

# **Sample Chapter**

## **Foreword**

In December 2024, at the age of seventy-five, I was diagnosed with pancreatic cancer. An unresectable tumor, measuring 56 x 54mm. The prognosis was blunt and sobering: eight months to a year.

Like anyone who receive such news, I was forced to confront my own mortality far sooner and more directly than I had expected. What followed was a period of intense challenge, uncertainty, and reflection that would ultimately reshape how I understood illness, resilience, and life itself.

This memoir is the record of that journey. It is not a medical text, nor is it intended to offer medical advice. I am not a physician, a researcher, or a healthcare professional of any kind. Everything you will read here reflects my own personal experience, what I was told, what I chose, what I endured, and what I learned along the way. Others facing the same diagnosis may walk very different paths, with different outcomes, despite their best efforts.

My treatment involved chemotherapy under professional medical care, alongside changes I chose to make in my daily life, including diet, physical activity, and mindset. I do not claim that these choices caused my recovery, nor do I suggest that they can or should be replicated by others without proper medical guidance. Cancer is complex, deeply personal, and unpredictable.

In July 2025, the tumor that had threatened my life was no longer detectable.

### ***Radiology Report Quote:***

*“The tumor is fully resolved with no evidence of residual disease.”*

I remain profoundly grateful for skilled medical professionals, for support from my friends and family, and for the time I have been given. This memoir is offered in the spirit of honesty and reflection. It is written for those who wish to understand what one individual’s journey through pancreatic cancer looked like, not necessarily as a model to follow, but as a story to be read.

# *Reclaiming My Tomorrows*

## *A Journey With Pancreatic Cancer*

### *Chapter One*

*I*'m not entirely certain when the first unsettling signs appeared, it could have been January, maybe February 2024, but I remember the experience itself with unnerving precision. At the time, I treated it as an unpleasant abnormality. With the benefit of hindsight, that casual dismissal feels dangerously naïve; the quiet assumption of someone who has always taken good health for granted..

The day had started normally without any hint of what was to come. I finished an early workout at the gym, ate my habitual breakfast of fruit, yoghurt, fibre cereal and a slice of toast with marmalade, then settled into my home office to wrestle once more with the sequel to a novel I had written years earlier. Rose, my wife of 45 years, was at work at the clinic where she was employed as a doctor's receptionist. I was alone in the house, cocooned in routine. There was nothing to suggest my body was about to betray me.

Sometime mid-morning, without discernible cause, a wave of nausea surged through me. At first it was subtle, an easily ignored unease, but it rapidly gathered momentum, swelling into something darker and more insistent. My stomach began to churn violently, followed by pain, a sharp, twisting sensation high in my abdomen that seemed to coil inward on itself. It felt as though something deep inside me with spikes on it had become trapped and was now expanding, pressing relentlessly outward. I was convinced that if I could just release one deep, liberating belch I would be spared, but no matter what I did to induce it, no relief came.

The hours that followed blurred into a single, grinding stretch of pain. I swallowed anti-emetics and painkillers indiscriminately, grasping blindly at anything that promised an end to the suffering. I forced myself to retch, thinking if I could throw up and rid myself of whatever was in there, the problem would go away. Nothing worked. Eventually, the combination of exhaustion and medication claimed me, and I slipped into an uneasy sleep.

When I woke an hour or so later, the pain was gone. Not diminished. Gone. There was no nausea, no tenderness, no lingering discomfort, nothing to suggest that anything had happened at all. It was as if my body had erased the evidence of its own rebellion. I lay on my bed confused, trying to reconcile the memory of agony with the normality I now felt. I had always believed myself resilient: I exercised daily, ate well, had quit smoking a decade earlier, hadn't consumed alcohol in 20 years and enjoyed good health. Illness belonged to other people. Whatever this had been, it was entirely uncharacteristic.

Reassured by its sudden disappearance, I dismissed the event, filed it away as a strange but ultimately meaningless episode. For months, I gave it no further thought.

The second attack came in early September 2024. This time, there was no ambiguity. The nausea struck as it had before, overwhelming and without warning, followed by a savage, white-hot searing pain that drove me to the brink of panic. It had climbed higher now, pressing hard beneath my diaphragm, radiating upward into my chest, lodged cruelly behind the sternum. The term *heart attack* rose unbidden in my mind and refused to leave. As time dragged on, fear gave way to certainty. I was convinced this was life threatening.

I was moments away from calling an ambulance when Rose walked through the door. One look at me was enough. Within minutes, she had me in the car, and we were speeding toward the clinic, the road blurring as pain and dread competed for dominance.

The severity of my symptoms set off alarms at the emergency room. I was rushed into a cubicle, ECG electrodes stuck to my chest and abdomen, machines brought to life around me. Blood was drawn, blood pressure was measured again and again, faces hovered, serious and intent, eyes darting between me and the glowing monitor at my side. And then, slowly, inexplicably, the pain began to loosen its grip.

By the time I was admitted as an inpatient and wheeled to a ward where I would spend the night “under observation,” the agony had retreated entirely. As before, it left no trace. I lay there feeling oddly fraudulent, embarrassed even, occupying a hospital bed while my body behaved as if I had imagined the entire episode.

Despite my mysterious recovery, the next day was consumed by tests. A cardiologist. A pulmonologist. A gastroenterologist. One by one, they found nothing. The cardiologist even joked that he would book me in for a transplant.... With me as the donor.

“There’s nothing wrong with it,” he said cheerfully. “Men twenty years younger than you would line up for this.” Reassuring words, given that just twenty-four hours earlier, I had been convinced I was in the grip of a fatal heart attack.

I spent a second night in hospital for reasons no one clearly articulated and was discharged the following morning, Thursday 5 September 2024, with a diagnosis that felt almost insulting in its simplicity: *Severe indigestion*. It was suggested I chew my food more thoroughly. *What did they think? Was I a five year old?*

As a precaution, I was advised to arrange a colonoscopy and endoscopy examination.

Rose and I had been invited to the Springbok versus All Blacks rugby match in Cape Town that weekend and we were due to fly down the following day, so we scheduled further investigation for after our return.

Within a single week, I had been hospitalized for the first time since suffering a gunshot wound in military combat almost five decades earlier. I had seen more doctors in forty-eight hours than in the rest of my life combined and there was “nothing wrong with me”.

The colonoscopy test results arrived stamped with silent reassurance: *nothing to see here*. So, life went on.

Until 5<sup>th</sup> November 2024. That day the symptoms returned unchanged, unmistakable, and just as disabling. Once again, hours of agonizing torment were followed by an abrupt and total reprieve. The explanation of “severe indigestion” no longer held, but I still had no framework for what was happening.

What I was blissfully unaware of, was that these episodes, so fleeting, so easily dismissed, were not false alarms at all. They were warnings. Quiet ones. And they were announcing the arrival of a disease that rarely offers second chances.