



Who is God When Life Stinks?

So Much Blood!

My sister from south Florida had offered to stay with me one night at the apartment near the hospital. Bob was being weaned off the extreme sedatives, and he appeared to be coming out of the coma. His mind was still fuzzy, and his body was still hooked up to many life sustaining medications and machines.

On the day Janna arrived, we headed into Bob's room together, happy to know that his breathing tube had been removed the night before. How hopeful that sounded! - although the doctors warned that if he failed to breathe well on his own, the tube would need to be reinserted. UGH! This tube went down his throat into his stomach, and when pulled out, some bleeding is expected.

However, I knew that **Bob** and **bleeding** were dangerous partners. I've lived with this man for 32 years, and know very well that he doesn't fit into the NORM! Unfortunately, this still remained dangerously true for his blood balance.

When I met with Bob's specialists, it remained difficult to find agreement about his blood situation. Heart surgeons wanted to thin the blood, in effort to avoid creating more clots. Hematologists feared that if his blood was thinned beyond the norm it would cause excessive bleeding.

As Bob's wife, I had been at his side during each hospital visit, through different physicians, at our local hospital and here at this one, in the CICU and on the recovery floor. Each time, I had SEEN with my own eyes that when treated by the "normal" adjustments, Bob's blood reacted drastically.

Today, Bob was in an especially precarious position for bleeding, because he was being weaned off his intravenous blood thinner (*Heparin*) for pill form (*Coumadin*) and it would take several days to achieve a balance in his blood consistency.

Unfortunately, these knowledgeable professionals were really not interested in a wife's cautionary suggestions! They felt it best to simply treat Bob with the normal protocols. Arrrgh! Soon, we would all soon experience the consequences of "blood too-thin"!

Entering the room today, we noticed that Bob's nose seemed a little bloody. Bob was still very groggy, so Janna took one side of the bed and I sat on the other. We decided we could care for his bloody nose from both sides of the bed while holding a conversation... or so we thought. As we chatted softly together over Bob's still body, the blood began to rush down his face. We now reached for fistfuls of washcloths and kept wiping his nose and face.

Urgently, we called for some medical attention but it was slow to come. The specialists had to be called in, and we tried to stay calm as we waited for them to arrive. Still fresh in my memory were very recent events, while in our local hospital, at the start of this journey, when a huge hematoma (bleed) had occurred and Bob nearly bled to death. His life had been threatened then, and so many times since then. It was hard not to panic about this new threat from excessive bleeding.

While the specialists discussed Bob's case, Janna and I continued the gruesome task of constantly wiping blood. We observed with grave concern that each incision in Bob's body—IV's in arms, incision in chest, groin incision, catheter locations—all began to ooze thin, precious blood! Once the doctors ordered changes to the medications, it still would require hours for the body to adjust.

We stayed on both sides of Bob for hours, leaving only once to get lunch in the cafeteria (not that we had much appetite, but we needed the strength!). When returning, we could see blood stains running all the way down his cheeks and chin. The nurses had tried to care for him, but without constant attention, the blood just flowed too quickly, drenching his face. Bob was slightly aware of his condition, but was unable to move, speak or care for himself. It was heart-wrenching and life-threatening!

So much blood makes me think of how much I hate blood—even the mention of it. When I was in fifth grade, I wanted to grow up to be Florence Nightengale (she was a pioneering and compassionate nurse that I read about) - until I realized it might involve blood! Oh no, I gave up that dream. I would faint for sure!

What about all the mention of blood in the Bible—blood sacrifices, blood on door frames, even the precious blood of Jesus on the cross. I always tried to skim those details because of my squeamish stomach.

Not now! Blood was the life-supporting fluid in my husband’s body, and he was rapidly losing it. He was depending on me to be attentive to get the care he required! Several weeks earlier, Bob had bled **internally**, requiring transfusions. Now as he was bleeding **externally** so heavily that his body was becoming covered with this oozing red liquid.

My sister stepped out of the room, and I asked permission from the nurse to wipe down my husband’s body. From his head to his blood-covered private areas, I tenderly and gently removed wet, flowing, life-holding blood. Weeping over him, I watched the evidence of life escaping from every incision.

I finally realized the truth! **Blood brings life**, and without the precious blood of life, death occurs.

As blood transfusions were ordered for Bob, and medications urgently adjusted, my heart pumped with fresh appreciation for the power of the blood. I would never again skip those significant truths referring to “the life of the flesh is in the blood”. I would never disregard blood as a nasty nuisance. I knew that the blood sacrifice made for me by Christ would carry new significance of the life he gives.

Thank you, God, for this warm, red, life-giving fluid. Please restore its balance in my husband’s body. And never let ME forget the power of the blood.

For the life of the flesh is in the blood. Leviticus 17:11

From: Bob Bell IV (son)
Sent: Tuesday, July 17, 2007
Subject: Less Life Support

An update from Mom/Ruth follows:

Monday 7-16 Bob had the breathing tube removed! Yahoo!

Nurses cheered when they saw him, doctors came by the bed and gave big thumbs up, everyone was encouraged - especially Bob!

Bob is off the sedatives now, but still confused. His injured kidneys and liver cause the body to be confused and also take longer to filter out all the medications. He is still on dialysis but his kidneys are producing a little urine on their own. He has some infection in his blood that is being treated with antibiotic. The greatest unknown continues to be WHY Bob has such a clotting problem. This is complicated by a possible allergy to heparin (blood thinning medication). Please pray great WISDOM for the Hematology Team, as they said a case like Bob's comes along perhaps once every 20 years.

Answers to your prayers!:

Bob is BREATHING on his own!!! (doctors warn the breathing tube often needs to be re-inserted - Bob would NOT like that)

Both of our jobs have been WONDERFUL. My work is usually slow during the summer (school resumes August 20) and Bob's colleagues have offered a "sick day bank", available if his own leave time runs out.

Our church family gave a very generous LOVE Offering to help with medical expenses.

Nurses and doctors continue to be awed at God's work in Bob's life! The big, strong male nurse who did CPR several times on Bob that first night, told us through moist eyes last night that Bob is most certainly a miracle (and that Bob was the sickest man he has seen in his 10 years of working here at this trauma hospital).

THANKS for continuing to talk about us to a powerful God who loves to listen to His children. We are privileged and grateful.

Love,
Ruth Bell & Family

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