures?

Dr. Siva Murugappan 15:30

I don't, I don't think they want any cognitive test. They just want to see, okay, you are in the situation we are here just got disturbed there. We just have to prove

that if I'm the man leading surgeon there, will I be able to do it?

Dr. Siva Murugappan 15:56

And I have to do it on a live patient. And there will be an assessor, another surgeon who will assess Okay, is he able to do things? Okay, and they might throw in some things, see how I manage a complication?

Bill 16:12

You know, when you're in surgery, and you're the main surgeon, how many other surgeons are supporting you?

Dr. Siva Murugappan 16:24

Usually one assistant, just one, one assistant wonders.

Bill 16:33

And the assistant is as capable, for example, as you are so that if you need to step away or move along.

Dr. Siva Murugappan 16:43

Still not as capable as the surgeon.

Bill 16:47

Okay, what's the assistant's role then?

Dr. Siva Murugappan 16:50

The system's role in surgery is all about exposure of the particular body part. So usually means retraction of the abdomen so that we can have a proper view and do the things we need to do. Then cutting, retracting and cutting, retracting are the main things of assistance.

Bill 17:17

Okay. So they're assisting you with the procedures that you're performing so that they're performed more quickly.

Dr. Siva Murugappan 17:30

Yes, it can translate into time saved. If not, just imagine I put a suture in and then have to cut the suture. So every time it's like excessive extra movements, which is not necessarily the assistant is there.

Bill 17:49

It's not as efficient.

Dr. Siva Murugappan 17:51

Yeah, efficiency improves. And I think also, for us, surgeons, no matter what happens in your mind space, you still got to keep your calm and cool. So if you're doing everything yourself, you get agitated fast.

Bill 18:12

Okay. So it's about having some tasks delegated to somebody else so that you can focus on the task at hand.

Dr. Siva Murugappan 18:20

Yeah, like the task, the nurse will be to get all the instruments in the correct order so that we can just pick them up.

Bill 18:30

Okay. So when you're being assessed? Is that an ego problem? There? Is somebody watching you while you're doing surgery? You know, do you have challenges with the fact that somebody is assessing you or because you went through this process of being comfortable as being the patient? And then now wanting to get your wings back, so to speak? Is it good to have somebody assessing you and making sure that you're okay, what's the thought process around that?

Dr. Siva Murugappan 19:04

My thought process Bill, is anybody under the microscope, you won't do well don't you think?

Bill 19:12

That's kind of my thought, but I wouldn't know what happens when you're, you're a surgeon. Yeah.

Dr. Siva Murugappan 19:19

But when you're a surgeon, they put you through that, there's no two ways about it.

Bill 19:28

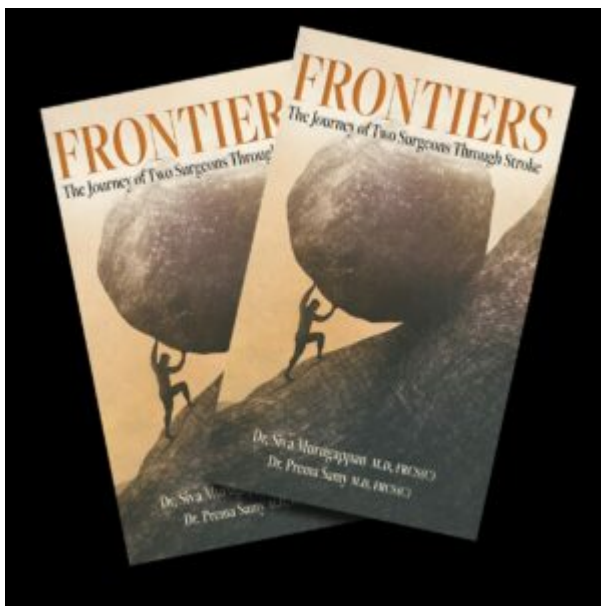
I understand why they would do that. I'm perfectly happy that they did that to you. But as you said, somebody watching you while you're working to assess you

on a live patient can be a little nerve-wracking, but I imagine surgeons are generally cool, calm, and collected because you have to do work that's life-saving, life-threatening, whatever. So you can manage that type of scrutiny.

Dr. Siva Murugappan 19:58

I can feel I'll also soon yeah, yeah.

Frontiers: The Journey Of Two Surgeons Through Stroke



Bill 20:08

So you've decided to write a book about the journey? Can you give me a little bit of an insight as to where that idea came from? Why was it necessary to write a book? Let's talk about the book for a moment. Let me talk about the book for a moment by just stating the title of the book Frontiers, the Journey of Two Surgeons through Stroke. So there's somebody else involved in this story, not just you. Yeah.

Dr. Siva Murugappan 20:38

It's me and my wife, who was the primary caregiver. So it's my perspective and her perspective also. Because she's also another surgeon. So she has to continue doing surgery as well as take care of me. So her perspective is, actually hers was a bigger burden than mine. And the reason to wrote the book was my wife's.

Dr. Siva Murugappan 21:16

She kept telling me why you need to tell your story to the world, you need to tell your story. That's how this came about. And she went to, the rehab place. She was trying to find some books on stroke, written by patients. We don't want to read all these medical books, because we have read them anyway.

Dr. Siva Murugappan 21:43

And she couldn't find any. And then our situation was unique in the sense. The surgeon getting a stroke and trying to come back

Dr. Siva Murugappan 22:00

It would have been an easier, easier pathway in the stroke and made me permanently paralyzed. Decision May. Really, yeah, if I'm permanently paralyzed, and the decision is made for you. Okay. Yeah, you're not going to struggle through a paralyzed limb. But once you start recovering, and you know, you can recover, then you have to.

Bill 22:31

When a decision is made for people who have had paralysis based on their leg, or their arm, or their left side, or the right side, it's still a struggle not to overcome other things.

Dr. Siva Murugappan 22:44

No, it is a struggle for daily life. Daily. What do you call the daily activities? Yeah. That itself is a struggle. Why would you want to go back to surgery? Right. Now. So that's how I looked at it. But this one I recovered. So I said, I'm going back. So the struggle of Gutenberg is also there.

Bill 23:12

Is part of the story. The cover has a picture of Sisyphus. Yep. And Sisyphus, for people who don't know is it's an ancient ancient Greek mythological story of a man holding a boulder and trying to push it up a hill. And the story goes there every evening when he finally gets the boulder to the top of the hill.

Bill 23:40

When he wakes up in the morning, the Boulder is at the bottom of the hill, and he has to do it again. And he's been punished by Zeus. Zeus has given him this task because since the first was, I think he was a little bit cheeky and did the wrong things, something like that. And that's his lifelong punishment. Give me an insight into why the cover has a picture of Sisyphus on it.

Dr. Siva Murugappan 24:06

Bill, it's a daily struggle, man. It's a daily struggle. So you got to be like, conscious of everything that you are unconscious of before. You have to be

Bill 24:29

what are some of those things that you have to be conscious of that you previously could take for granted?

Dr. Siva Murugappan 24:39

Like a simple thing, like getting into your car. In glory, I opened the door with my left hand and then I held the steering wheel. And then I feel that okay, I've got a good grip, and then get into the car. I don't think anybody just thinks about all those things. Yeah,

Bill 25:06

I know exactly. I know exactly what you mean. So when I wake up in the middle of the night to go to the bathroom I have to physically ensure that my feet are on the ground of my bed. If I don't what happens is I lose my I can lose my balance in the middle of the night because my bed because sorry my left leg is still sleepier than my right leg.

Bill 25:36

It takes a little bit of time to warm up and to wake up and if I'm not paying attention when I'm half asleep and I don't notice that my leg is not on board I can fall over in the middle of the night oh so that happens every single day. Whether I wake up in the middle of the night or whether I wake up in the morning I have to ensure that my left leg is up for the task.

Dr. Siva Murugappan 26:14

I can imagine that too, consciously making sure my legs were on the ground now so I didn't know.

Bill 26:23

So with your daily struggle, this daily struggle is it does it add a level of difficulty on some days that makes some of your days harder? Or is it just part of life now now that six years have elapsed

Dr. Siva Murugappan 26:49

I'm beginning to be working and moving at a spinal level now. I don't think as

much as I used to do two years ago that's much that much I can say I think time slowly heals and that is a great hope we can offer

Bill 27:14

Do you also feel like you're adjusting personally you're you're finding ways to adjust and do things differently and now that started to become subconscious

Dr. Siva Murugappan 27:30

that's exactly what I mean yeah subconscious

Bill 27:39

what were the hard parts for your wife to have to deal with? What did she have to deal with as well as going to work and then coming home to be your caregiver?

Dr. Siva Murugappan 27:54

I'm always lamenting to her so she's got to be a counselor at home and a surgeon in the hospital

Bill 28:06

That's a profound statement

Dr. Siva Murugappan 28:12

That's been a lot on her plate.

Bill 28:20

Is it the other things that you need to talk about regularly with your wife? Are they stroke things what are they are they identity issues? What kinds of things challenge you that you need to talk about regularly?

Dr. Siva Murugappan 28:46

Well, things like basically organizing the day. From this time to this time, we are going to do this, and then after that there, the next goal. I do the grocery shopping nowadays. I just want to be out. So that's a constant rehab. And I hope that in the coming years all that will become like a subconscious level

Dr. Siva Murugappan 29:22

I was never a good organizer. I never like you know, plan first thing in the morning for the day. And now I do it.

Bill 29:32

And is that because you have to get through your day to make it through the day?
Or is it something else that's happening there?

Dr. Siva Murugappan 29:40

It's not I think, initially when it started, it had to be like that. And so I'm just carrying it down.

Bill 29:51

Is it helpful?

Dr. Siva Murugappan 29:54

Not really, to tell you a fact not really

Bill 30:00

Is that because you're putting a lot of time and energy into planning? how your day is going to unfold rather than just letting it unfold?

Dr. Siva Murugappan 30:12

I think so. I think my personality was such that I never used to put too much emphasis and planning and energy on to plan for the day. I just let it unfold. And I tackle it as I go.

Bill 30:34

How many hours of surgery do how many hours? Are you working these days?
And has that changed from the hours that you did before the stroke? Oh, yeah.

Dr. Siva Murugappan 30:44

Now I work about 40 hours a week. I used to work about 8090 hours a week. And that includes the days you're on call. And all that. Now, 40 hours in the work week is like, you go you do one particular work part of the place and you come back home. Those days, it used to be all over the place

Bill 31:24

in multiple locations, and then you do your rounds, and then you check up on your patients. Are you still doing all of that? Or any? Are there fewer surgeries involved in your day? Why did the hours decrease from 80 to 40?

Dr. Siva Murugappan 31:38

Because my type of surgeries are minor surgeries, which can be done under local freezing, uh huh. In the area and do the surgery. So after the surgery, the patient

walks back home. So I don't have to look after him after that. Then he comes back, he or she comes back on. It's all outpatient. So that has reduced my inpatient care.

Bill 32:07

Okay, so the day procedures people come in, they have a procedure, they go home, and then they might see you in clinic a few weeks later for

Dr. Siva Murugappan 32:16
a checkup. Exactly.

Bill 32:20

And you have clinic days, and then you have surgery days.

Dr. Siva Murugappan 32:25
Exactly.

Bill 32:27

Okay. Is that better than you're doing 40 hours a week? Personally, it doesn't feel okay. , I have a sense that surgeons and doctors thrive on what may be tiring and difficult to do 60 or 80 hours a week, but they thrive on their job and on helping people and on being there for them and then seeing their patients feel like it's part of the territory. And when it's taken away, and it's decreased to half, does that mean that that's not a good thing, or is it in your case good that you have less work to do?

Dr. Siva Murugappan 33:13

I think in my case is a good thing for going forward. It is all about how much stress you're putting on your body and mind. And now after the stroke, I realized that it takes a stroke for me to realize that those days, we don't realize it because we are so engrossed in it.

Bill 33:38

Right. One of the weird things is, is that I was involved many years ago in a little television, promotional news story that was done for the Stroke Foundation, where they were talking about how the amount of hours that people work puts them at greater risk of stroke. And, of course, anything above 40 hours a week.

Bill 34:05

The statistics towards the risk of stroke increase almost exponentially and then by the time you get to 80 hours a week it's a pretty terrible statistic. Many people are going to be unwell, they may not have a stroke, or they may have another medical condition doctor's job is to keep people out of the hospital.

Bill 34:26

You guys seem to be doing the kind of work and the amount of hours that increases the risk of medical emergencies for yourselves. Have you ever contemplated that before? Have you ever taken notice of the fact that you guys do almost the exact opposite of what is recommended for the net for the general population?

Work culture and burnout in the medical field

Dr. Siva Murugappan 34:58

It's really funny you asked me that question that has never occurred to me. I think training is such that you're just following in the truck. And you don't stand back and step back and think, Okay, what is going to happen to my body, my mind if I keep on working like this? But your training was such that you keep on training like this for many hours, you get good at it, and then you don't feel it.

Dr. Siva Murugappan 35:30

So that's a positive way of looking at working for long hours. And your body is used to it, and you're questioning yourself, even if somebody asked you don't you feel tired? Not, you know, end of the day, I can still go for another surgery. So it used to be like that. And then you also didn't want to be seen, like, you know, you can't endure this journey. That's the other part of it. To your superiors and your peers, you cannot be seen that you cannot endure this is not a struggle, this life.

Bill 36:18

His way of life? You know, if we put factory workers or production line workers on an 80-hour week, okay. Okay, the streets would be filled with labor unions. Complaining about working conditions.

Dr. Siva Murugappan 36:39

Definitely. But they're the work the workers, if you put them through a training

period of five years of 80 hours and more a week, later on, they won't be complaining, there won't be much of a, you know, this union thing and all that. I think it all has to do with that formation period, the training period.

Bill 37:07

And how intense it is?

Bill 37:15

It just staggers me, does it? Do you see many of your colleagues come and go as a result of the large amount of time and effort that needs to be put into a job? Like being a doctor or a surgeon? Is it a high rate of loss of people from the industry or from the occupation?

Dr. Siva Murugappan 37:41

No, I don't see that. You know, so if we happen to see that, and if it was significant? By the time we all decide to become surgeons, that would be a big thing coming up. The question, why would you want to do this, you know, hear all the while people are just encouraging you all the way. Everybody.

Bill 38:12

So it's a culture.

Dr. Siva Murugappan 38:14

It's a culture. Yeah. So maybe I should start discouraging.

Bill 38:20

I don't know what you should do. And don't don't take any advice from me. But I'm just worried about all those amazing doctors and nurses who struggle, being at work away from their families for 60 hours a week, or 70 hours a week, or 80 hours a week. I thoroughly appreciate it. Thank you, me wrong. I've benefited from that system.

Bill 38:43

But when I'm doing this type of work, the work that I'm doing now, and I'm interviewing people and understanding how stroke occurs, many of the people who I've interviewed will tell me they're overworked. And there's not enough downtime, and there's not enough time for themselves and there's not enough time for them to there was not enough time for them to go to the doctor or see a doctor or get blood tests or whatever, or take the headache seriously.

Bill 39:09

And it's just to me, it seems like there's a whole industry of people inside these four walls, they may as well be a factory inside a hospital. And they are working to double the amount of time that the majority of the people in the population are working. And somehow it's just part of the job. It's everything that you're meant to do and don't worry about it.

Dr. Siva Murugappan 39:36

Yeah.

Bill 39:39

Did you have time for yourself during this 80 Hour Workweek Ken Do you have time to decompress or to run or to be fit?

Dr. Siva Murugappan 39:50

I had a bill I golf. I make all the weekends when I'm not on call. I golf with Okay, so that takes away my mind completely from the hospital. I don't think about the hospital operations at that. That time. Yeah. Okay.

Dr. Siva Murugappan 40:09

So well with your friends, your golfing that that's a good de-stressor and downtime for you. And then, of course with family, you go back home and then you go for dinners, or you cook with your family. That's another downtime.

Bill 40:25

Yep. Are you any good at golf?

Dr. Siva Murugappan 40:29

That's a good question.

Bill 40:33

Tiger Woods. Okay. Okay, so it's not about being good at golf. It's just about being at golf.

Dr. Siva Murugappan 40:42

Yeah, that's right.

Bill 40:47

Yeah, I've never played golf. I don't think I ever will. Not when I was capable, physically capable. And I want now it's a very good way to run a good walk of

golf, isn't it?

Dr. Siva Murugappan 41:03

You know, you say that, but it is funny when you start playing with your friends. And the ball. The fairway is so huge in front of you know, somehow you managed to hit that ball into the water by the side. Laughter to the greens? Yeah.

Bill 41:26

Yeah. It's almost impossible to miss the fairway. But you ended up in the water. Yeah.

Dr. Siva Murugappan 41:33

And you still managed to miss the ferry?

Bill 41:39

Understand? How many holes do you prefer to play? 918 18. Okay.

Dr. Siva Murugappan 41:48

Yeah.

Bill 41:48

Were you able to get back to Golf quite well, after all of the stuff that you went through? Did it? Also was that also a difficult transition?

Dr. Siva Murugappan 41:58

It was a difficult transition. Nowadays, I'm able to walk nine holes play golf, and come back. Yeah, I considered that an achievement. So I'm slowly getting there.

Bill 42:19

Yeah, that's good. I didn't have to be a little bit too draining, on your energy levels.

Dr. Siva Murugappan 42:26

It is even nine holes is are draining. I try to walk rather than take Cubby.

Bill 42:39

So you feel like this is all part of your rehabilitation? I love your daily tasks. Everything. Yeah, every single thing. Yeah, I do love that I ride my bike for the same reason. And I have an electric bike. Because pedaling with my left leg causes far more fatigue than my right leg. So if I, if I went for, say a 20-minute

ride, my, my right side is good to go for another 20 3040 minutes or an hour. My left side has already said enough, you know, get me home.

Bill 43:16

But with the electric bike, because it assists the pedaling, I can be out for two or three hours. And it doesn't feel like I come back exhausted even though I have to rest. It's a much it allows for a much longer stay outside. And that's the purpose of being on the bike to be outside and feeling the wind and all that kind of stuff. So I love the fact that I've been able to get back to riding and it's not painful and difficult.

Bill 43:49

As a result, I get to still enjoy it. And I consider it part of my rehab. And one of the other things I do for my rehab is where there's an escalator. Yeah. And stairs, you know how sometimes you'll go to a venue and there'll be stairs, going up two or three flights, but then also be escalators. I always take the stairs if I can. So I kind of see it as like, while I can take the stairs, I am going to take the stairs.

Bill 44:20

And it's a difficult climb three flights to the particular spot I want to go and my leg is tired by the time I'm going up to the third flight. But it's kind of like a little. It's a little exercise. It's a little rehabilitation. For example, a shopping center is a perfect place when you have multilevel shopping malls. And then and I use that as a little bit of a rehabilitation thing. I've been doing that from the beginning when I was able to walk again.

Life after a stroke and its impact on mental and physical abilities

Dr. Siva Murugappan 44:57

That's great. Yeah. Thank you Do the same thing in the hospital take the stairs. Yeah. But you know, the pace is quite slow.

Bill 45:12

Yeah, you're not getting in anybody's way. Yeah. And the same thing with the shopping malls nobody's using the stairs anyway, they're all using the escalator so it's pretty good. So tell me about the book. When is it out? Is it ready to

launch?

Dr. Siva Murugappan 45:32

I think it's launched

Bill 45:34

because I do see it on Amazon here.

Dr. Siva Murugappan 45:38

It's published on Amazon. We have a website called [frontiers frontier stroke.com](http://frontiersfrontierstroke.com). There's a website that is available in all bookstores other than Amazon it's on Barnes and Noble.

Bill 46:04

Okay, you've got a copy of the book there. I do. Hold that up so people can have a look. I'll include all the links and everything and how many pages is it?

Dr. Siva Murugappan 46:17

100 pages. It's a short read.

Bill 46:27

Give me a bit of an idea of the theme.

Dr. Siva Murugappan 46:33

Most of it I think we have spoken about Yeah, and then all my feelings at that particular time I put it in detail. So a person who's going through the same story can feel it I think it's just like you need company Okay, the other guy also felt the same thing. So it makes you feel a bit better.

Bill 47:03

Yeah. Less alone.

Dr. Siva Murugappan 47:05

Yeah.

Bill 47:07

How have your colleagues responded to your journey

Dr. Siva Murugappan 47:19

My peers went about their lives as usual. Of course, I didn't expect anything else.

They were busy trying to get another surgeon so that they didn't have to do many calls. I mean, that's all expected at Murano's physical level I mean, they felt sorry for me.

Dr. Siva Murugappan 48:03

Probably they were thinking shouldn't work too hard. But it was shocking because I worked in a small community. So all the doctors were quite shocked I haven't done a talk to many of them to see how much they have reduced their working hours after this has happened to me.

Bill 48:36

Probably none.

Dr. Siva Murugappan 48:38

Yeah. Yeah, it is already ingrained in every cell of the body. It's just going to be there.

Bill 48:46

It's part of the identity. Tell me about what the hottest part of stroke was for you.

Dr. Siva Murugappan 48:58

It was mental. Ah, yeah, it is like you're sitting down there and thinking and thinking and thinking and you're trying to tell yourself not to think just be that never happens. With the brain and all the brain waves going on?

Dr. Siva Murugappan 49:20

Of course, you're going to be thinking and he's always thinking okay, will I be able to do this will I be I mean, my career as such one I was thinking about it. But then you know, you want to move you want to be independent. So all the more all your thought processes going into that. I didn't mind my physicality to be a real problem.

Dr. Siva Murugappan 49:53

But the mental ability to understand Okay, y'all Life has changed. You have to adapt. That was a big hurdle. You'd asked me that. When I was in that rehab, the therapist, one of the therapists, came, I wanted to talk to you about today, the topic is life after stroke.

Dr. Siva Murugappan 50:25

So I just looked at her and I said, What do you mean life after stroke? I'm going back to work. Uh-huh. So I then realized they were thinking in their mind, I won't be going back. So they wanted to teach me something else to do with my life, you know?

Getting back to work after a stroke

Bill 50:46

Yeah. How much harder? Would it have been if you didn't get back to work?

Dr. Siva Murugappan 50:53

Or it would have been very hard. Well, my personality, I would have been crying every day inside.

Dr. Siva Murugappan 51:07

It's not like I'm totally or even more than 50% disabled, I can still move and do a lot of things. That sort of pushes me further. No, I can go all the way, you know?

Bill 51:23

Yeah. Take what you've got. And who will use it to you to the best of your ability to the max to the greatest extent if you can? Yeah. Yeah, I understand that. So what what's something that strike has taught you that was unexpected that you didn't realize?

Dr. Siva Murugappan 51:45

The biggest thing I think I learned from it is patience. Patients, especially those with stroke, don't think that by doing a lot of exercises and doing them more often, they're going to get better quickly. Stroke takes its own time. And the time we are not talking in terms of days, weeks, or months, it's yours. The only takes years, nobody tells.

Dr. Siva Murugappan 52:17

But then this happens. And you have to be very patient. And also, I would say, stop planning. Take every day at a time. No, people come and say one step at a time. I never used to bother about that statement.

Dr. Siva Murugappan 52:37

I do realize now you have to be controlled in that one step at a time. You can't

expect to achieve a lot of things by putting in more work. It doesn't happen that way. Your legs become more spastic, rather than do anything good for you.

Bill 52:58

Yeah, I learned that lesson as well, that time that everything takes time I've been going through this for nine for since 2012. For 11 years. My brain surgery was in 2014. So it's been nine years since my brain surgery. And it's the longest time I've had to focus on a task in my life. And that task is rehabilitation, that task is being better, feeling better, being more active.

Bill 53:32

And let me tell you, there are ups and there are downs, and there are things that get in the wipe all the time. And what might be minor for another person who hasn't had a stroke is a major setback for me. It takes ages, you know.

Bill 53:48

So time it's just that everything does take time. It's such a it's such a simple thing to say. But it's a different thing to deeply understand what that means and to be okay with the fact that it's been nine years and my recovery is still ongoing.

Dr. Siva Murugappan 54:10

Always recover I think.

Bill 54:14

Do you think it's made you a better surgeon and better doctor?

Dr. Siva Murugappan 54:18

I think so. In terms of I give my patients a better year now. I listen to everything they say. Those days, they come and tell me a few things. I've already made my decision. Okay, this is probably what it is. Now, I don't focus on what I would like to diagnose.

Dr. Siva Murugappan 54:45

I just listen to them. It's like storytime, you know, we just sit down there. You listen to them. Maybe you want to add or subtract something from them. And it's going well I think I have one understood the essence of one step at a time. Try not to get too many things within a short period of period.

Bill 55:12

Yeah. This means that you're more likely to achieve something because if you don't have a deadline or a timeline for a task or an outcome, you won't be disappointed that you didn't make it there in 12 months or 13 months. You're always thinking about getting to the destination, but it's not about the destination.

Bill 55:36

It's about the journey. It's about continuing the journey, wherever the destination is, and however long it takes to get there. What would you like to tell other people who have just had a stroke? Maybe they're listening to this podcast, it's the first one they came across. And, you know, they're hoping for some guidance and support what would you like to tell a recently diagnosed stroke survivor?

Dr. Siva Murugappan 56:00

There is light at the end of the tunnel. You just have to be a bit patient and keep moving.

Bill 56:09

Thank you so much for joining me on the podcast and reaching out to be on. I appreciate you sharing your story. And I look forward to hearing about how your book does. Thanks for joining us on today's episode, remember to grab a copy of chapter one of the book, the unexpected way that a stroke became the best thing that happened just visit recoveryafterstroke.com/book.

Bill 56:38

Take a look around and discover what the book is all about. Click the Download Free Chapter button. As always learn more about my guests including links to their social media and other pages. To download a full transcript of the entire interview please go to recoveryafterstroke.com/episodes Thank you to all those people who have already left a review it really does mean the world to me and it makes a massive difference in helping others who need this type of content.

Bill 57:07

And it helps them to find it easier and make the stroke recovery just a little bit better. If you haven't left a review and would like to the best way to do it is to leave a five-star review and a few words about what the show means to you on iTunes and Spotify. If you're watching on YouTube, comment below the video I love answering people's questions or interacting with them after they watch the

video.

Bill 57:32

Like the episode and to get notifications of future episodes, subscribe to the show on the platform of your choice. Thanks again for being here and listening I truly appreciate you see you on the next episode.

Intro 58:00

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Intro 58:17

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Intro 58:30

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Intro 58:45

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Intro 59:02

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Intro 59:19

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