

P Saved by Our Prayers

When Chaim Dovid Nemetsky, age thirty, woke up with flu-like symptoms on June 3, 2009, no one suspected that his health was about to spin into a bizarre, precipitous decline that would leave him fighting for his very life



Finally reunited: "Our baby completely forgot me"

Chaim Dovid's harrowing months of near-death, captured in digital image

Barbara Bensoussan

The first thing Miriam Nemetsky shows me is a picture on her cell phone. The tiny image shows her husband, Chaim Dovid, lying pale and immobile on a hospital bed, surrounded by futuristic blinking machines, connected to a spaghetti-like tangle of tubes. A bank of fourteen IV-type pumps were lined up in orderly fashion on a long metal rack. "Each

one dispensed two types of medication. That's how many different medications he was getting," she says.

No one suspected that the months he would spend hovering on the brink of death would inspire a worldwide call for *tefillos* and *takanos* in which thousands of Jews would unite to storm the Heavens for his recovery. Nor did anyone anticipate the sorts of *nissim* those prayers produced, creating a *kiddush Hashem* that left even the

non-Jewish doctors scratching their heads, telling the Nemetskys: "We did what we could, but your recovery had nothing to do with our efforts."

At first glance, Chaim Dovid and Miriam Nemetsky look like a very "regular" Flatbush kollel couple. They have an apartment in a small, old-fashioned, brick two-family house, furnished with seforim shelves and simple furniture. Miriam works as an intake counselor at HASC (Hebrew

Academy for Special Children), while Chaim Dovid learns in Yeshiva Tal Torah, better known as Rav Moshe Meir Lederman's yeshivah. They have two children, ages almost-four and eighteen months.

Tall, and once solidly built, these days Chaim Dovid's jacket hangs on him loosely. He enters toting a bag with a bagel and cream cheese to tide him over between learning *sedorim*, and as





he washes and bites into it, my inner Jewish mother rejoices to see that this young man — who just a couple of short months ago lay prone in a hospital bed unable to move — is finally able to eat a normal lunch, and with a hearty appetite.

Falling Into the Abyss Chaim Dovid's first symptoms seemed like a touch of the flu. Although it was the height of the swine flu hysteria, his doctor saw nothing out of the ordinary. That was Wednesday; on Thursday, he says, "I woke up feeling awful," and his temperature was 105°F (40.5°C). His doctor wasn't in, so — being a born-and-bred Flatbush native — he called his old pediatrician, who examined him and found his lungs to be clear. Later that afternoon the couple was able to see their regular physician, Dr. Teitelbaum, who administered the test for swine flu and ordered Tamiflu for the entire family. "The whole idea of swine flu already got me very nervous," Miriam says.

Chaim Dovid's fever refused to abate even after repeated doses of Tylenol, and by Friday morning "we brought him back to the primary care physician," Miriam recounts. "His fever was still at least 104 degrees, his blood pressure was very low, and his skin looked absolutely gray." Worse, he was having trouble breathing, which



"It's funny; the last thing I tasted was a piece of cantaloupe, and when I woke up months later I still had this taste of cantaloupe in my mouth"

MIRACLE MACHINE

The ECMO Machine—Extra Corporeal Membrane Oxygenation—was invented as an alternative to the iron lung, to be used to support the heart and lungs in cases of respiratory failure. First used successfully in 1972, it has primarily been used in neonatal ICU wards, where its success rate is estimated at 75%. The machines are still not widely available, and their success for adults is only about 60%.

Hooking up a patient to the ECMO involves inserting tubes into the jugular vein and the carotid artery; it takes a team of doctors, perfusionists, nurses, respiratory therapists and anesthesiologists to perform this procedure. "It takes at least two years of medical training to really understand all the workings of this machine," Yitzchok Twersky maintains. The patient has to be put under heavy sedation in order to suppress movement and lessen the amount of oxygen needed by the muscles. Anticoagulant medication (Heparin) is also administered so that the blood passes easily through the machine.

The patient's blood, which by this time is typically dark-colored or blue due to the lack of oxygenation, flows into the machine, which then performs the same sort of oxygen-carbon dioxide exchange usually executed by the lungs. Once the blood has been infused with oxygen, it is warmed and returned to the body. As the patient improves, the blood flow to the machine is decreased, as the patient begins to take over his own functions again. It is generally not advisable to leave patients on the machine for more than a few weeks, although a few patients have survived being connected for several months. The staff has to be particularly attentive to the risk of sepsis, or infection, that could be transmitted through the tubes.

led the doctor to suspect the swine flu had produced pneumonia.

"The doctor asked me, 'Do you want to be driven to the emergency room or should we call Hatzolah?'" Chaim Dovid remembers. "So I said, 'I suppose Hatzolah, since they can get you into the emergency room more quickly.' Once they arrived I walked myself into the ambulance. But that was the last time I walked for the next three months."

"This whole ordeal was so hard for Chaim Dovid's parents," Miriam feels compelled to point out. "Chaim Dovid is the last of their children, their *ben zekunim*. He is also very close to his *rosh yeshivah*, as he was among the original group of *talmidim* who started out the yeshivah. Rav Lederman also has a special relationship with him, like a son."

The room at Maimonides Hospital in which Chaim Dovid was placed already boded bad tidings. "My sister-in-law's grandmother had died in that room just a few weeks before," Miriam explains.

The doctors did a blood test and they found that his white blood cell count was a mere fraction of that of a healthy person. Alarmed, the doctors prescribed Vancomycin, but it was discontinued after he had a bad reaction. Miriam stayed with her husband until three in the morning, then went to the home of nearby friends to collapse for a few hours. "By four or five in the morning they finally transferred me to the ICU," Chaim Dovid recounts. "Despite the antibiotic, I was running a fever of 105 degrees, although they told me it was only 102 to keep me from panicking."

A Friend in Need On June 5, Friday, when Avrumi Rudich didn't see his friend Chaim Dovid in yeshivah for yet another day, nor could he find him at home, he called the *rosh yeshivah*, who instructed him to go to Maimonides Hospital. Avrumi arrived close to Shabbos, keeping the family company as the night went on. He tried to infuse a bit of Shabbos ambiance into the situation by singing *zmiros* with Chaim Dovid's father. The Bikur Cholim cart came by, and Chaim Dovid ate some of the fruit he was offered. "It was the last thing I was able to eat for months," he says. "It's funny; the last thing I tasted was a piece of cantaloupe, and when I woke up months later, I still had this taste of cantaloupe in my mouth."

Rudich almost immediately became Chaim Dovid's primary medical advocate and liaison to the *rosh yeshivah*. Rudich stayed by his side for what became several months, as the illness ran its terrifying course. His presence was of immeasurable

help to Chaim Dovid's wife and family.

Avrumi had already acquired a reputation for having a pronounced knack for medical situations. "As a young *bochur*, he worked in an infirmary, which gave him a great grasp of medicine," Miriam explains. "One of the *mashgichim* at the Mir even suggested that he go into medicine, but a *gadol* told him, 'Don't worry, there will be a time when you will put your *koach* for medical matters to good use.'"

A Shabbos Without Rest By Shabbos day, the hospital had to give Chaim Dovid an oxygen mask to help him breathe. Dr. Teitelbaum walked to Maimonides from Flatbush to see his patient and was shocked by what he saw. "He took one look at the numbers, and he told me, 'Your husband is very, very sick,'" Miriam remembers.

"Dr. Teitelbaum told me I should drink some Ensure," Chaim Dovid says. "So I asked, 'Is it *chalav Yisrael*? Why should I drink *chalav stam* if I don't have to?' I didn't have any idea how severe the situation was. So he went to check for an alternative, but then came back and said, 'Listen, I'm telling you to drink it — or else!'"

But despite the Ensure, and despite ICU care, his state of health continued to deteriorate. By Saturday night Chaim Dovid was coughing, and his fever had shot up to 107.8 degrees. The hospital staff tried everything: ice bags, cooling blankets. Nothing helped. Three hematologists were called in to test his bone marrow to understand why the white blood cell count was almost nonexistent, but decided to postpone the test, maintaining he would have been too sick to tolerate the treatment even had they made a diagnosis. They told the Nemetskys that some types of flu can suppress bone marrow function.

On Motzaei Shabbos, the *rosh yeshivah* spoke with Chaim Dovid. "He was crying," Chaim Dovid remembers. "He kept saying, 'It can't be, it can't be.'"

"Usually after his Motzaei Shabbos *shiur* he gives a *shmuess*. But this time, he asked everyone to say Tehillim for the first time. People began to hear about what was going on, and the next day, Maimonides Hospital was bombarded with phone calls."

Rav Lederman also spoke to Miriam, telling her: "Your husband may still recover through *derech hateva*. But we can also be open to a *neis*." He suggested she accept upon herself additional strictures: something for Shabbos, something in the area of *tzniyus*, and an effort to remain *simchadig*. "I had been feeling so overwhelmed, but after that, I felt stronger," Miriam says. "I felt more capable of being involved in all



the medical decisions."

By Sunday morning, X-rays taken at the hospital now revealed that Chaim Dovid's lungs were full of scar tissue, suggesting Acute Respiratory Distress Syndrome (ARDS), which is often precipitated by other diseases. Doctors proposed putting him on a respirator. "I called the *rosh yeshivah*," Chaim Dovid says. "He didn't know I was conscious. He told me that I should ask *mechilah* from my family; that it would be a *zchus* to help in the *refuah*."

"My wife overheard him telling me to ask *mechilah*, but she thought it was because the end was near. She began to cry, asking me for *mechilah* with a broken heart. So I had to reassure her that it was only to help the *refuah*, and that the *rav* had also said, 'We'll dance together at a *seudas hodaah*.'" Nevertheless, Chaim Dovid admits, "That's when I first realized this was really very serious."

Before putting him on the respirator, the doctor told him that he would be unconscious for two days. "I asked Avrumi, 'Is that true?' He told me, 'You'll be out for three more days.' Then he said, 'As long as you're here, I'm with you.' That's the last thing I remember." A mask was put on his face, an injection shot into his arm. He

would remain unconscious for the next five weeks.

By Sunday night, Miriam was falling apart from the strain. A doctor had told her he doubted they could do anything for her husband, and that even if he survived, he would likely sustain brain damage from the extremely high fevers. "I didn't know what to do with myself anymore," Miriam says. "I ran to the *rosh yeshivah*'s house, sobbing, 'I want my husband back!' Rabbi Lederman told me, 'I promise you'll get him back, be it through *derech hateva* or a *neis* — one of the two will work.'" The *rebbetzin* comforted her as well, saying, "I'm so happy you came; I wanted to be with you today so badly." The *rebbetzin* told her to go and sleep in their children's room, and came in with a book for her until she fell asleep.

The Valley of the Shadow On Monday morning, with Chaim Dovid now attached to the respirator, a cousin named Yitzchok Twersky arrived to help out. Twersky is a volunteer consultant for medical referrals, and facilitates doctor and hospital visits, surgeries, and other medical care at Mount Sinai, Columbia-Presbyterian, and Cornell Medical Center. He wanted to get Dr. Praeger, a pulmonology specialist at

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Back to the yeshiva bench: Rav Moshe Meir Lederman believed in a miracle



This cart is what the daily dosage of meds still looks like

Columbia-Presbyterian Hospital, to come evaluate Chaim Dovid. Praeger was unable to come; at any rate, he told Twersky, he wouldn't be able to do anything more to help the situation.

Despite the respirator providing 100 percent oxygen, Chaim Dovid was still not sufficiently oxygenated, and things were going from bad to worse. "On Monday morning his face and body were blown up; you could barely see his eyes," Miriam remembers. "They took an X-ray and determined that his lungs were perforated. His body was filling with air."

The situation looked so desperate that Rabbi Lederman, after speaking with Chaim Dovid's father, took the initiative to change his name. (Prior to this time it had been simply Dovid.) At noon of that day, the name was changed in Yeshiva Tal Torah. "They tell me the yeshiva was mobbed," Miriam says. "Of course, I wasn't there, I was at the hospital — although I was saying Tehillim and *tefillos* with them."

Three hours of Tehillim and the name change combined to produce a *neis*: the lung perforations began to heal themselves, and the swelling went down, mystifying the doctors. But Chaim Dovid's breathing was still in a terrible state. "Twersky suggested putting him on an ECMO machine," Miriam says. "This is an extreme measure. Simply getting a person onto the machine is highly risky. There are very few places that even have one. Columbia is one of the few hospitals in the country to have an adult ECMO machine."

Miriam Nemetsky pauses to put in a call to Yitzchok Twersky, as he is the best person to explain the details of this complex apparatus. Twersky gets on the line and explains: "An ECMO machine is a real last-resort option. ECMO stands for Extra-Corporeal Membrane Oxygenation. It's brought in for cases of ARDS, or end-stage lung failure. It is still an experimental intervention.

"The ECMO provides respiratory and

cardiac functioning. Hooking up a patient to the machine is extremely delicate — to be blunt, you're basically clinically dead, and it takes a team of ten or so doctors, and several hours of work, just to carry it out."

Twersky goes on to elaborate the terrifying risks. "If the procedure doesn't take, it can cause strokes or brain damage," he says. "And even if it takes, a person can't last for much more than fourteen days on the machine, or he will risk clots or other reactions — often limbs are lost because of oxygenation problems." Matters were further complicated by the fact that Chaim Dovid had absolutely no immune resistance with his practically absent white blood cell count. "But his blood oxygenation was so low we thought it might be his only chance."

Miriam adds, "One of the Maimonides doctors, Dr. Chanaka, deserves credit for spending a couple of hours speaking to us and the *rosh yeshiva*, explaining how it works and outlining all the pros and cons." As her husband's health proxy, she had to make final decisions for her husband, but she would always refer them to the *rosh yeshiva* and ask for his *psak*. At this point, the *rav* ruled that there was a *safek al pi Torah* about taking the risk of the ECMO; Chaim Dovid was not getting any worse, he said, so the Torah *hashkafah* is to not risk it unless he absolutely was in need of a last resort. Twersky warned the family that the machine was available that day, but perhaps would not be available later. The *rosh yeshiva* responded: "If Hashem wants, and he needs it, it'll be there for him."



"I had to go out and tell the hospital we were cancelling the ECMO and the transfer," Miriam says. "They were furious with me! But I felt I had to listen to the *rosh yeshiva*."

Yitzchok Twersky was also furious. "Chaim Dovid was almost dead," he said. "I started yelling that he should take the machine when it was available; who knows if we'd be able to get it later! I was yelling so loud the security guard came in to see what was going on, and Miriam was upset that I seemed so disrespectful to their *rav*."

But Twersky was not the one in charge of signing the papers, and had to cede in frustration to the family's decision. The next day, however, his advocacy of ECMO intervention would be vindicated.

Extreme Measures Despite improvement on Monday after the name change (the swelling was down; a member of Hatzolah named Rabbi Greenspan had come and done something called "light touch therapy" which seemed to help somewhat), Tuesday brought a fresh set of problems. Chaim Dovid developed a mucus plug in his lungs.

By Tuesday night, Chaim Dovid's blood was barely 43 percent oxygenated — a level which causes brain damage if allowed to persist. "Avrumi went to fetch Dr. Koenig, and he helped amazingly, even though he was really supposed to be elsewhere," Miriam recalls. "He kept bagging the lungs — that's a manual procedure for unclogging the lungs. He was working for two and a half hours; when he finished he was drenched in sweat from the exertion."

Now, however, it really looked like Chaim Dovid wouldn't make it. Rabbi Lederman gave the go-ahead: "Do whatever you can; put him on the ECMO." Twersky, driving out to the country with his mother, was on the George Washington Bridge when he got the frantic call. "I turned around and went straight back to the hospital," he says. "I have a very friendly relationship with the doctors there, but they really gave it to me on this one. They had already pulled together a team of about eight specialists plus a driver for the Nemetskys the day before, and then found themselves cancelled. Now they wanted reassurance we weren't going to cancel on them again."

"Twersky had to use every ounce of his influence to get them to agree," Chaim Dovid concurs. "He pleaded, 'Come down here and see a young woman with two little children! Imagine what it will be for her if he doesn't make it!'"

Columbia finally agreed, and sent down their team. Connecting Chaim Dovid to the ECMO was a major procedure that involved putting catheters into his aorta, neck and groin. “If it’s a good connection, it works instantly,” Miriam explains. “And if not — well, it’s all over. The trauma is too great.”

“Here’s your time to pray,” the staff told Miriam as they prepared to hook up her husband to the machine. All present held their breaths ... but the connection, baruch Hashem, “took” nicely.

“Even the driver of the ambulance has to be specially trained when transferring a patient on an ECMO,” Miriam explains. “He can’t hit any bumps or make any short stops, or he could literally kill the patient.” Amidst torrential rain and thunder, the special ambulance pulled away from Maimonides while Miriam, Avrumi, and the family again held their breaths, praying the drive would be smooth enough. A crowd of *bochurim* from the yeshivah had come to the hospital as well to see him off with their prayers, standing outside, drenched with rain and tears. The driver did nothing to reassure them: “Gee, lady, you’re gonna need a lotta luck,” he drawled to Miriam, unceremoniously spritzing open a can of Pepsi.

Their prayers saw them safely to Columbia by 4 a.m., and if that had not been exhausting enough, it took another three hours to finalize the delicate process of putting him in his room. “After that,” Miriam confesses, “I went to a room and collapsed.”

In the meantime, that evening a *kinus* had been organized in Lakewood to say Tehillim for Chaim Dovid, and a tremendous crowd turned out. People were literally davening all over the world as phone messages, e-mails, and Jewish publications, both print and online, urged Yidden to pray for Chaim Dovid ben Leah. *Gedolim* such as Rav Elyashiv gave brachos for a *refuah shleimah*. In addition to the yeshivah’s efforts, Miriam’s father initiated an automated phone message urging everyone to make Shabbos five minutes early in Chaim Dovid’s *zchus*. In a tremendous show of *achdus*, thousands in *klal Yisrael* responded to the call, taking on extra stringencies in Shabbos and *tzniyus*.

Chaim Dovid’s yeshivah also instituted round-the-clock Tehillim and learning sessions in his *zchus*. “The only interruption in their Tehillim and learning during that period was one night when somebody from the yeshivah got married,” Miriam relates. “So for that one night, my sister-in-law Esti Nemetsky arranged for Yeshivas Tiferes Elimelech to take over for them while Yeshiva Tal Torah attended the wedding.”

The Cure Is Worse Despite the high



Doctors who had predicted he might never walk or go up stairs were proven wrong. Even better, those who were sure his brain would suffer damage were also proven wrong; in fact, today he is slowly resuming his kollel learning schedule

feeling of relief when the ECMO transfer was pulled off successfully, the roller coaster of hope plunged again shortly afterward: Chaim Dovid’s kidneys failed. Now he had to be put on dialysis. And while the ECMO may have re-oxygenated the blood, Chaim Dovid’s white blood cell count was still shockingly low.

Preliminary results of a bone marrow test conducted that Friday at Columbia suggested that lymphoma was present in the bone marrow. “The bones were 90 percent filled with diseased cells, and so there was no room to grow more white blood cells,” Miriam says. “It’s another *neis* that nobody in Maimonides had suspected or found any cancer in my husband,” Miriam says. “Because if they had, they never would have permitted him to be put on an ECMO machine in the first place, and we wouldn’t have been able to restore his respiration.”

The doctors decided to proceed with “fractionated cytoxin” — the lowest level of chemotherapy, given Chaim Dovid’s fragile state — for five days, to see if it would help white blood cells grow. Avrumi Rudich, who was in constant contact with the *rosh yeshivah* about every medical development, called and told him: they say it’s lymphoma, maybe there’s no hope for him. “The *rosh yeshivah* said nothing,” Rudich says, “but that night, during his Shabbos *shiuur*, he said, ‘It’s *sheker*: Soon everyone will see the *emes*, that it’s not cancer — not even a trace of cancer.’ The *rosh yeshivah* added that we should nevertheless go along with the doctors, in the way of *derech hateva*, but that the truth will come out in the end.” To get a second opinion, specimens were sent to the National Institutes of Health (NIH) in Bethesda, Maryland, and Cornell Medical Center.

In the meantime, X-rays were now suggesting that there was cancer in the lungs as well. The initial treatment of choice for lymphoma in the lungs is steroids; and what that meant, ironically, was that the frightening diagnosis turned out to be a blessing in disguise. “The amazing thing is that there has been a lot of debate recently over using steroids to treat ARDS,” Miriam explains. “At Columbia, the policy was not to do it. But just recently, studies have come out proving that steroids are actually *helpful* for ARDS if administered seven days into it. The *neis* was that Columbia would never have normally authorized the steroids for his ARDS, but because of this medical error [Chaim Dovid was actually shown later not to have lung cancer], he got the steroids on exactly the seventh day.”

Chaim Dovid began to show improvement and within days there was a dramatic upturn in his state. Pleased with his progress, the doctors decided to take Chaim Dovid off the ECMO after ten days. The good news spread fast; his wife’s niece overheard a lady remark to her friend in the grocery store, “Did you hear? Chaim Dovid is off the ECMO machine!”

“The *rosh yeshivah*’s response was, ‘This is going to hurt us,’” Miriam says. “He said that people will now think Chaim Dovid is out of danger and they won’t be *mispallel* as much.”

The good news spread, but later that night, he developed a life-threatening condition known as acidosis, in which the body takes in oxygen but does not let out enough carbon dioxide, usually causing a rapid decline. “For a few hours it was touch and go,” Miriam shudders. “The head of ICU said to tell the family he wouldn’t make it through the night.” Her father ran to put in another phone message asking for prayer and *takanos*; within an hour people came running, and marathon Tehillim sessions began in yeshivos in Brooklyn and Lakewood. “They almost put him back on the ECMO,” Miriam says. “But many people took on unbelievable *zchusim* for him, and miraculously, the situation resolved itself and he stabilized.”

Yet another miraculous occurrence happened after two weeks at Columbia: despite the fact that all the other six swine flu patients on the ward passed away, Chaim Dovid’s tests suddenly showed no more traces of swine flu. Given that he still had almost no white blood cells to create an immune response, this made no medical sense to the doctors, who described it as “walking through a rainstorm and managing to dodge all the drops.”

From a Dream to a Nightmare

During all this time, Chaim Dovid was under paralytic sedation, which limits not only muscular movement but all brain activity. It is some twenty times more powerful than regular sedation, and a danger unto itself. When doctors begin to reduce the dosage, it has to be done gradually, over five months, to avoid the risk of seizures.

The *rosh yeshivah* urged Rudich to do whatever he could to get Chaim Dovid off sedation as soon as possible. Rudich convinced Bob, one of the nurses who had taken over from the regular nurse, to lower the dose. (The nurses were allowed to use their discretion to raise and lower it in accordance with the patient’s needs, but in this case Bob decreased it substantially.) Chaim Dovid says, “I managed to come three-quarters of the way out of sedation in a couple of weeks, the progress of five months.

“Slowly I began to wake up; after five weeks I had regained consciousness, although I couldn’t speak because of the trach tube in my throat. I thought I was dreaming; I didn’t recognize my surroundings. I wanted to ask for a drink. Then I thought this must be a nightmare, and I tried to wake myself up.”



Friends forever: Avrumi Rudich (right) never left his side



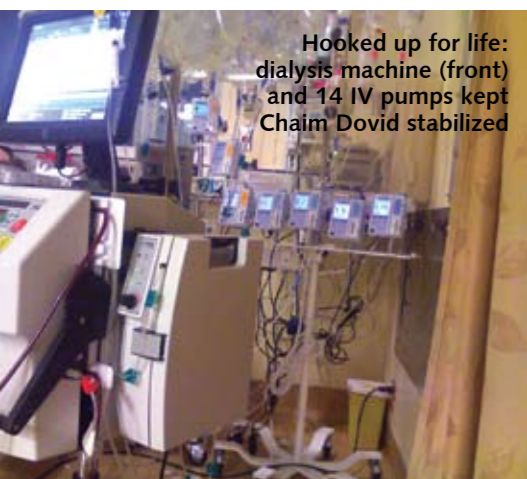
As Chaim Dovid went from groggy to fully awake, Miriam and Avrumi tried to explain to him what had happened. “It was the worst moment of the whole ordeal,” Chaim Dovid says. “I couldn’t make heads or tails of it. They gave me a pad to write, and I scrawled: didn’t I just come back from Israel? The news of the illness came as a shock to me.”

In many ways it was worse being conscious. “I was so thirsty, and my mouth was so dry,” he says. “It was torture. I couldn’t drink for five weeks. They gave me a speech and swallow test, and finally after two weeks they let me have some applesauce — that was the biggest Gan Eden, like I’d never eaten before in my life.

“But my voice sounded metallic, unnatural to me; I couldn’t move because of two big catheters in my neck, and my body was frozen from so many weeks on paralytics.” The *rosh yeshivah* had told everyone to keep in mind the phrase *ein od Milvado* during the bad moments, and Chaim Dovid’s brother made a big sign with those words, which he put up in the room.

Perhaps the hardest thing to bear was the boredom. “I had to stay in one position, listening to the noise of the machines. I would stare at the clock as the hours dragged by. Finally I got so sick of it I asked Avrumi to remove it. The nurses would come in and ask, ‘What happened to the clock?’”

The family tried bringing in some Jewish videos for Chaim Dovid, to ease the boredom, but it didn’t help much. “They just seemed silly to me; I didn’t have any concentration,” he says. “Eventually I was able to speak to the *rosh yeshivah* once a day; he would call me at one in the morning for a *chavrusa* session.”



Hooked up for life: dialysis machine (front) and 14 IV pumps kept Chaim Dovid stabilized

One Life for Another In a heartbreaking “exchange,” Chaim Dovid’s father was diagnosed with cancer during precisely the same time that doctors were deciding Chaim Dovid probably had lymphoma. Sadly, Chaim Dovid’s father was *niftar* one week after Chaim Dovid was discharged from the hospital.

“It’s very strange,” Chaim Dovid relates. “The cancer he contracted is very rare: only 166 cases have ever been reported. While I was sick, I had a dream one night that my father came down with my sickness. I was very worried, but when he came to visit me the next day, I felt reassured. Then, I noticed his feet were swollen, just like they had been in my dream.” Mr. Nemetsky, *z”l*, who was eighty-three years old, had been vigorous and disease-free until then. “He told somebody toward the end that he was exchanging his life for his son’s,” Chaim Dovid says. His tone of voice is matter-of-fact, but it sends shivers down the spine nonetheless.

Medical Mishaps During this period of time Chaim Dovid was plagued by constant fevers. “Those were masked by the dialysis machines,” Chaim Dovid maintains. “They cool the blood. But the fevers kept coming back, and Dr. O’Connor kept insisting they were tumor fevers from cancer.” A CT scan at one point showed that the liver, kidney, and spleen were enlarged. The doctors, who still suspected cancer, wanted to proceed with full-blown chemotherapy.

In the end, the source of the “tumor” fevers was found to be something completely different from cancer. When Chaim Dovid developed a rash, a dermatologist was called in, and upon examining his skin he realized that the long-bedridden patient had also developed olive-sized lesions on his back. “These were fungal infections,” Avrumi explains. “They come from prolonged antibiotic treatment. They begin inside the body and progress outward. The dermatologist did some biopsies, ordered an antifungal, and removed some of the antibiotics.”

As the patient slowly began to get back to himself, there were good days and bad days. Chaim Dovid was finally transferred out of the ICU, but probably too soon for his own good. “They moved him at 3 a.m., with a 102-degree fever and no oxygen, and he got pneumonia again,” Avrumi relates. “It took awhile to find a doctor able to authorize sending him back to the ICU and a respirator, and another two weeks to get rid of the pneumonia.”

“I was back with a tube down my throat, again unable to eat or drink. It was

extremely depressing,” Chaim Dovid says of this setback.

The pathology specimens sent to NIH and Cornell Medical Center came back, indicating no traces of cancer whatsoever. With the help of Yitzchok Twersky, Cornell University Hospital even agreed to accept Chaim Dovid, and Rav Lederman felt so strongly that Chaim Dovid should change hospitals that he told them to make the change even if it involved making the move on Shabbos. In the evening of the day after Tisha b’Av — which indeed turned out to be Shabbos — Chaim Dovid was transferred to Cornell, accompanied by Avrumi going along in the ambulance to keep guard. (Chaim Dovid’s brother, who stayed to watch over the transfer, walked over a hundred blocks from 187th St on the West Side to Cornell Hospital on East 78th St to rejoin them.)

Cornell conducted its own bone marrow test on him right away and ruled that no lymphoma was present.

“They decided he was just weak from his ordeal,” Rudich says. “He arrived at the hospital all ballooned up, because he had no protein in his system, so they gave him a protein IV, and that helped. They treated him for the fungal infection, and began some rehab.”

Blessedly, within two weeks Chaim Dovid was able to eat again. He was still fragile, however, and suffering the consequences of having spent so many weeks lying in bed. He developed pulmonary embolisms in both lungs, which were fortunately caught and resolved, as was a clot in the vena cava. He was sent home two weeks before Rosh HaShanah, but then developed what was thought to be a staph infection and had to go back. As it turns out, it was the culture itself that was contaminated. “I spent a week in the hospital for nothing,” he shrugs resignedly.

After that, he came down with cellulitis on Erev Yom Kippur. “I went home for Succos with an IV,” he says.

He has been home since then, with his family watching his health like a hawk. “We’re still keeping a close eye on him,” Miriam says. “We want to make sure he keeps getting his strength back.” As Chaim Dovid finishes his fourth *rugeleh* from the plate on the table, one can only feel optimistic that youth and volition will finish the job and allow him to continue learning in the yeshivah he loves so dearly.

A Family Tries to Cope How did Chaim Dovid and his family manage to get through such an ordeal? “It really put me in my place,” Chaim Dovid says laconically.



The Nemetsky wedding album: healthier days couldn’t foreshadow the future



“One of the most painful things I heard was that my daughter wanted very badly to go to her house, even for an hour. When my mother took her there, she didn’t want to leave. That really made me feel, ‘Wow, I have to get out of here’”

Neither of them saw their children much between June and September. “The first month they were able to stay with my regular babysitter,” Miriam says. “Then a dear friend of mine, Shaindy Rudich, took them to the mountains with her for two weeks. After that she sent them to my sister-in-law — who was also in the country — for another two weeks.

“After two months I brought my daughter to see her father in the hospital. Like us, she had to wear a paper cap and gown to avoid passing any germs. He had a tube in his throat, but I told her it was a straw, and we used the sheet to cover all the other tubes and equipment.”

“Our baby completely forgot me,” Chaim Dovid sighs. “When I came home, he saw me as a complete stranger.” But what really affected him was the way his daughter so clearly missed her home life: “One of the most painful things I heard was that my daughter wanted very badly to go to her house, even for an hour. When my mother took her there, she didn’t want to leave. That really made me feel, ‘Wow, I have to get out of here.’”

The largesse of the community allowed Miriam to stay in a hotel room near the hospital for two months, and Avrumi was also provided with a room. “We could have been paying \$225 a night otherwise,” she says. “And Avrumi’s wife is a *tzadeikes*; they have a baby of their own, but she encouraged him to stay with my husband.”

As mentioned, Chaim Dovid’s father was *niftar* one short week after Chaim Dovid was discharged from the hospital. The Nemetskys’ rejoicing at his release

was tempered by the tragedy of losing their father. Many people, given so many stressful life events one after the other, would give out emotionally; perhaps the final *neis* is that the Nemetskys today seem cheerful and happy just to enjoy the routine of normal everyday life.

A Medical Mystery So what, exactly, was the cause of Chaim Dovid’s near-fatal illness? “We think now maybe it was swine flu complicated by bronchitis or pneumonia,” Miriam says. “But we’re not sure why the white blood cell count was so low. Maybe his body was just overwhelmed by the level of infection.”

Although the pathology reports from NIH and Cornell — two of the country’s top medical centers — indicated that there was no cancer, Yitzchok Twersky is not convinced. “I saw all the test results,” he told *Mishpacha*. “I think it’s pretty clear that Chaim Dovid came in suffering from a disease named ‘hairy cell leukemia,’ which is a treatable cancer that affects the bone marrow. That’s why his white blood cell count was so low in the beginning. By the time he got to Cornell the chemo had taken care of it.”

Whatever the case, once stabilized, Chaim Dovid’s lungs recovered very quickly. Doctors who had predicted he might never walk or go up stairs were proven wrong.

Even better, those who were sure his brain would suffer damage were also proven wrong; in fact, today he is slowly resuming his kollel learning schedule.

“When we called Columbia to thank the doctors, they told us, ‘Well, we supported your recovery, but the recovery didn’t come from us!’” Miriam is now able to laugh. “Even at Cornell, the doctors said, ‘Your help came from outside this hospital!’”

“We saw a direct relationship between saying *Tehillim* and my husband’s recovery. When many people were saying *Tehillim*, he did better; his bad moments came during the times prayers were reduced, like on Friday afternoons.” When asked how she coped with such an unbelievably stressful situation, she says, “I never felt alone. I signed all the papers, but I wasn’t the one making all the decisions. I was guided by Rav Lederman, Avrumi, and others.”

The Nemetskys insist on taking this opportunity to thank everyone in *klal Yisrael* who had them in their prayers. “If our experience has taught us nothing else, it is just that Hashem is the One Who is directing all our lives,” Chaim Dovid says. “Despite all that we suffered, we are grateful for the tremendous *achdus* and *kiddush Hashem* that came out of it, and for the opportunity to demonstrate that *ein od Milvado* is more than just a phrase.” ■