

Surviving Ischemic Stroke, Heart Attacks, and Arthritis: Fred's Story of Resilience and Recovery

Fred shares his story of surviving an ischemic stroke, heart attacks, and arthritis, focusing on resilience, recovery, and overcoming adversity.

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Introduction - Surviving Ischemic Stroke

Bill Gasiamis 0:00

Welcome to episode 321, of the Recovery after stroke podcast. In this episode, I'm excited to introduce Fred Reader, a remarkable stroke survivor of not only an ischemic stroke, but also multiple heart attacks and long-standing battle with rheumatoid arthritis.

Bill Gasiamis 0:19

Fred's journey of recovery is nothing short of inspiring, as he opens up about the challenges he faced from his stroke, including aphasia, fatigue and relearning to

walk, and how he's managed to rebuild his life despite the odds, Fred also shares his experiences with heart surgeries and living with a defibrillator, all while maintaining an optimistic outlook on life, his determination, resilience and practical approach to recovery will resonate with anyone who's faced a health crisis.

Bill Gasiamis 0:51

This is an episode packed with hope, wisdom and insight for anyone navigating life after stroke. Just before we dive into Fred's story, I'd like to take a moment to talk about how you can support the podcast. If you find these episodes helpful, inspiring or insightful, please consider supporting the show through Patreon, at patreon.com/recoveryafterstroke, Your support helps keep the podcast going and allows me to continue sharing powerful stories like Fred's providing hope and practical advice to stroke survivors and their families.

Bill Gasiamis 1:28

Fred Reader, Welcome to the podcast.

Fred Reader 1:31

Thanks, Bill, good to be here.

Bill Gasiamis 1:34

Great to have you here. Tell me a little bit about what happened to you.

Surviving Ischemic Stroke

Fred Reader 1:39

On the eighth of January, 2020, I suffered a stroke. It was an ischemic stroke on the left-hand side, so I would suffer a little bit from aphasia. But prior to that, I'd had two heart attacks about five years before, and my mother had rheumatoid arthritis, and I got that almost 20 years ago. So had a little bit of an interesting time.

The Cause Of Heart Attacks

Bill Gasiamis 2:13

What was behind the heart attacks? Did you know how you came to be in that situation?

Fred Reader 2:20

My father's father died at 48 from a heart attack. My father smoked heavily, drank pretty much like the drink, but yeah, so it was almost going to come to fruition just because of his lifestyle and the fact that his father had a heart problem.

Bill Gasiamis 2:47

Did you have a similar lifestyle smoking and that type of thing?

Fred Reader 2:51

Yeah, yeah. I smoked, I drank, enjoyed it. Enjoyed both of them, far too much, the truth be known.

Bill Gasiamis 3:00

It is a weird thing smoking. I know it's not good for you, but I miss it, and I used to enjoy it as well, and I still enjoy the smell of other people smoking near me or around me. It's some weird thing that happens.

Fred Reader 3:16

Yeah, so I understand that totally. I really enjoyed, enjoyed it, but yeah, these I gathered away probably six years before I had my heart attack, just because the rheumatoid arthritis was starting and to to help alleviate the rheumatoid arthritis, they give you a thing called methotrexate, which is a drug which has bad effects on your liver. So I decided if I was going to be able to cope with the rheumatoid arthritis, the smoking had to go. So one of those things.

Bill Gasiamis 4:05

And then you had a heart attack six years after you gave up the smoking roughly, and then you had a second one. So what was the reason for the second heart attack?

Fred Reader 4:16

They didn't find the first one. I had that. I might have felt-illish, whatever the second one I knew about. Second one, it was December, probably two days after my mother in law's, you know, funeral, and I've had a heart attack, and it was pretty, pretty bad, because the right slow to my heart's damaged the bottom end of its death, so it was a pretty major heart attack.

Bill Gasiamis 5:07

So how old were you when that happened?

Fred Reader 5:09

53.

Bill Gasiamis 5:11

Okay, and then a few years later, you have a stroke, an ischemic stroke. Now, how many years later, and how old were you then?

Fred Reader 5:22

I was 58 and it was in the January. I turned 59 in March. So it's getting towards the end of the big behavior.

Bill Gasiamis 5:35

And what was the cause of the ischemic stroke? Do they know?

Fred Reader 5:39

No, the best they can work out is that my heart missed a beat, caused us, caused a clot, and it ended up in my brain, and that's the best I can work out.

Bill Gasiamis 5:55

So you've been through a bit of a rough patch, like, how do you how do you mentally cope with all of that stuff that you've been through, especially when you got to the stroke right? Are you looking back and going, Why me? Are you looking back and going, I dodged another bullet. Like, how do you mentally work through all of the stuff that you've been through?

Fred Reader 6:21

Basically it's I've missed the bullet again, and I'm alive, so you just move forward. Yeah, I'm not real worried about what could have happened if it happens, then you deal with it.

Mental and Physical Coping with Health Challenges

Bill Gasiamis 6:45

Yeah, that's fair enough. That's a good attitude when you had the heart attack. The second one, that major one, how did it impact your physical part of your life? So I know with stroke, you've got some deficits, we'll talk about those in a minute,

but how does a heart attack impact people in their daily lives?

Fred Reader 7:08

Well, one was pretty severe, so I went and had a quadruple bypass in the January. So they opened me up, did for the four of the veins in the arteries, and then I spent six months recuperating, and you basically got to start learning not to walk, but how to walk regularly again, things like that, so you start off with a you start off walking two minutes and five minutes and 10 minutes and 15-20 to get your body back to moving again.

Fred Reader 7:57

Plus I give you a lot of other different exercises. So it was quite an interesting part. And then in the May I went in and got a defibrillator put into my defibrillator put into my left side, and they run to join, to do leads, and they stick into my heart, so they can monitor my heart, so if anything goes wrong with it, I know, or they know.

Bill Gasiamis 8:36

Okay, so you've been through all of that stuff early on, and then you have the stroke at around 59 the stuff that you went through and you learnt with after the quadruple bypass, did that help you get through whatever you are facing after the stroke?

Fred Reader 8:58

I believe it did. I recently got, a few years ago, got asked by a friend of mine's father, you know, what do I think of what what my parents bought home to my life, I turned around thought, about it, and I thought there was nothing wrong with what happened? Because I saw The Good, the Bad and the Ugly, about facing randomized and surviving it, so I had a pretty good idea of how to survive it before it actually happened to me.

Daily Life Adjustments After Surviving Ischemic Stroke

Bill Gasiamis 9:39

Right, how to survive it mentally and emotionally, because the doctors did their bit. They get you home and all that type of stuff, and now you've got to deal with the aftermath. So is it that emotional and mental survival? What specifically do

you mean about that?

Fred Reader 9:58

It's the motion on the. Mental it's I learnt from my father how to listen to the doctors and how to work out what what will be good for me and what may not be so good for me. So I learned to work out very quickly what they were telling me if it was good or bad and whether it will work for me.

Bill Gasiamis 10:24

So you were kind of in control of your own destiny, informed, and then with the information that you had felt like you could make a decent decision on how you wanted to go about things.

Fred Reader 10:37

Yes.

Bill Gasiamis 10:41

Yeah, and is that important? Does that give you a sense of control in your destiny? How? How is that important?

Intro 10:47

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, like, how long will it take to recover? Will I actually recover. What things should I avoid in case I make matters worse? Doctors will explain things, but obviously you've never had a stroke before, you probably don't know what questions to ask. If this is you, you may be missing out on doing things that could help speed up your recovery.

Intro 11:17

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

Fred Reader 11:50

I think it's the I think least I know what what I should be doing, and it gives me the control that I need make sure I live the lifestyle that I want to live.

Bill Gasiamis 12:07

After the heart attack. The second one, that major one, did you? Were you working? Did you manage to get yourself back to work?

Fred Reader 12:15

I had basically about six months off, without pay, and then I went back to I actually went and got a forward job in Parramatta three days a week, just to see if I could do it. After the first week, I knew I was fine. Then, then my ex boss rang me up and said, Can you come do a couple of days for me? I said, Sure, I can do that. And three and a half years later, I finished up.

Bill Gasiamis 12:56

Okay, so did you go back in a full time capacity, or was it just part time.

Fred Reader 13:01

It was full time, basically. But like, if I needed time off, I just could do with it the way I needed to.

Bill Gasiamis 13:13

And then what happened three years later? How come you decided to give it up?

Fred Reader 13:17

I well, I was, you know, as a contractor, and the business and the organization has was having a lot of changes, and so, yeah, I look at it, and I got rid of all the contractors. So then I went and worked here. And there were just, yeah, month, couple of months, just doing contract work up until I had the stroke.

Bill Gasiamis 13:52

So you're doing contract work up until you had the stroke. Okay, so then you've got the then, then you have a stroke, you end up in hospital, they discover there's a clot. How long do you spend in hospital?

Fred Reader 14:08

I spent a week in North Shore Hospital. I was taken to West Benita originally, but I ended up in rural North Shore because they're looking for a surgeon to remove the clot. So they took me when the surgeon was in West we moved. So my wife

drove from Royal Shore Hospital, West moved and back to Royal Shore, where she worked.

Fred Reader 14:36

So I ended up in Royal Shore Hospital, and the first thing I knew about it was I woke up in this hospital bed with my wife and son, one of my daughters, her boyfriend, and myself, and like saying 'Well, you had a stroke. Now, can you give us a 10 words that start with him.

Fred Reader 15:03

Our wife, because I tried to work out with my aphasia, so that was basically the first I knew about it. But from 8:30 onwards. I had no idea what went on during the day.

Bill Gasiamis 15:25

So what was it like experiencing the stroke? Were you aware that you were having a stroke? Was this something that happened? How did, how did it come about?

Fred Reader 15:35

I really don't know. I came home, I took my car and get service I got home or put the kettle on to make cups in now, whether I actually made the tea or not, I have no idea. I remember I was on the couch and fell off the couch, and the son came down and said, Dad, you're right. He's running his mother, she told him to ring an ambulance. He rang the ambulance, and I was taken to Westmead Hospital.

Bill Gasiamis 16:13

Pretty instantaneously. So he's heard the thud, ran down to inspect and see what happened, and then noticed you were on the ground acting weird.

Fred Reader 16:24

In Cal here, it was probably better description of it.

Bill Gasiamis 16:28

Yeah, right. And your wife, she's a, Is she a nurse? What role does the hospital?

Fred Reader 16:34

She's a retired pathology tech, so she worked in the hospital, in a lab, which does all sorts of things are coming up either, basically.

Bill Gasiamis 16:48

Okay, so she's fairly aware of what unwell people look like, or what might be going wrong. She would have come across people who've had strokes before, but she knew enough over the phone, simply by what your son said, that you guys weren't going to work it out between the two of you.

Fred Reader 17:10

No, so immediately rung the ambulance, and they were already within 20 minutes.

Bill Gasiamis 17:19

And then when you've come home, what are you dealing with, well? Or did you come home? Did you end up in therapy first?

Fred Reader 17:25

I ended up in Royal White Hospital for about two weeks, and they started therapy. Get learn how to, I had a lot of speech therapy with them, and physical therapy, which I actually probably enjoyed more than most people, which I did enjoy.

Bill Gasiamis 17:58

Why did you enjoy it though that's the interesting part.

Fred Reader 18:02

I think, because I always played sport, I always trained, even though I smoked like a chicken. But, yeah, I always enjoyed the training part of it, so that so I was just kept telling myself, I'm just going to train and goodbye.

Bill Gasiamis 18:21

Right? So it's all about really, you felt like it was a bit of a, not a competition, but a challenge that you needed to go after.

Fred Reader 18:33

Yes, yeah, basically.

Bill Gasiamis 18:39

Was it frustrating not being able to talk.

Fred Reader 18:43

Yes, it was, I like a chat. And, yeah, I found it very difficult. You know, I think within the Sunday after I had, this was a Wednesday when I had an Australia, the

Sunday friends of ours came, and I spent the whole time being absolutely scared shitless that if I opened my mouth, I had nothing to say and just look like a minute. And that that that was one of the big problems I suffered with my stroke, not being able to communicate quickly and smartly, so that was a real challenge for them.

Bill Gasiamis 19:29

So you had a pretty quick tongue before that, and now you're in a situation where the words aren't coming the aphasia. So what happens with the Aphasia for you? What's it like? Is it that you can't think of the word, or you can't get it out.

Fred Reader 19:44

It's a combination of both. It's combination of both. Sometimes I can't think of the word, and then I've gotta quickly find a new word. Or sometimes I just have that it's like a starter type of thing, because I know. What I'm trying to say, I'm probably trying to get it done quickly, so don't forget it.

Bill Gasiamis 20:05

Okay, so it's catch 22 or in one instance, you might be not being able to remember the word. And then when you remember it, you just want to spit it out. And then by the time you spit it out, you're afraid that you might forget it if it doesn't come out quick enough.

Fred Reader 20:20

Yeah, basically, that's it, yeah. So it's a real good, real good pandemic at the moment.

Bill Gasiamis 20:27

Yeah, right. It seems like you're fairly good though. I mean, as far as your presentation here, it seems like you've come quite a long way when you compare yourself to what you were like at the beginning. Did you see a massive difference?

Fred Reader 20:45

Yes, I do. My wife does, there are times when I frustrated because especially as the the fatigue kicks in mid afternoon sometimes, and I probably know they have a bit of a rest, and I'm not doing whatever reason. I do actually get her, she gets a bit come on, get it said quickly. Let's go on with get on with it. So it can be still frustrating.

Bill Gasiamis 21:18

Yeah, so in the evening, you find yourself sort of running out of battery, and then the delay between the word and the speech increasing.

Fred Reader 21:32

That's basically, yes.

Bill Gasiamis 21:36

Yeah, do you find that you're good in the mornings?

Fred Reader 21:41

Yeah, I'm pretty, really good in the mornings. And as as they get goes on, it can get worse. But I've got been out at night with friends and found it, you know, have a rest during the day, and I've, you know, been good up until say 11:00 - 11:30, and then I'm ready to go home and rest up.

Bill Gasiamis 22:09

So during the day, if you get a recharge in, then you can go for a little bit longer, and you can be your your speech can flow a little easier.

Fred Reader 22:19

Yes, yes, so I try to have a break. You know, snooze in the afternoons, that's not all, all times when I remember.

Bill Gasiamis 22:32

Yeah, fair enough. I mean, it's probably when you feel most need, I would imagine, right?

Fred Reader 22:39

Yes, yes, that's right, yes.

Bill Gasiamis 22:43

How long does a recharge need to take? Is it an hour? Is it less?

Fred Reader 22:48

Sometimes it can be 20 minutes, if it's good, sometimes it can be an hour. It just depends on the day, the time, the place, yeah, when, whether I'm wanting to do something more.

Bill Gasiamis 23:06

So depending on the agenda, whatever you've got going for the day. So if there's something coming up, it's probably a good idea to get that rest in early on so that you can actually get to that particular event and not miss out.

Fred Reader 23:19

That's usually the way I work it, yes.

Bill Gasiamis 23:27

So what's it like now that you're at home after the stroke? I imagine that you haven't returned back to work? Is that something that's not happening now.

Fred Reader 23:38

I retire basically the day of the stroke, one of my daughters grabbed my phone and went through and it's going through every name that she knew and every name she didn't. She'd ask me, who's this person? And I'm going, then, what are you looking for? He said, Your finance bloke. Turned around said, Yeah, I know who he is.

Fred Reader 24:06

She said, Well, tell me who he is, so grab the phone, gave her the number. She rang him, and she turned around said, well, got him called to him, and he said, Well, you've got enough money to retire, so yeah, why? Why? Wouldn't bother going back for work? But basically, it just made sense for me to retire.

Bill Gasiamis 24:34

What kind of work were you doing?

Fred Reader 24:36

I was an accountant. So basically sitting in an office and work, work, work on a computer.

Fred Reader 24:45

Dealing with numbers all day, how is dealing with numbers these days? And what is that like for you?

Surviving Ischemic Stroke Managing Aphasia and Daily Activities

Fred Reader 24:47

I try not to deal too much with numbers these days. Yeah, my wife pays all the bills just because it's easier.

Bill Gasiamis 25:09

So the impact of the stroke has definitely sort of messed up with that, that part of the your your skills, it was it a does it feel like the skill is still there, or have you lost the brain energy that's needed to focus on numbers for a period of time?

Fred Reader 25:34

I can, I can do numbers, but like, half an hour to 40 minutes, I started tire from it. I was doing some I was treasurer of a couple of small organizations, which I gave away just because I didn't really want to, need to, you know, do it two three hours every other day to keep these things running. So I decided it was time to retire from them and find some let somebody else have the joy.

Bill Gasiamis 26:11

The joy?

Fred Reader 26:15

Or the problems.

Bill Gasiamis 26:16

Yeah right, or the problems, yeah, okay. So I understand what you mean about that fatigue and the tiring, it was definitely like that for me. You know, looking at a computer screen after brain surgery and trying to recover from that was such a challenge. I mean, it was such a brain drain, and then I never felt confident that I was doing anything that was I never felt that I was it was accurate.

Bill Gasiamis 26:47

You know, there was mistakes that I wasn't aware of, that I was happening. People would have to go over it and double check everything, and it was really frustrating and annoying. But I'm not in the position to retire, and, you know, I had to kind of persevere and push on, and it's improved over time. I know that you don't do that now for a living, and you're not a treasure anymore, but have you also seen an improvement in your ability to concentrate on things like that for a little bit longer than you initially were able to.

Fred Reader 27:23

Yes, yeah, I can up. I still read a lot, but like I read in 20 minutes, 20 minutes

sessions I do, 20 minutes in the morning, 20 minutes in the afternoon, 20 minutes before I go to bed. Just so I think my ability to read going I find that I always enjoyed reading, and I used to read three books a month. These days, I'm lucky to do a book and a half.

Bill Gasiamis 28:01

Right? Okay, so you still managed to find a way to squeeze in an hour, but you just break it up over the course of the day instead of doing all at one block.

Fred Reader 28:10

Yeah, that's basically it.

Bill Gasiamis 28:13

So if you're getting through three or four books a month previously, you're doing several hours a day of reading.

Fred Reader 28:21

Oh, yeah, yeah. Like, I used to, like, I I'd start 10:30 and read until Yeah, one, yeah, 12:30 and then go to bed.

Bill Gasiamis 28:36

Right? That's such a session of reading. You're talking about 10:30 in the morning?

Fred Reader 28:41

In the evening.

Bill Gasiamis 28:43

I Was going to say, okay, so you do a couple of hours of reading solid previously.

Fred Reader 28:53

My father used to do that. And I think I that's where I got the I got the want to do it.

Bill Gasiamis 29:02

And with aphasia. Now, because I know anything about aphasia, really, does that impact your reading as well? Is it, or is that not an issue with aphasia.

Fred Reader 29:15

I find it a lot harder to read constantly these days, partly, partly seen fatigue, but

the Aphasia I found more in the writing, writing reports and things like that. I'm glad I don't have to worry about these dances. There's all there's a lot of reports that sometimes you have to write in accounting, and that's the part that I really would struggle with. Days writing emails. Sometimes I think to myself, Do I really have to do this? And I know I have so. And you do it, but it takes a lot longer to write them now than it used to.

Bill Gasiamis 30:07

So not only is the speech getting the words out of your mouth, like with your tongue, a problem, is it also an issue when you're putting the words on the paper or on the keyboard? Is it that the words, again, aren't coming to you, or when they are coming to you, they're difficult to extract and place on the keyboard?

Fred Reader 30:32

Yeah, it's that. It's that whole, it's the whole thing. Yeah, it it's finding the word, it's writing the word, it's speaking the Word. So yeah, that's and that sometimes does frustrate. I was trying to write something which I finally just about finished. I'll go and have another look at it later today for for a piece I'm going to put out on my website about aphasia, and that's taken called, lot of work to actually do. I've actually then I'll send it to a friend of mine who usually reads these things form, and just to make sure I have that in facility.

Bill Gasiamis 31:14

Let's take a quick pause here, but we'll be right back with Fred's story shortly before we continue, I want to remind you about my book 'The unexpected way that a stroke became the best thing that happened. It's not just a memoir, it's a guide on how to achieve post traumatic growth after stroke.

Bill Gasiamis 31:32

In this book, I share not only my own story, but those of other stroke survivors who turned their trauma into an opportunity for growth. If you're seeking hope, resilience and practical steps to improve your life after stroke, this book is for you. You can find it on Amazon by searching for my name, Bill Gasiamis, or by heading over to recoveryafterstroke.com/book.

Bill Gasiamis 31:57

Right? Just to check over it, just just to edit it.

Fred Reader 32:00

Yeah, that's it.

Bill Gasiamis 32:02

Wow, It really gives you a real kind of what you're described, a deeper understanding of what people experienced with aphasia and how challenging it is, and then there's the other side of it, is that people who don't understand what you're going through, they probably also get frustrated, or think, why is this guy not finishing his sentences?

Bill Gasiamis 32:29

Do you have that experience as well where people kind of look at you and misunderstand not only what you're saying, but why you're speaking the way that you're speaking.

Fred Reader 32:42

Yeah, normally, if I'm reading people, I tell them I've got aphasia. I used to be very worried about that from long time. And then I realized, if you actually explained to people what aphasia is and why you have trouble speaking with them, they tend to understand, or least give you a little bit of leeway with them. So it was very difficult in the start to explain to people that I have aphasia and give them a quick, brief, quick, brief talk about it, because I don't want to bore them. So yeah, basically, I just tell them that aphasia affects your ability to speak and communicate in general.

Bill Gasiamis 33:33

Yeah, and they give you a little bit of grace. So it seems like you're coming along quite well, you've previously said that you were physical, quite physical. You didn't mind a little bit of physical activity, that type of thing. Where are you now? With physical activity, what do you are you able to do?

Fred Reader 33:55

I walk a lot. Walk up 6k most days. Except occasionally my right knee blows up, and I slow that down, and what I do is I do one day walk. The next day I do exercises from the knees, and then the following day I walk again, so I'm basically just about to start that up again. My right knee's blowing up a bit at the moment.

Bill Gasiamis 34:29

Are they just all sports injuries?

Fred Reader 34:33

It's that and rheumatoid arthritis, a bit of osteoarthritis in my right knee, so it's the combination of the two of them are pretty, pretty severe sometimes

Bill Gasiamis 34:46

I hear you Okay, so they get swollen and inflamed. Yes, okay, alright, understand. So exercise, though, is really important when you have rheumatoid arthritis, if I understand correctly, it's encouraged, isn't it very much? And do you find that that creates a lot of pain, and therefore, do you have to medicate that pain?

Fred Reader 35:15

I try not to use anything other than the drugs that I'm on or the rheumatoid arthritis, no heart problems and stroke. I don't tend to use any other medication. If I can avoid it occasionally, I'll get a couple of Panadol Osteo or something like that, just to remove the pain if it's really bad, but I try to work way through it.

Bill Gasiamis 35:49

Okay? And it does, it, does the pain? Did the pain improve? Decrease? Get worse? Did it change after the stroke? Did you notice a difference in the way that you experienced the pain? Or has it kind of remained as it was?

Medical Appointments and Health Monitoring

Fred Reader 36:10

It's It's remained pretty constant, because I was very lucky with my arthritis, that medication had actually stopped it a lot, or made it go into like, reduced a lot. I don't get a lot of pain these days, and I hope to continue on with that, but it's all on the luck of the gods, I'll go back to see my rheumatologist on Wednesday. They have a look at my knee, so wait and see.

Bill Gasiamis 36:42

So you're dealing with the aftermath of the heart, rheumatologists, because of the arthritis, and neurologists, I imagine, or doctors regarding your brain. What's your your calendar look like as far as doctor's appointments go?

Fred Reader 36:59

Sometimes it's just nothing. Yeah, there's a few. I'm coming up to the 10 year of my defibrillator, and the battery's about to run out. So I'll see one of my cardiologists every three months, at the moment, just to work out when he's going

to take me in and put the new battery in. But other than that, I see the rheumatologist three times a year, the cardiologist most of the time, once a year, and when I need the neurologist, I see them.

Bill Gasiamis 37:42

Okay? So it's not too overwhelming. There's not too much to.

Fred Reader 37:46

Not at the moment, but there was times it felt like every other day I was younger, doctor's appointment.

Bill Gasiamis 37:54

So with regards to the battery that you're talking about, where does that particular defibrillator sit is it also known as a pacemaker?

Fred Reader 38:03

No. Pacemaker is different. It's basically just about there.

Bill Gasiamis 38:10

Just beneath the shoulder kind of.

Fred Reader 38:12

Yes, just below the shoulder, just underneath the shoulder.

Bill Gasiamis 38:19

And how big would you say it is? Can you feel it?

Fred Reader 38:22

Oh, yeah, yeah, it's about that big.

Bill Gasiamis 38:25

Okay, so a couple of inches?

Fred Reader 38:27

Yep, and it's, yeah, they, they kept me open, and I was awake the whole time, and you had this bloke there, cutting away, putting it in, checking it out, really quite interesting.

Bill Gasiamis 38:47

Was he chatting about anything, or was he just focused on his job?

Fred Reader 38:51

I was talking with the anesthetist most of the time, at the occasion, he said, could you simply quite I've got to get this bit right. Yeah, so I got to know my cardiologist very well over the years.

Bill Gasiamis 39:09

So you've got this thing, and now you're probably going to go in similar procedure. You'll be awake, they'll take it out, replace the battery, and then pop it back in, and is it just a little incision that they make.

Fred Reader 39:21

Yeah, it's two inches wide, two inches long, maybe three.

Bill Gasiamis 39:28

And then you're off home, or you're recovering at hospital.

Fred Reader 39:33

The first one, I spent a night in the hospital as I had no idea what it's going to be like this time. I presume we'll probably be a night.

Bill Gasiamis 39:43

Yeah, that's pretty cool Fred, I mean, I everything that the medical people do these days is really cool. Like, don't get me wrong, everything but the free. A defibrillator as well in that chest that's that small, that's two inches or so big, just is unbelievable, when you think about where technology is and how far it's come, and how that thing operates, and then they can just pop up, pop it in and take it out and change a battery and keep you going. Do you ever think about all of that stuff and just get blown away? How do you deal with all of that?

Fred Reader 40:34

Absolutely, when they told me I was going to have one, I thought what I understood the reason why, because my heart doesn't beat well, and it's important for me to understand that something goes wrong, this will pick it up, and every night, there's a box in my next to my bed, which actually transfers it from from a defibrillator to a computer in North Ryde.

Bill Gasiamis 41:15

So it goes from your house, it downloads and sends that information to the medical team in the hospital in North Ryde.

Fred Reader 41:22

No, it's a company, and they'll what the they let the doctor know if there's a problem.

Bill Gasiamis 41:36

Okay, so the private company has that system set up, downloads data, and then they report on anything strange or abnormal or something that they need to know about so that they can act when it's happening.

Fred Reader 41:51

Yes, basically yes. That's quite an quote and yeah, and a pacemaker, all that does just my father had one of them before he passed away.

Bill Gasiamis 42:04

This is far better than a pacemaker.

Fred Reader 42:08

Well, yeah, hopefully.

Reflecting on Life and Gratitude After Surviving Ischemic Stroke

Bill Gasiamis 42:11

Yeah, sounds like it. Are you aware of it? Does it sort of slip out of your mind sometimes? Or are you always aware that it's sitting there and doing its thing?

Fred Reader 42:20

I think most of the time, I don't, I forget it's there until I have a shower and I doubt, oh, what's that overlap? Oh, yeah, that's still there, yeah, it's that type of thing. You know, it's there, but, and it's doing whatever it's doing, and it doesn't you you notice it, if I've gotten no shirt on not doing that now, but yeah, that's about the only time you notice it.

Bill Gasiamis 42:53

Right, so does it give you information, any information at home that you need to know of does it beep or make any noises? Or did you notice anything? I imagine with the pacemaker, people would notice that it's kicked in and shocked the heart, right? So is this also doing that job, or is it just doing that?

Fred Reader 43:16

Let you know if there is a problem, had a couple beeps go off and and just on the hospital down, that was just something gone, going a little higher wire. But they reckon if it needs to kick in, you'll know, know about it, because it's like, been hit, hidden your chest by a bloke about 20 stone. That's quite a large bud, and it makes a large beat, so you really do know what's there.

Bill Gasiamis 43:52

That it's been activated as well, you're 100% aware of it.

Fred Reader 43:55

Yes, yes.

Bill Gasiamis 43:59

Is this thing that you've gone through with your heart is that, so if you if you could kind of put them in order of, kind of, what's the hardest thing to deal with or the most challenging, what order would you put these things in? Because you've got rheumatoid arthritis, you've got stroke, you've got heart attack. Like, is there an order? Like, am I even making sense?

Fred Reader 44:25

Like, I always think that the strokes probably the bigger one because of the effect the mind, it stopped me from working full time, and it made my life very interesting, say my least.

Bill Gasiamis 44:47

Is that code for harder or more difficult? What is very, very interesting code for.

Fred Reader 44:53

Probably, probably, yes, it is harder, but I. I I still find great enjoyment from the fact that I'm still alive. Yeah, my fellows have a child, so I'm still around to see that. You know something, yeah, my grandfather didn't do. So those type of things I'm very, I feel very grateful for that are still around to be involved.

Bill Gasiamis 45:26

Yeah, how? How heavy of a smoker were you?

Fred Reader 45:34

Well, minimum 40 a day.

Bill Gasiamis 45:38

Yeah, that's heavy. Was it easy to quit? Did you go through withdrawals, or any of those types of challenges?

Fred Reader 45:48

No, I basically bought some of that gum stuck baby. After about two weeks, I was pretty much fine, but I knew I had to give it up. And something my father said to me, being able to give it up before you have to give it up is a lot easier than you've gotta give it up.

Bill Gasiamis 46:15

Yeah, so you were ready to give it up, you'd made the decision, and you reckon a couple of weeks of chewing gum was enough. It just kind of so it was more about the, was it more about the nicotine or the chemical addiction, rather than the, you know, for me, it was also that, but more importantly, it was kind of the, where do I put my hand for the rest of the day, you know kind of thing.

Fred Reader 46:39

That was a that was a problem for a while. I must admit that too, because, yeah, Once upon time I was really doing this, yeah. And, I mean, yeah, there were times when I finished one cigarette and what the next one type of thing. Yeah, it happened, but yeah, it was one of those things, I enjoyed it a lot. Still miss it yeah.

Bill Gasiamis 47:05

And now with your walking, do you find yourself extremely exhausted at the end of that walk? What's the routine after the walk? Because I remember when I was first sort of getting physical again and learning how to walk again, and maybe I wasn't doing six kilometers at the beginning, but I used to go to the gym and do some light sessions, and then I'd be like wasted for the entire day. How do you recover after you've done your your six kilometers?

Fred Reader 47:39

Pretty good, because I've been doing it for a long time. I basically I because of the room to an arthritis I stopped running, but I started walking, and I try to walk 6k in 72 minutes. So I'm trying to do it like I raced with myself, just to keep it interesting, like, but when I, when I first had my heart attack, I'd do 2k and I'd be buggered for the hours. But as I continue to work at it, I become a lot better.

Fred Reader 48:24

I can come home, sit down, do whatever I need to do, and then move on again. Yeah, and I like to get that done somewhere. Yeah, 7:30 in the morning. It's the latest I want to start the walk. Now I like to get it done early. A, it's still foolish, and B, it works in with my lifestyle.

Bill Gasiamis 48:54

Yeah, right. So is it easier to do in summer or in winter? Does the weather affect you?

Fred Reader 49:02

I'd much rather it in the winter than the summer. The summer, it's very hot, and I end up pretty much needing a shower by the time I get back.

Bill Gasiamis 49:13

You end up cooking. Do you live near the seaside?

Fred Reader 49:19

Now I'm about 25k-35k from the seaside, but I live by a river.

Bill Gasiamis 49:30

Okay. Yeah, I understand what you mean about the weather. Now, for me, I much prefer, as well, being out of the sun as much as I can during the afternoon, and that's the kind of time where you hear everyone sort of say, you know, between 11:00 and 3:00, keep on the retreat. We had that song that we used to get sung to us about being sun safe. You know about over exposing ourselves our skin to UV rays, right for skin cancer risk.

Bill Gasiamis 50:14

But I find, like in summer, if I'm out and about, and it's kind of those mid day hours afternoon, it's really difficult to deal with the intensity of the sun, especially on a hot day, and I'd be inclined to just sit under the shade for three or four hours in the one spot, and not move and do anything, just so that I could avoid being exposed like that. And it makes going to the beach kind of interesting, because you see all these people sunbathing and being completely, totally exposed.

Bill Gasiamis 50:51

If I haven't got a beach umbrella, I won't go to the sun. You know, to the beach in summer at all. There's no point being there because it's not enjoyable, and I actually can't cope with being that hot and over exposing myself. And that's got

worse after the stroke for me.

Fred Reader 51:14

Yeah, I find the same and also just some of the drugs that I'm on, getting sunburned is not a good idea, so I tend to stay away from the sun. Yeah, and I still love the beach. Yeah. And my daughter, Bill's daughter bought a place in Port Macquarie, which is a beach house place, beautiful, and we end their 15 minute walk from the beach.

Bill Gasiamis 51:49

So what are your meds? Why do your meds make getting sunburnt worse? Not that it's not bad enough. You're already getting sunburnt. But why is it even worse with those meds?

Fred Reader 51:58

It's got to do with something that my first rheumatologist just told 'Don't get into the sun'. It's got to do with the methotrexate. It's just one of those byproducts of it, cos it was an old cancer drug in the 50's, which I found helped people with rheumatoid arthritis. Now, it's one of those things they get, they tell you, I'm not going to and it doesn't greatly bother me these days.

Bill Gasiamis 52:32

Yeah. What's very interesting, I've never heard of it before, but that is interesting. So with regards to your stroke, like, what's the hardest thing about stroke for you?

Fred Reader 52:42

I think it was the fact that I didn't know what had happened, and it was a major thing that happened, and I didn't actually really know what happened. And the aphasia, and the fatigue. Yes, I understood fatigue from before, because the arthritis and the heart problems gives you fatigue, but the neurofatigue is a lot worse.

Bill Gasiamis 53:19

Yeah. What has stroke taught you?

Fred Reader 53:23

Well, be grateful that you're still alive, you know, and that I can still enjoy my life. Yeah, one of my daughters got married after we had this stroke and the first one

got married just before I had the stroke, so yeah, and I'm still able to go out, be with friends, enjoy my life, although occasionally have trouble talking to people.

Bill Gasiamis 54:00

Did you not okay? This is going to sound weird, I know you're grateful, right? But with your heart attack, did you not have that? I'm grateful to be alive moment. Or what was that like? Was that a similar experience?

Fred Reader 54:15

I think, remember actually talking to a friend of mine said, What do you think I turn around? Said 'To be perfectly honest with us, quite grateful that it happened now I can get on with the rest of my life', because I always had this great fear that I could die, die because I smoke like a chimney, and you know, if it happened earlier, probably could have, and it was something my father, when my father was had his his heart attack.

Fred Reader 54:51

His cardiologist turned around and said, for a bloke who smoked more than 60 a day, which is probably the better when I can work out for you, and you've suffered a heart attack and still alive, I'd go and buy yourself a lottery ticket, and that that basically was that stuck with me for a long, long time, didn't make me stop smoking.

Bill Gasiamis 55:18

But you had even like you still had that monkey on your back. You still thought that this is probably going to happen to me, and then you were relieved that it was out of the way?

Fred Reader 55:29

Yeah, yeah, because my family was smoked heavily, and three, my father had four, and three other siblings, two of them had heart attacks, and they all had it at 54.

Bill Gasiamis 55:55

Okay, so this might sound weird, right? Didn't you think that maybe it's a good idea to stop that lifestyle way before any of the trouble, so that you don't have what happened to the others? I know you probably think that that's the right way to go now, but back then, it never occurred to you that I could change my lifestyle do something different?

Fred Reader 56:23

No, yeah. No. Like, look, I started smoking at 14. I was going to do it to the day I died. Thankfully I didn't.

Advice for Stroke Survivors

Bill Gasiamis 56:35

Yeah, again, now, with regards to stroke, there's people listening to the podcast. They've been around for a while, perhaps they just started their recovery. What do you want to tell somebody about stroke recovery? What wisdom would you like to impart on them?

Fred Reader 56:56

Listen to what the doctors tell you. Work out, what will work for you, and remember, you're the only person who can make your recovery what it is, so you've actually got to do all the work.

Bill Gasiamis 57:13

Thanks so much for that, Fred. On that note, I really appreciate you joining me on the podcast.

Fred Reader 57:18

Thank you, Bill. It's been wonderful.

Bill Gasiamis 57:20

Well, that brings us to the end of another episode. I hope. Fred's incredible journey of surviving an ischemic stroke, heart attacks and managing rheumatoid arthritis provided you with hope and valuable insight. His strength in the face of multiple health challenges and his determination to live a full life despite aphasia and other deficits is truly inspiring. Thank you to everyone who has already left a review. It helps others find the show and provides much needed encouragement to stroke survivors.

Bill Gasiamis 57:52

If you haven't already, please consider leaving a five-star rating and sharing your thoughts on iTunes and Spotify and for those watching on YouTube, remember to like, comment and subscribe to the show to stay updated on future episodes. If you'd like to further support the podcast, you can do so by subscribing to our Patreon page at patreon.com/recoveryafterstroke.

Bill Gasiamis 58:18

Every contribution helps bring stories like Fred's to more people who need encouragement and advice on their stroke recovery journey. And if you know a stroke survivor or you are one yourself and you have a story to share, I'd love to hear from you. My interviews are relaxed and unscripted, just come as you are. Lastly, if you have a product or a service related to stroke recovery, consider sponsoring an episode. Visit recoveryafterstroke.com/contact to get in touch. Thanks again for joining me today, and I look forward to seeing you on the next episode.

Intro 58:53

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Intro 59:23

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Intro 59:48

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Intro 1:00:15

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