

“Doc, I’ve Got That Flesh-Eating Virus! I’m Sure of It!”

A world-class hypochondriac checks into the Mayo Clinic for the mother of all physical examinations. Will his fingers fall off before he can write about it? BY ROBERT MORITZ

ILLUSTRATIONS BY BRIAN CRONIN

ON APPROXIMATELY THE HUNDREDTH DAY OF MY TWENTY-SEVENTH year, standing in my bathroom with dental floss in one hand and too much time on the other, I made the mistake of taking a good, hard look down my throat. I didn't like what I saw. Just beyond the terminus of my tongue was a collection of these nasty...bumps. Pustules, we'll call them. Weird outgrowths so grotesquely large to my eye that, the minute I noticed them, I lost all control of my ability to swallow. One moment I was engaging in my regularly scheduled prebedtime grooming program, the next I was staring at the first seismic signal that the big man—the Grim Reaper, Mr. Death, That Guy Who Just Will Not Take No for an Answer—was on his way.

Now, as anyone who's ever hailed a cab on the barren outskirts of New York's Lower East Side at 1:30 in the morning while holding a bag of frozen peas against his neck (hey, it *seemed* like a good idea at the time) and carrying hand-scrawled instructions to "Please take me to Beth Israel Medical Center *as quickly as possible*. Big tip!" (I seemed to have lost the power of speech as well) can attest, life has a habit of getting weird fast when you're living la vida Martin Scorsese. Out of the taxi and into the ER rabbit hole I fell: a swirling vortex of knife wounds and severed appendages, cracked skulls and burned flesh, with the Jolly Green Giant and me sitting panic-stricken at its center. To lend a bit of

urgency to my situation, on the ER admissions form I listed "opera singer, radio personality" as my occupation.

As it turns out, the back of the human throat *always* looks a little lumpy. Who knew? Like I said, I'd never really taken a good look at the goods back there before. Unfortunately, it took an attending ER physician on her thirty-sixth hour of duty to teach me that particular anatomy lesson, and, let me tell you, she looked more than a little pissed to be doing so.

This story would be kind of amusing if it were an anomaly. The truth is, in the Michelin Guide to the Human Condition, I am a three-star hypochondriac. I have been one for the last decade, ever since a bout of Epstein-Barr virus left me incapacitated on a couch for the duration of

the summer between my junior and senior years in college. Never before had I felt the blow of a long-term illness, and from that point on my neurotic fear of contracting another one has grown obsessive. Over the years, I've suffered through presumed bouts with a brain tumor, asthma, carpal tunnel syndrome, a heart murmur, bursitis, angina and the flesh-eating virus (twice). I don't get colds; I get the earliest stage of pneumonia. Bugbites? You mean encephalitis, Lyme disease or malaria. Freckle, scab or piece of dirt? Melanoma, melanoma, melanoma. I'm the health equivalent of a single guy who can't go out on a blind date without projecting a future of marriage, affairs and double homicide. To date, though (knock on wood), my actual illnesses have been limited to seasonal allergies and an on-again, off-again achiness in one of my balls caused by a bacterial infection called chronic epididymitis, which (according to the, count 'em, *four* urologists I've consulted on the matter) is harmless (in *most* cases) and—attention, ladies!—absolutely noncommunicable.

Recently, though, I began to question the efficacy of my defensive hypochondriacal stance and sought an offensive strategy for tabulating exactly how close I am to the onslaught of disease and death. Enter the Executive Health Program at the Mayo Clinic in Rochester, Minnesota. Every year, 2,500 overcompensated executives from around the world make an appointment a year in advance and pay up to \$3,000 to spend three days being poked, prodded and siphoned of bodily fluids by crack specialists at the world's most famous medical facility. If there's something wrong with you, the folks at Mayo will be the first to find it, treat it and send your insurance company the bill. It's a simple concept, really. And since I obsessively fear the unknown—the undetected and previously unimaginable germs, viruses and hereditary hot spots lurking in my body—why not open myself up to my worst nightmare? A *Quincy*-worthy examination to determine once and for all what I'm up against. After that there will be nothing left to fear but the fear of an HMO-prescribed maximum yearly spending limit itself.

DAY 1

Question: What's an executive health program without an executive-health-program waiting room? Whipped cappuccino, OJ, fax machine. I *like* it! For the next three days, this well-appointed holding area on the twelfth floor of the Mayo Building will be my home away from the Marriott. Currently, it is occupied by an assortment of what I assume are CEOs, CFOs, CTOs and other fat, white, male bastards dining out on my corporate-shareholder losses. On the Street, I'm an insignificant bug beneath their Ferragamos. But here, thanks to the fact that my body is at least two decades less flabby, I'm the Mack daddy. They secretly despise me, I know, and subtly plot to humble this young buck in the prime of his life by bogarting all the copies of the *USA Today* Money section. See you on the treadmill, suckers!

The day begins on a chipper note as I'm greeted by Melissa, one of the program's clinical assistants. "Heh-low!" she

warbles in the pleased-to-meet-ya midwestern lilt that's endemic to just about everyone around me. During my stay, Melissa will be my clinic concierge par excellence, and from the look of the bulging patient appointment folder she's handing me, I'm going to need her help. Every Mayo patient receives one of these envelopes filled with appointment cards for the assorted examinations prescribed by his doctor. Mine currently has more than a dozen cards. Surely this is a sign that the Mayo doctors suspect there's something rotten in Denmark (or at least in my lower colon). Perhaps I should not have been so forthright in the pre-admission questionnaire sent to me a week prior to my arrival. It was a piece of work unto itself, with 124 questions regarding everything from my family medical history to alcohol and recreational drug use. Regarding details on the latter, I opted for a George W. Bush-inspired "not in the last seven years" response and left it at that. The rest of my answers were straightforward and revealed the sad fact that I've led a pretty run-of-the-mill, white-bread existence for thirty-three years. In short, nobody at the Mayo would mistake my questionnaire for Iggy Pop's.

Carrying two brown bags containing urine-specimen cups for use when nature calls, I hustle over to the phlebotomy desk at the adjoining Hilton Building for my first stop of the day—giving blood. The whole process at Mayo is like a scavenger hunt, or the old-school Disneyland experience, with a packet of D and E tickets. But instead of having you search the city for a box of knitting needles and a Gideon Bible, Mickey and Goofy want to jab you with sharp objects and hoard your waste matter.

So I've taken the first step toward the truth. Samples of my blood and early-morning urine, harbingers of all the secrets that might or might not spell my doom, have been sucked from my corpus and deposited into the machine that is the Mayo Matrix. I have chosen to rip the blinders off my healthy "reality"—to tune in, turn on and drop trouser for any quack with a needle or fluid-collection

Like an aimless undergraduate stumbling I feel I've found my way to the mother

cup—and see, for the first time, what type of man I am. At this point, there is no turning back, and suddenly...suddenly I am totally freaking out. Maybe a person like me—a guy who thinks the words "paper cut"—isn't meant to know all the cards he's carrying. Maybe instead of gaining knowledge that will allow me to worry less, I'm simply opening a Pandora's box of things I can do nothing about. My God, what have I done?

I briefly consider leaving, bailing on my appointments and luggage and jetting out of here. But like I've said, it's already too late. My fluids are now theirs and will be tested and examined, the results spun forth from a computer printer and jettisoned via pneumatic tube into the hands of

my "consultant" (Mayo-speak for "attending physician"), Dr. Donald Hensrud, director of the Executive Health Program. I'm with Hensrud now for our first executive-health exam and consultation. Early forties, easygoing, well tailored, University of Hawaii medical-school diploma on the wall. Nothing too intimidating here. Still, when he looks at me and, more important, my preadmission questionnaire, what is he thinking? *Embodiment of all that is healthy in our species or Biohazard—stat!?*

Hensrud asks a few probing questions: "So, I see you smoke. How often?"

"One cigarette per day, when I go to the bathroom," I admit.

Quizzical look on the doctor's face.

"Stool-loosening ritual that I rather enjoy, though I have been thinking of giving it up."

"I'll schedule you an appointment with one of our nicotine-dependence counselors. I also see that you've been having some sleeping problems."

"Yes, over the past decade or so, I've acquired a bad habit of passing out in movies and during dinner with friends."

"Do you exercise?"

"Yes." Fingers crossed.

"I'll have you meet with someone in our sleep-disorders clinic. I'm also going to call in one of our urologists to check out the testicle issue and see if we can figure out exactly what's going on."

"And I was bitten by a tick!"

Quick phone call to a colleague.

"I've ordered a Lyme-disease screening."

This is amazing. All my adult life, I have been surrounded by friends, girlfriends and random strangers on barstools who turn a deaf ear—and the occasional butter



into a campus Hare Krishna compound, ship, where I'll finally be understood.

knife to wrist—when I try to relay my latest health concern. The first time I got heartburn and mistook it for a massive coronary, my girlfriend in effect told me to "give it a rest" and left the house. Granted, when you cry wolf, or "What if I've got costochondritis?" too often, people's capacity for concern tends to burn out. But here, at the greatest care facility known to man, no complaint is considered unfounded. Like an aimless undergraduate stumbling into a campus Hare Krishna compound, I feel I've found my way back to the mother ship, where I'll finally be understood. I am free! Free to be me! Off to X-ray!

Actually, it's off for an uneventful electrocardiogram first and then a brief chest nuke, notable only for the dorky white paper smock the nurses make me wear. Next, my forced vital

capacity (FVC) breathing test goes smoothly. But before I sit down to huff and puff into the PC-connected valve, my height is measured. This is the second time I've done this today—the first was before my exec consultation with Dr. Hensrud—and once again I'm getting nailed as a shorty. It's a well-documented fact that I have stood a statuesque five feet ten inches for the last fifteen years of my life, but suddenly the Mayo charts claim that I'm a measly five-nine. What gives? Perhaps I should query Dr. Hensrud about known occurrences of rare congenital shrinking disorders.

Lunch break, and unfortunately I'm still brown-bagging it. For all its perks, the VIP center does not provide lunch. (Mental note to Dr. Hensrud: In the spirit of the acronym, might not your VIP executive lounge want to provide, say, catered lunches or, at the very least, healthy gourmet brown bags for the on-the-hustle hypochondriac? Just a thought.) So I make a run to South of the Border for two Gorditas and a chalupa. I also have a big beverage. It seems like a good idea. Despite repeated visits to several water fountains on the premises, I have been unable to let go with the flow needed to fill my second urine-sample cup.

Returning from lunch, I stop by the sleep lab and pick up my oximetry monitor. This little device, enshrined in a shock-resistant flight case, will track my heartbeat and oxygen levels via a clamp on the forefinger as I snooze tonight. This information will be studied by the specialist at the sleep-disorders clinic tomorrow in an attempt to explain why I have been known to occasionally doze off in mid-

sentence at cocktail parties and once started sawing logs at a tony New York restaurant with my head cushioned by an \$8 square of tiramisu.

Before my urology specialist arrives to talk testes, Dr. Hensrud and I sit down for a follow-up consultation. I am sweating. Hensrud plays it cool. Of course he does. I am the one whose fate is sealed in the folder on his desk. He is the one who gets to play God. It takes about ten minutes for him to run down the list of test results, and by the end it appears that the only treatment I'll require is sutures for the bloody knuckles on my right hand, which I've been incessantly knocking on a wooden magazine holder next to the couch. No pedal edema. No ankylosing spondylitis. No supraclavicular adenopathy. Nothing. It's like I've just finished midterms, and the happy-happy, joy-joy feeling is enough to momentarily turn my thoughts from the prostate exam on the afternoon menu.

When the urologist arrives, I casually detail the yearlong saga of my aching ball; he then takes the two-fingered plunge. After all the exams I've undergone over the years to track down the source of my discomfort, including that first prostate poke when I was convinced testicular cancer had my number, I'm a bit of an old hat at taking it like a man. That said, I've had my fill of the medical community's prying hands. When he announces that the situation is probably as harmless as the previous uro guys have assessed but that he would like to schedule an ultrasound and prostate massage just to be safe, well, I can safely say that this executive camper is no longer as happy as he was fifteen minutes ago.

DAY 2

After a troubled night's sleep, I've dropped off my oximetry monitor and now have to face the early-morning Mayo elevator gridlock. An eager couple nudge past a stack-up of wheelchair-bound patients, prompting the geezer to my left to remark, "Everybody's in a rush, except for a hanging."

"Or a prostate massage," I remind him.

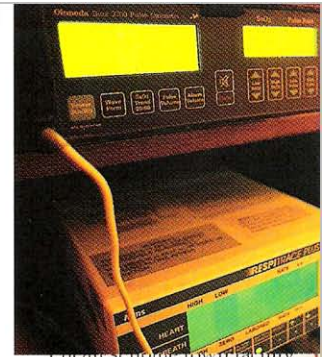
At my eye exam, I check out with a slight decrease—go figure—in my prescription. Naturally, the notification that I can now clearly read a stop sign from twenty paces instead

seminar: (1) A "chipper" is a social smoker. (2) Should I give up my daily cigarette, I might feel a sense of grief, as if I'd lost my best friend. And (3) to satisfy any oral cravings, I could try sucking on a pretzel stick. Except I don't like to eat while I'm taking a crap. Speaking of which, it's prostate-massage time, and I've managed to preserve the contents of my bladder. Unfortunately, I've also held on to the goods in my large intestine. Only God can help me now.

Slap go the rubber gloves as the Guy With the Worst Job in the World lubes up. "I'm just going to 'rough up' the prostate to get some fluid from your urine. So, the Mets are doing well...."

One Mississippi, two Mississippi, three Mississi... Whoopsie daisy!

Next: sleep-disorders clinic. It's difficult to explain the intricacies of my life as a minor league narcoleptic to anyone who hasn't seen me pass out mid-beer sip or nod off against the speaker at a G'n'R concert, but Dr. John Shepard listens intently as I describe my symptoms. My oximetry results are in, and everything indicates I'm a sound sleeper. Displaying the patience of a saint (Saint Jude, most likely), he listens to my ramblings



nearest home town facility. 24 hours before having this blood sample(s) as indicated b

At your earliest convenience

Each

PLASMA

only the labeled vials and t provided. This will insure propo ults to the Mayo Clinic physic

TO THE COLLECTOR:

ed in green-capped vials. Be d of the unhemolyzed plasma t Plasma"). Make sure the white e-capped (plastic) vial in styrofo side the box provided. Monitor



WHAT'S UP, DOC? Most people's anxiety levels rise when they walk into a hospital. But for a privileged few—and certain hypochondriacs—the Mayo Clinic's machines and monitors, questionnaires and tests, and endless poking and prodding leave them floating on cloud nine. They know that whatever the hour, whatever the disorder, the consultants at the clinic are ever ready to diagnose.

of eighteen doesn't make me happy. I now have to consider the possibility that inexplicably regenerated eyesight is symptomatically connected to my as yet undiagnosed congenital shrinking disorder.

It's time for my nicotine-dependence appointment, and once again my body-fluid-management skills are put to the test. I've got to pee like a racehorse, but immediately following that it's prostate-massage time, which requires a full bladder to facilitate the collection of prostatic fluid. Legs crossed, I do my best to pay attention.

Interesting things I learn at my nicotine-dependence

about movies missed and weddings slumbered through and seems genuinely sympathetic about my dilemma. The only problem is, there doesn't seem to be anything physiologically wrong with me.

Next on the agenda: cardiac evaluation—including the dreaded treadmill test. It's a quick fifteen-minute jog, and I feel like collapsing, but it's nothing a little bottled oxygen and defibrillator paddles won't remedy. My cardiologist, Dr. Randall Thomas, says everything looks okaydokey. Cholesterol, triglycerides, HDL, LDL and heart rate are all on the mark—data that I intend to mercilessly relate to each and



every arteriosclerotic CEO back at the executive lounge. But, he warns me, the 30-through-40 years are make-it-or-break-it time. Eat well, exercise—that sort of thing. Not once does he question why a 33-year-old guy of normal weight and apparently fluctuating height, with a positive, shockingly well documented health history, would feel the need to jump on a treadmill and go through this, and I am grateful to him for that.

The thing is, if I am, in fact, a man neurotically out of step with his bungee-jumping, Everest-climbing, death-defying Gore-Tex 'n' fleece generation, the fears that mark the difference between me and, say, Jonny Moseley don't mean a whole lot in Rochester, Minnesota. In this Xanadu filled with every possible type of expert and medical machinery needed to diagnose and treat whatever might suffer in a human body, I have no reason to fear anything. If I wake up tomorrow and my ear aches or I suddenly remember that I get this soreness around my back and shoulders when I don't eat enough veggies, well, I won't have to wait more than fifteen minutes before I can find a qualified

person to complain to. How much better does it get than this?

Oops! It's 5:15 P.M. and last call for fluid collection at desk C1, all the way on the other side of the complex. Unexpected wheelchair congestion in the pedestrian subway. "Move it or lose it, people. *I've got urine here!*"

DAY 3

Rise and shine! A 9 A.M. ultrasound of the testicles awaits me. For those not familiar with the process, a metal-and-plastic wand coated with jelly and pumping out sound waves is rolled up and down your boys. An image of the contents within then appears on a monitor, revealing any irregularities, such as a tumor, torsion or the Virgin Mary.

As I strip down, the technician informs me there is going to be a female in the room observing his technique. "Are you comfortable with that?" he asks.

The honest answer, of course, is "Sure, if she's Angelina Jolie." I know that's not a realistic possibility (and neither are the sorts of spontaneous free-for-alls I've witnessed in

Return of the Cheerleader Nurses and *The World's Luckiest Patient*), so in the spirit of medical research I assent. Besides, there are some practical benefits to a female presence during this type of procedure. For example, when you've got a guy rubbing your balls, the last thing you want is to pop a chubby. But, hey, accidents happen. Having a lady in the house pretty much covers your tail should you experience any unexpected blood flow.

At approximately 12 P.M. Central Standard Time, my excellent Mayo adventure begins to wind to a close. I'm back on the twelfth floor for a follow-up urology appointment. There I will be told the results of my ultrasound and prostate-fluid check. After that it's one last powwow with Dr. Hensrud, and then I'm back on a plane to the land of disease and stress-related illness—New York City. If there is a do-or-die moment on this expedition, this is it. Are my achy balls simply that—balls that ache because of a fairly

Rise and shine! A 9 A.M. ultrasound of the testicles awaits me. As I strip down, the technician informs me that there is going to be a female in the room observing his technique. "Are you comfortable with that?" he asks.

harmless infection—or is something more insidious at work? For the first time in my life, my mind does not travel down the road of disaster and a chemotherapy river. The sheer repetition of scheduled exam after scheduled exam, each offering me a clean bill of health, has left me sort of...optimistic? It's a weird "I'm OK, my balls are OK" Zen configuration, and sure enough, my urologist concurs: minor inflammation. Prognosis: I will not be receiving an inguinal orchiectomy for Hanukkah this year. Take Advil for discomfort, antibiotics if the severity increases, live long and prosper. Dr. Hensrud adds another bit of good news: I've tested negative for Lyme disease.

It's been an interesting three days, and it's bittersweet leaving this *Cheers*-meets-*ER* fantasy—a place where every RN and cardiologist knows your name. Then again, the day I *am* faced with an exploding aorta, I'd feel a lot better knowing that my primary-care GP—the one I've built up a relationship with year in and year out during my annual checkups—resides in the same ZIP code that I do. That leaves me with exactly two options: Stick with Dr. G., my local physician, or find a job in Rochester 55905.

I thank Dr. Hensrud for everything, and we shake hands one final time. It's a good, hearty shake—the kind that says, "From one healthy man to another, farewell. Live long and prosper." And for a brief moment I feel perfectly fine. The world is my oyster, my body a fortress. So long, good doctor, so long! So does anybody around here know where I can find a bathroom with some antibacterial soap? ■

GQ writer-at-large Robert Moritz is OK. For now. We think.