

A funny thing happened on the way to a conference – and other stories

BY VALERIE J LUND

This series of stories is dedicated to those of you with whom some of these moments were shared (or endured) and, above all, to my amazing and long-suffering husband, David Howard. Most of you know him as an exceptional head and neck surgeon but, since Covid, he has been involved in a large multi-speciality international charitable project reintroducing negative pressure non-invasive breathing support which could transform the management of respiratory disease all round the world. If you are interested, please visit www.exovent.org (or scan the QR code below) for further information and, if you enjoy the stories, please consider donating to the charity through the Exovent website (Click DONATE on the home page drop down menu).

Sit back, relax and enjoy the flight!

Given the number of flights and general health of the travelling public, it is surprising how rarely one is called upon to exercise what St John's Ambulance expertise one has in an unspecified emergency. When the call goes out 'is there a doctor on board?', I would suggest that you always wait at least five minutes to allow the stampede of paramedics, those who have a close relative who is a nurse, or people who watch *Casualty* regularly to rush forwards. If a second call goes out, politely enquire from a passing member of staff the nature of the problem, having first established that your area of expertise is exclusively the nose or whatever. Only then sally forth, if there is no-one else more capable. Many long-haul flights are well equipped with cases full of kit and medications but, in my experience, rarely carry instructions as to the dosage of the various drugs which may be but distant memories from medical school. At least there is always oxygen but what you cannot do is get the hypotensive/hyper-ventilating patient lying flat as this is not allowed (except in Business and First Class obviously) for reasons of health and safety, i.e. they would block the aisle.

Putting a sickbag over their face can create the wrong impression for fellow travellers, as I discovered when dealing with a hyperventilating French woman on a flight to Mexico, although it is physiologically effective (and quite entertaining).

The staff are always most anxious to know if the plane needs to make an unscheduled landing, a very expensive course of action. So, it is always worth checking the flight monitor to see what part of Kurdistan or elsewhere would likely be the site of the

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emergency touchdown, though of course this would not in any way influence your decision. Finally, if everything goes pear-shaped, I had assumed the body would be taken to a toilet for the rest of the flight. But no, they are left in the company of their unfortunate neighbour for the duration!

Considering my number of airmiles, it's surprising that I have only been called upon to intervene on a few occasions – for a hyper-ventilation episode (hence the sickbag over the head routine), to a passenger who was tired and emotional after one too many complimentary lemonades, and for a transient ischaemic attack which had flushed out three oncologists and a radiographer who had promptly formed a committee to construct a care pathway. On another occasion, I was asked to assist a pregnant lady who thought she might be having a miscarriage but luckily a psychiatrist got to her first. As I pointed out to the air steward, he would be more helpful than me in the circumstances, unless of course she had a nosebleed.

Any interventions, at least, fall within the 'good Samaritan' clause, but please don't imagine you will receive any thanks from the airline. At best, they will give you a form that states you were acting as their agent in any subsequent medicolegal action against you.

“Wishing to avoid a discussion about possible honoraria and my tax position with the American Internal Revenue Service, I answered somewhat recklessly, that I had come for a party”

Arrivals

On arrival at one's destination, one has to face the immigration services, committed to preventing the entry of undesirables. I never cease to be grateful that with a British passport, visas are rarely required for short visits (at the moment) and I can speak my mother tongue in the expectation (generally) that I will be understood. The online American ESTA has improved the situation for US entry though, when completing the form, I often wonder how many people tick the box to indicate that they are a terrorist.

One year, when I was making a number of very short trips to USA to lecture, I was questioned by one of the unsmiling US immigration officers as to the reason for yet another two-day visit. Wishing to avoid a discussion about possible honoraria and my tax position with the American Internal Revenue Service, I answered somewhat recklessly, that I had come for a party, interested to see what his reaction would be. "Must be a good party to come all this way," he smirked predictably. "I sincerely hope so," I said with a winning smile, happy in the knowledge that he assumed I was a prostitute.

Things are more decorous and ritualistic in Japan. At the luggage carousel, my bag once attracted the casual attention of a small beagle for reasons that are still unclear. As a consequence,

I was stopped at customs which for me is a very rare event and, after a certain amount of bowing, was asked if they might inspect my bags – like I had a choice. Wearing white gloves, they then carefully lifted out each item, placing it neatly on the counter and then just as meticulously replaced them, asked me to sign a paper to say that I was content with the level of politeness and care, before allowing me to go on my way, none the wiser. And any future small beagles which take an interest in my bags had better watch out for my stilettos.

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