

## Where There's a Will, There's a Way

The respiratory care profession is home to many people who first learned about it because they or a family member was suffering from asthma.

But few can tell the story AARC member Stephen Gaudet, RRT, can tell. Not only has he had asthma since birth, he has one of the most severe cases many therapists have ever seen. Now age 53, he estimates he's been hospitalized for asthma more than 80 times and been intubated 13. While his diffusion studies and baseline ABGs are normal, his FEV<sub>1</sub> ranges from 42% on a good day to the low 20s when he's having an exacerbation. "I'm classified by the medical establishment as a 'severe persistent Type 1 brittle asthmatic,'" says the therapist.

Given those numbers, you wouldn't be surprised to hear that Gaudet retired from active employment in the profession a



**Stephen Gaudet, RRT, shown with co-workers at Kaiser Permanente Hospital in San Francisco (from left): Linda Ye, RRT; Victoria Martinez, RRT; Millicent Ishimaru, RRT; and Ed Wong, RRT-NPS, CPFT.**

couple of years ago. But you might be surprised to learn what he's doing now. "At present, I spend most of my time trying to stay healthy and out of the hospital," says the therapist. "I have developed my own self-directed pulmonary rehab program, which includes daily endurance and strength training — marathon walking and race-walking training as tolerated."

Not only does he engage in these activities at home, he enters competitive events as well. "To date I have completed seven half marathons and three full marathons. I don't have the lung capacity to run, so I walk these marathons," he says. "My best performance for the 26.2 mile marathon is 6 hours, 50 minutes. My goal is to break the 6 hour barrier, which I believe would make me one of the fastest distance walkers with severe lung disease in the world."

Gaudet says he trains for these races much as any other marathon participant would — only just a lot slower. For a standard marathon, that means about five months worth of daily training. He says his biggest problem is dynamic hyperinflation. Most of his dyspnea is caused by excessive air trapping, and prolonged exercise or increasing intensity of exercise makes the condition worse. One severe exacerbation can wipe out weeks of progress too, and competing in the event itself can lead to problems.

But still, he persists, and the reason lies in the challenge he receives from the training and the competition. "I guess there's a sense of accomplishment that I can do what healthy people can do. Maybe I also do it to prove a point — that anything is possible if you have the will," says the therapist.

He believes other chronic lung patients can do the same. "I would say to other asthmatics or chronic lungers — check with your doctors first, but definitely get out there and exercise. Do whatever it takes to stay in shape. Don't let your disease ruin your life." ■

