

A View from the 89th Floor

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Now that I am halfway through my 90th year, I find myself in an enviable place. There is now so much more time. My view is so much more detached. My decisions affect so few people. I know how fortunate I am.

Obviously, I can see so much further into the past than I can into the future. And now that I have the time to do so, I can look back upon the results of my encounter with the poliovirus and ponder its effect on my body, my mind, my view of life.

The incident with the virus occurred in early 1925 when I was nine months old. I know this because my mother told me. The initial diagnosis was “intestinal flu.” The misdiagnosis made no difference as there would have been nothing to do except let the virus run its course. Chalk one up to good fortune for I have absolutely no memory of the acute pain that goes along with polio.

At the time, my father, mother and brother were living in an apartment in Cincinnati, Ohio, where he had just begun his practice as an architect for a design-build construction company. The source of the virus remains a mystery. I have no memory of the early years, but a photo exists of me standing on the fire escape. The only anecdote that has come down is that it took until I was about two years old before I learned to walk.

This must have been a baffling time for my parents. My father had been an outstanding baseball player in his youth in Elnora, Indiana. He was also something of a prodigy having made the first radio in his village. He joined the US Army in 1917 and was stationed at Carnegie Tech in Pittsburg when the flu epidemic of 1918 struck. As a consequence he received what we were told was a 100% disability discharge due to heart damage.

Fast forward to 1928 where we were living in our new home in Mariemont, Ohio, a unique planned community in Cincinnati. We were living in a house he had designed. I vaguely remember my mother rubbing my legs with coca butter, which I remember as being shaped like a cake of soap.

I believe my father’s sister and her husband were living with us while they were building a home nearby. I do remember that I fell often and spent most of the time

with skinned knees. Other than that I had no reason to think I was any different from all other boys.

This idyll ended abruptly on the night of March 30, 1930 when my father suffered the fatal heart attack foretold by the flu damage of 1918. I am sure the episode was not a complete surprise to either my father or my mother.

Thus begins the reality of the polio part of the journey: moving in with my mother's parents in Sheridan, Indiana, and starting to school. Boys seem to enjoy pushing and shoving and knocking things over, including other boys. When it was discovered that I would collapse if my left knee was struck from behind it became a source of merriment for a short time. It was also then that I learned to be thankful for the good things I did have, for it was then that I learned the value of having a big brother and of having friends. The torment subsided, but the trick knee remains with me today.

From the height of my 90th year, memories of the past seem to flow like a ribbon of colorful strands of viscose plastic with everything blending together instead of discrete sights and sounds. However, there have been some way stations that do stand out very clearly. For example, I have no recollection that I was ever treated as "being different" by family, school or community with the exception of my treatment at the James Whitcomb Riley Children's Hospital in Indianapolis.

I have no idea when these therapeutic visits began, but it was sometime during the mid-1930s. Knowledge about polio rehabilitation had to be minimal, but what the doctors and nurses may have lacked in knowledge they made up with trial-and-error vigor. The focus was my right ankle which by the time I was ten or so had turned to the inside, and I was essentially walking on the outside of my foot. I believe in the beginning my mother tried to overcome this condition through massage and efforts to turn the foot physically.

At some point the decision was made to turn my right foot outward, then wrap the leg as far up as just below the knee in wet plaster emulsion somewhat like an Ace bandage that then hardened quickly. In theory, this was supposed to retrain the muscles. I have no idea how many such trials were conducted, but I can almost feel the ensuing pain. I distinctly recall one night in the ward when a nurse making her rounds stuck a pin in my big toe and I couldn't feel it. The method for removing the cast was to use a pair of metal cutting scissors - the lower half of which did the shearing as well as pushing into the flesh on my calf. This was a pain that I remember. In short, the procedure didn't work.

The next plan was what I remember as a “tendon transplant.” In my case, the tendon that runs to my big toe was divided longitudinally up to just above my ankle and anchored on one of long bones of my right foot. It worked and did straighten my foot to an almost flat position. It continues to work after seventy-five or so years. It has probably stretched some as I continue to walk with a starboard list and a tendency to roll over on the outside, but praise be – I am walking with the assistance of a wheeled walker. To this day, I thank the people at the Riley free clinic and Doctor Casely, who performed the surgery.

One postscript was that I learned to respect wet leaves on the sidewalk when walking with crutches. I took a spectacular fall and cracked the cast which did not endear me to mother or to the doctors at the hospital.

By my senior year in high school I had long since been banished from the football field but I could play basketball – slowly. I practiced shooting constantly and became very adept with an ambidextrous hook shot as well as very accurate from 25 feet or so. But, I was oh so slow. I was the team manager for football and basketball and the coach took me with him to scout coming opponents. I believe I was helpful and that the confidence I had in working with him came partly from the confidence I built as I was learning to be like everyone else.

During my freshman year at the University of Missouri my class was called up for the WWII draft. The preliminary part of the physical was not too detailed and at the end of the day I stood in my underwear with the rest of the guys and prepared to be sworn in to the Army. I was careful to get to the back of the pack to avoid anyone noticing my atrophied left thigh.

And who should show up just as the Sergeant was instructing us to “raise the right hand” – Dr. Casely along with a colleague. He swiftly conferred with the Sergeant and stamped my file 4-F, and then proceeded to show his companion what a good job he had done on my foot.

At the time, I was furious and ashamed. It took several years for me to fully appreciate what the surgeons had done. Eventually I became grateful for the Riley Hospital and for the people who labored so hard to help me lead a “normal” life.

Without question, this episode was the most traumatic event of my life. I never thought of myself as “different,” and I certainly expected to do my part in the war. To be rejected and labeled 4-F was both humiliating and disorienting to the point that I

never could get organized or feel like a whole person until I fell in love with my wife to be.

My advisors in the community and the family church all impressed on me the importance of staying in school. I was awarded a scholarship from the Vocational Rehabilitation agency in Indiana which paid for books and tuition. I worked as many overtime hours as possible in a nearby General Motors plant during the summers of 1942 and 1943 and saved essentially all the money I made. With the help of some jobs during the university years I finally graduated with a major in extra-curricular activities.

By this time I had met my wife to be and had a passion for doing something worthwhile for the world and set about to become a teacher. I am sure that most new "education" graduates feel the same way. This career lasted for four years during which I learned a great deal about teaching, about myself, and about traversing the unknown crevasses that occur during our journey through life.

First, I learned that we needed more money than would be available in a teaching career. I began our new life with an entry level job operating a steam heated rubber molding press. I vividly recall the temperature in the press room was 113 degrees F. The job was to pull and push various sizes of steel molds in and out of a steaming press. Fortunately, better jobs in the factory opened, and I finished a 31-year career as an executive within various divisions of the Firestone Tire and Rubber Company.

My polio experience played almost no role in the years from WWII until the late 1990s. However, things began to change. We were living in Pinehurst, North Carolina, where I conducted a small marketing services business, played golf, traveled and cultivated our gardens and large yard. More frequent falls and some weakness in my arms brought about using a cane periodically. I do not know when I became aware of post-polio syndrome, suffice to say that I was diagnosed by Dr. Julie Silver at her clinic in Massachusetts probably in early 2000. By then I needed more than a cane if I intended to have a stable platform for walking. By 2004, at the age of 80, I knew we had to find a place to live that would not be as demanding as our private home.

We moved to an independent living facility in 2007 where my locomotion is with a wheeled walker and arm crutches for away-from-home activity. I have never learned to walk correctly with either mode. I tend to get the walker too far away from my body and slump over. Yes, I do try to do better, but the bad habits quickly take over. The same problem exists with the crutches. However, I still can get out into the community and participate in Rotary and other activities.

I have been told many times by many people that I am the most optimistic person they have ever known. It is easy for me to see the brighter side of whatever comes along.

Four weeks ago I fell as a result of stupidly letting go of the walker and attempting to put a lid on a large storage box. On the way down, I hit the small of my back on the steel door frame of a storage room and ultimately landed on the concrete floor. The pain has subsided, but I can still move around and expect to start some therapy soon.

And so, about 89 years after the acute phase of polio a physical recap and inventory will show the following conditions:

- Left leg, the support leg – Normal foot and calf; thigh never developed; hyperextended knee
- Right leg, the nonsupport leg – Shorter by an inch; calf always somewhat smaller with noticeable atrophy during last ten years; over-developed thigh subject to cramping; foot different shape and turned under significantly; arthritic ankle joint
- Very weak diaphragm; shallow breather
- No noticeable abdominal muscles; could never do sit-ups
- Arthritic hands becoming quite weak with numbness and little feeling when I touch
- Most noticeable nuisances: toileting and showering

My view is that my polio experience has equipped me to cope with life and its varied challenges. It helped me to understand what is valuable and important and to acquire the confidence to deal with the bad and appreciate the good.

I am the founder of the Rotary Polio Survivors Fellowship. I am active in our retirement home as librarian and organizer/discussion leader for our book club, and leader of a post-polio support group.

As I approach my 90th year, I can still read and write, talk and think, and have been happily married for almost 68 years. I am optimistic that I will continue to lead a full active life.

My view, most importantly, is that I am content.

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