

SURVIVOR STORY:

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My name is Michael (Mike) Westdyk. I have been a fire fighter since 1995 when I started as a volunteer in northern New Jersey. In 2010, I started my career with Westampton Fire Department in southern New Jersey where I am currently still working as one of four lieutenants.

In September of 2019, I woke up at the end of our shift to head home. When I awoke, I had a shooting pain in my groin. Thinking maybe I slept wrong; I thought nothing of it and went home. As my day off progressed, the pain continued and began to get worse. I had to drag myself to the local urgent care and get checked.

A little history, like most, I hate doctors. I have always been a relatively healthy person all my life. I rarely call out sick from work and, at this point in my career, I had used only two sick days, and one wasn't even for myself being sick, it was for one of my children.

Anyway, off I went to urgent care. After the awkward feeling up by the physician's assistant (PA), I was immediately sent to the hospital to get an ultrasound. This was not a "make an appointment" and more "go now and we will call over to get you in."

I walked into the hospital extremely nervous. The PA didn't tell me anything except I needed to go for an ultrasound. I was laid down on a table and given a towel. "Cover everything up except your testicles," the radiologist said. Wow, I thought, this just got real. As she pushed and probed, the pain did not get any better. However, in the end, she said, "there is a mass on your right testicle," and that my next step would be to go to a urologist.

As I said earlier, I don't do doctors. I had no clue about specialists, but now I had to find one and not just any, I wanted the best. I asked around and was given a good recommendation for a doctor in Philadelphia. I immediately called and was seen in late October of 2019.

I was ordered to get a CT scan as well as an MRI prior to visiting the urologist. Let me say, the CT scan is nothing compared to the awkwardness of the MRI of the scrotum. You are put on your belly and told to place your testicles on this tray, and don't move for half an hour. AWKWARD!

I walked into the urologist in late October. He felt around and said, "Yes, I feel the lump and both your CT and MRI confirm there is something there. You are going to need to have surgery, you are going to need right radical orchiectomy." What is that? It is the full removal of the right testicle, and everything attached to it. Short of some stitches throughout my life, I had never had surgery in my entire life, and I was scared.

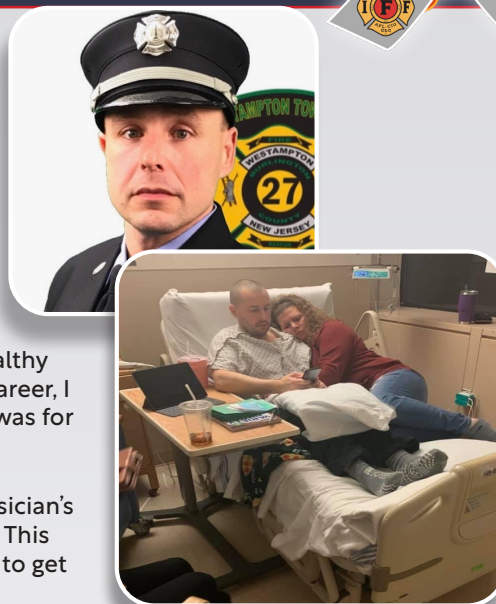
I had surgery the day before Halloween that year. I couldn't even walk my kids around to trick or treat. The best I could do was sit on my porch and hand out candy. It was devastating, and how do you explain the reason to, at the time, an 8- and 6-year-old why I couldn't walk.

In any case, surgery was done, and I felt I was in the clear. I was told by the urologist that it was standard practice after that type of surgery to send the testicle to a lab to have it cut open and analyzed.

December 3, 2019, that was the "day," actually the night. My wife was out at a meeting, I was home and had just tucked the kids into bed. My phone rang with a weird number, normally I don't answer those, but for some reason I did.

"This is Doctor Alvaro Pereira-Rico and I'm sitting here with my nurse, Amy, we are calling from Fox Chase Cancer Center at Temple Health."

My heart dropped; I knew what this call was all about. He told me he never calls people over the phone, but I had been one of his exceptions.



“Your test results came back from the biopsy, and you have testicular cancer,” he said.

Once I heard that word “cancer,” I honestly did not “hear” anything after. He spoke and I listened, but nothing really registered except that word “cancer.” He explained to me that he wanted me to come in as soon as possible to meet with him and discuss options. I couldn’t even come up with a date to visit him after what I was told. He told me to call him back in the morning to set something up.

I hung up the phone and broke down. I called my wife and told her she needed to come home, it was important. I wouldn’t tell her over the phone. She was only about 15 minutes away, and I sat in tears the entire time until she walked in the door. When she did, she asked what was wrong. I told her the doctor just called, and I have cancer. I’ll never forget, she wrapped her arms around me and supported me immediately, she told me we would get through this together, and she just let me cry in her arms.

The next morning, we made the phone call back to Doctor Pereira-Rico (Dr. Rico as he didn’t mind being called). We made an appointment for some days later. We walked into Temple Hospital (Philadelphia) and went to the Cancer Center floor. We sat in the office and listened to Dr. Rico explain everything. It was good I brought my wife because I still couldn’t fathom what I was hearing nor comprehend my options. He explained that after the biopsy and CT results, it was stage II testicular cancer, and I had signs of cancer in the lymph nodes of my abdomen.

The course of treatment would be inpatient chemotherapy. He explained the sooner we got started the better it would be. Inpatient chemotherapy required me to spend five days in the hospital where they would give me a chemo cocktail (as it is known when you get multiple chemo drugs) of cisplatin and etoposide. This cocktail would be given to me each day for those five days. Once completed, I would be out of the hospital for 16 days and must return on the 21st day for four total rounds (total of 20 treatments).

My wife, without hesitation, said, “When can we start?” My jaw dropped, and I looked at her with the “what the f@#\$%?” look. She told me, “let’s just get it done now like the doctor says.” I was scheduled to have a port put in my chest just a couple days later. The port is put under the skin of the chest with a tube to the jugular vein. This is how they would administer chemo treatments, other medications, or draw blood. Then we scheduled my first set of treatments to start Dec. 16. Yes, the week before Christmas I would spend in the hospital.

Dec. 16 came, and it was go time. My wife drove me to the hospital, and I had no idea what to expect. I didn’t even bring a change of clothes because I just didn’t know. I went to registration, and they checked me in. They were waiting for me and told me my room was ready. I was put into a wheelchair (even though I could walk) and rolled up to the 5th floor (medical surgery). I was put in a private room (chemo patients in this hospital always get private as they do not want any issues with people coming in contact of the drugs) overlooking the hospital’s helipad. Hey, at least I can watch helicopters come in and out for the next five days.

The day passed, and I saw several different doctors and nurses. This is a teaching hospital, so you can imagine the in and out of all the students all day long. Basically, I was waiting for my chemo cocktail to arrive from an offsite pharmacy in the city of Philadelphia. It wasn’t until about 6 p.m. when the medication push was started.

First was an IV bag of just simple fluids. Nothing crazy, just something to hydrate you during the treatment. After a smaller bag is connected containing some vitamins, Zofran for nausea, and a strong steroid called Decadron. During this part, they also have you chug some Malox because chemo drugs are very constipating. This was all in preparation for the chemo meds. So now a little over an hour goes by and it’s time to start the first chemo med, etoposide. The nurse came in fully gowned and gloved to start the first med. She explained to me that these drugs are extremely strong and dangerous if they come in contact with them.

“Oh, great, I thought, we are about to put this in my body, this sounds like a great idea.”

Over the course of another 50 minutes, the first med was done, time to start the second one. Then the nurse came back in fully gowned and gloved and changed over the bag to the Cisplatin. Once again, another 50 minutes to an hour goes by and my nurse is back. They clear all the drug bags and dispose of them in a special container and start me on the final IV bag of regular fluids which will drip the final hour. Yes, the process took over four hours, and when you are getting the actual chemo meds you are not allowed to walk around because of their potency.

Over the next five days, this process continued. I honestly felt good, I expected a lot worse. There seemed to be almost no side effects except being tired. I came home that Friday night and was exhausted. I slept all night and most of the day on Saturday. I was given meds to take while home. I was to return to the hospital on Monday after the weekend to get a simple shot in the arm. This shot (Neulasta) was to help boost my immune system because the chemo drugs basically kill it.

I was told to take a strong allergy med because this shot was extremely painful after getting it and an allergy med for whatever reason would help with that. I didn't believe that for anything. What would an allergy med do for shot pain. I didn't take it that first one and I regretted it. Two days after getting the shot, my arm felt as if someone hit it with a sledgehammer as hard as they could. I never made that mistake again.

I felt pretty good after my first week of treatments. I did not have much sickness and the only other issue besides fatigue was my hair would come out in clumps. It wasn't long for me to shave my head skin bald.

The chief of my department worked with me and basically when I felt ok to work, I could come to the firehouse and do administrative things. I was still weak and couldn't perform full firefighting duties, but I could help where I could.

My second week of treatments went pretty much the same as my first one. However, this time I was prepared. I brought my own clothes so I wouldn't be in a hospital gown the whole time. I brought snacks because I was told to eat what I could eat because in this situation, any food is better than none. Yes, your appetite is suppressed with these drugs so if you're eating, it makes the doctors are happy. The second week, boredom hit for sure. It got to the point where I was exercising in my room like a prisoner in a jail cell, and walked the hallway to figure out how many laps were in a mile and logged almost 30 miles that second week just walking around. I finished my first two with what doctors said were minor but expected side effects.

Then week three came, and it hit me hard. Day one of treatment came as the others did, and I was ready for my infusion. The nurse started as she always did, and we went to the Etoposide. Something happened, as soon as she started the drip, I couldn't breathe. My chest felt like an elephant was sitting on it, I stood up and stood looking out the window gasping for air. The nurse had no idea what was going on and she immediately stopped the drip. After about five minutes, I felt OK and was breathing without issue again. She asked if I was ok and started the drip again. Within seconds the feeling was back and, once again, we stopped the drip. Still not knowing why this was happening, she contacted one of the doctors. He as well couldn't explain it either; however, he suggested slowing the drip down. This seemed to work; I was able to control my breathing through the restart and though I still had the weird feeling in my chest, I could breathe. This turned the first chemo drug administration from about 50 minutes to almost 90 minutes now.

The next day (Tuesday), we started day two of that week's treatment again. Once again, the nurse (now a different one from the previous day) stated the Etoposide and, once again, I couldn't breathe. She stopped the treatment, and I explained what had happened the previous day. She did the same again and slowed the drip down and I was able to make it through.

The next day, one of the oncology doctors came to see me. He had read my chart and asked me about my experience. I explained what had happened the previous days to him and this didn't happen at any time in the previous two weeks' treatments. He couldn't explain why this had happened. He would do some research and we would try again on Wednesday.

Now it's that same time Wednesday and the nurse came in. I explained what happened the previous two days and she told me that the doctor decided to push the Cisplatin first instead, just to see what happened. The nurse set up, did all the premeds, and started the Cisplatin drip first. The med pushed through the drip with no breathing issue, no problems. I finished the Cisplatin and now time to get the Etoposide, the moment of truth was here. They started the drip and kept it at a slower pace, and to everyone's surprise, I had no issues. I didn't even have the weird feeling in my chest. From that point forward my treatment was changed to Cisplatin first then the Etoposide. To this day, the doctors can't explain why this happened the way it did.

I came home after week three and as I said earlier, this was a terrible week compared to the first two. That Friday night after coming home, not only was I exhausted as usual, but I was also extremely sick to my stomach. I spent probably an hour total that night with my head in the toilet throwing up. Now, as I explained earlier with the nurse how these drugs are extremely harmful to those not sick, the "waste" that comes out of the body is also harmful to those that use the toilet after you. So, with every "head in the toilet" moment, I had to scrub and bleach it so that others could use it safely after me.

This led me to my two-week recovery time between treatments ending up being to a point I could not physically do much. Something as simple as walking up the stairs to my bedroom would cause me to have to stop halfway to just catch my breath from being so weak. Not only is this physically exhausting, but it is also now mentally exhausting because I know what my fitness level was just three months prior.

Those two weeks were terrible, but the weekend before I was to return for my fourth and final week of treatment threw another monkey wrench into the mix. I woke up with the entire right side of my neck and face swollen. I had no idea what was going on, but I was headed in for treatment that Monday and hoped it would just go away.

When I got to the hospital, it was the normal routine for check in. I got to my room and the nurse looked at me and asked what the heck happened. I explained how I just woke up over the weekend that way.

The doctors came in and said they needed to run tests. I was running a fever, and they knew something was going on, the question was what. Mind you, this is the last week of February 2020. One of the tests I was given they took a swab deep in my nose but wouldn't tell me the test. Who would know at this point a week later (March 2020) COVID-19 would be announced and that was what they were testing me for. I was negative.

Anyway, the nurse came in to set me up through my port as they always did. She pushed the line into it and made her first attempt to draw blood from it. Not the first time to happen, but she couldn't get blood to draw from my port. So, the typical routine when this happened the nurse would push Heparin, which is a drug to break up clotting. Clotting is a common issue with a port because that two weeks off of treatment the blood tends to dry up within the port.

The nurse pushes the Heparin, waits a couple minutes and tries her blood draw again. Still nothing. Totally baffled, but figuring the clot was larger than normal my nurse gets orders for additional Heparin to try again. She makes the push, waits, tries another draw and still nothing.

At this point now there is concern, and the doctor must come back in. She explains what is going on and the doctor has concerns as I have this swelling, I'm running a fever, and now the nurse can't draw any blood from my port. The doctor tells me he is ordering a CT scan of my neck to see what is going on with the fear that cancer has suddenly spread to this area of my body.

They loaded me up and wheeled me down to my CT scan. As I am laying in the scanner, I hear a male voice say "wow, would you look at that." I had no idea what was going on, why was he saying this? He comes walking over to the side of the scanner standing next to me with his phone in his hand.

He says to me, "This is one for the books, we've never seen this before."

He proceeds to show me a picture of my scan on his phone explaining to me that the tube from the port in my chest that runs into the jugular vein had become dislodged from my jugular and twisted. It was the exact reason why they could not draw blood, and why the Heparin was doing nothing, because the tube went nowhere at this point.

I was shipped back up to my room and advised by the doctors that this incident caused an infection in my neck and the port would have to be removed. The doctors decided that because it was my last week of treatments, they would just remove the port and finish up chemo through a standard IV in my hand. However, with this infection, treatments could not be started until the infection and fever cleared, so those last treatments were delayed causing me to be stuck in the hospital for an extra three days. Not something I was looking forward to in my final week of treatment.

Once the infection cleared, treatments began but took even longer than normal. With the IV in my hand, the treatment drip had to be done much slower. What made it worse was that I had to have the IV redone every day, so by the end I was like a human pin cushion.

The day finally came, and this was it. My final treatment! I was excited. Let's get this treatment started. I was chomping at the bit, asking the nurse every hour if my medication had arrived yet. Of course, wouldn't you know the medications were running late that day. I was stuck doing my treatment until almost 10 p.m. that night. The nurse asked if I wanted to stay the night and just be discharged the following morning. I told her no way that was happening, we need this treatment done and get me out of here.

Thankfully, she did get me out of there. Now, as most people know (and maybe some don't), when you finish your chemo treatments, you ring a bell. To a person going through these treatments, it is the gold medal of success. Typically, this is a small bell hung somewhere in a common hallway with a string on it for the person to ring on their way out, so everyone knows they are done.

Well, for most of you reading this, you are probably a fire fighter, related to a fire fighter, or know one and fire fighters don't do anything "small." Knowing the end of my treatments were coming, my fire fighter family had dropped off the large bell that we keep in the station. This is one of those bells that are put on the front bumpers of firetrucks. Remember, as I said earlier, my treatment ended at 10 p.m. and my nurse was thinking you cannot ring anything at this time of night. No way I wasn't ringing a bell, and no way I wasn't ringing the bell that was brought to me. After some convincing, my wife and I were able to get her to agree to let me ring the bell, but it would have to be in my room and not the common hallway.

With the door to my room wide open, I grabbed that cord and rang that bell. It was so loud it didn't matter it wasn't in the hallway. The ring echoed throughout the floor, and it was AWESOME! I was done! I grabbed my stuff, hugged the nurses that were working, and thanked them for everything they did for me. It was a moment of happiness and weirdly sadness as well because these were the people that cared for me the last three months and now it is over and I would probably never see them again.

My wife drove me home that night as she always did. I was exhausted, but happy to be done. As we rounded the corner of my street, all I could see was firetrucks and people in my front yard. Not only had the family I worked with come to welcome me home and celebrate the end of those treatments, the district I live in had also set up in front of my home. I had family and friends out grilling burgers, and everyone shook my hand or gave me a hug in celebration of this end. It was heartwarming, it brought on tears. This is what it is all about, family supporting each other, whether it is your blood family or the firehouse ones. Unfortunately, I was so exhausted, I only got to spend maybe 30 minutes out there with them but was grateful for the time I could.

The next several months were a true recovery process now. I was able to slowly return to full active duty. I started by doing what I had done all along and worked the days I could and when I couldn't, I would stay home. Slowly my energy returned, and my oncologist released me back to full duty in June of 2020. It was great to be back. It felt good to have some type of normalcy again, and I couldn't be happier.

Cancer sucks, period. However, there can be a light at the end of the tunnel. Today, I am inside my fourth year of being cancer free. It has been a long road since, but that's a story for another day and maybe a part two to this someday. In the beginning, I was unsure if the treatments were worth it, and at times, wanted to give up. If it wasn't for my wife, my kids, my friends, my immediate family, my firehouse family, or any of the support I received, I probably would have given up, especially after that third week. It is possible to get through this terrible disease. Our bodies are stronger than we all think.

If you are currently fighting, keep up the good fight. Stay strong!

If you know someone going through the fight, be there for them. Sit with them even if it's in silence. They need you there for the support.

I understand this may have been a lengthy read for some. I wanted whoever is reading this to understand what they may or even may not encounter if they must go through this.

If you made it to the end, I want to personally thank you for reading and hope it helped answer any questions or even just be a good story for you.

