89. Olive

(1) Tell me about your background.

I was born in Claygate, which was then a very small village, and I was born 1930. January the 29th. I was one of five, the youngest but one, and so I've been very much brought up in a family life. In those days, many of the relatives lived locally, and Claygate was really very small then. We had a small village school. I think, at one time, they went on until they were fourteen and then left, but by the time I got to that stage, we then went on to a secondary school, and I later went to Kingston Day Commercial School. And I left Kingston Day Commercial School 1946. By that time, things were much more normal, but the earlier part of the war, we spent an awful lot of time in air raid shelters, and also, we had to go to the village hall and have a few lessons there, while the air raid shelters were being built. We had a bomb that dropped absolutely opposite our house, and two houses were demolished. Fortunately they weren't killed - the occupants - but the whole of the front of the house was demolished. And being that we lived in a cul-de-sac, we felt very privileged, because we were about the only children that could be there when all the police and all the ambulances and everybody came, and we found that quite fascinating. But I hated the war, because we had a flying bomb, which, on that occasion, we were in the air raid shelter at the end of our garden. And we all dreaded the cut out of the first... oh, I forget what it was called now... flying bomb, and then it just skimped the top of our house, and landed in the field at the bottom of the road. And then we also had a V2, and the noise of that was absolutely horrific, and you always waited for the second sound. But no, I hated the war. And it's something that worried me terribly when my son was born, because, during that time, they were building the Berlin Wall. And I thought "oh dear, I have a son, and I can see that he will be in the third World War", because my mother went through the First World War, along with my father, who was very badly damaged by the effects of being a boy soldier, and being gassed in that war.

Before we move on to your son's birth, we ought, of course, to cover your marriage. So, can you talk me through up until the time you met your husband?

Well, when I was young, most people married in their early teens... late teens, rather, or early twenties, and I was almost a rarity because I was twenty six before I got married. I used to be told that I would be left on the shelf! But I had no desire to get married at all; perhaps, being one of five, you had a lot of companionship at home. I was very happy. I was very happy living in a village, which I loved, and I still love village life. And I worked in London from the age of sixteen, first of all the head office of, it was then, the National Provincial, which later became NatWest, in the city. From there I went to Robert Bradford's, who was a Lloyd's underwriter, and later went to the Ecclesiastical, where my husband worked, and that's where I met him.

(2) Tell me about your husband's diagnosis with diabetes.

Well, we were married in August 1956, but it was the spring of 1957 when

my husband began losing weight. He was tired, always thirsty, and constantly passing urine. Walking home from the station, at the end of the day, it was quite an effort for him. People even started telling us that married life didn't suit him, so you can imagine the remarks that I got from that! But my own theory was that perhaps he was diabetic. You might ask, you know, why diabetic? Simply because a friend had recently become one, and I felt he had similar symptoms. But before saying "well, you better go to hospital" or "you better go the GP", I asked my sister what she thought, as she was a ward sister at Great Ormond Street. And she said "he might well be". So, that's how he got to going to the doctor, and he had the usual urine test, which proved positive. But the funny thing was that as soon as he was told that, the doctor offered him a cigarette, which they did in those days. He smoked, my husband smoked, and so he sat down with his cigarette, and he then told him, you know, that unfortunately he would have to go into hospital and that they would put him right. And I think it was only the next day he found himself in St Luke's Hospital in Guildford.

(3) Tell me about his time in hospital.

Well, he was in hospital for two weeks. Today, it just sounds horrendous, for the simple reason that if you're trying to treat diabetes, you've got to be moving around and be as natural as possible. Instead of which, they put him to bed, and there he stayed for a fortnight. I think he was allowed to go out to Guildford once. But he was on a very strict diet. The sister wondered whether he could have a second cup of tea, because of the extra milk that it would entail. Everything was weighed. I have a feeling that they had some sort of a routine - a ten something or other - that they used to go by, and you could have ten units of things, and then they would give you the insulin according to the number of units you were allowed to have. Something very similar to that.

Do you know what insulin he was put on?

He was on Semilente, and he had injections just once a day, in the morning. And he tells me that he was on Semilente for a few years after that.

What was he told about diabetes?

Very little, I think. I was told absolutely nothing, even when he left hospital. Despite the fact I had to look after him, nobody told me anything. I think, sometimes, if you were in hospital, you were to be seen but never to be heard.

Do you mean the visitors or the patients?

I think both, quite frankly, if I recall my own experience in hospital. But I was told nothing, and I don't think my husband was told an awful lot. And I know when I was, as I say, in hospital, I was told nothing.

(4) What instructions had he been given for injecting himself?

I think they taught him to inject in his thigh, and I understand that it was very painful, and, to this day, he never injects in his thigh. In actual fact, I do quite a few of his injections now, and I always inject in his bottom, which is very soft!

Were you involved in his diabetes - in injecting him or in anything else - at the beginning?

At hospital, never. I was working, and in those days we worked quite long hours, compared to people today - although, I must admit, they do work longer today, but they don't work on a Saturday, like we had to. And people had very little time off. We had a fortnight's holiday, and perhaps, when you first started work, you might only have a week for that first year. So, I had to work. And I would come down from London, in the evening, and probably go straight down to Guildford. And I would just see him there, and then come back on my own to our bungalow, which was unfurnished, in as much that we couldn't afford any furniture. We had a bungalow, but we didn't have much more. Some corrugated paper was our curtain for many years, I think!

So, what was life like for you both, when he first came out of hospital?

Frightening, I think is the word, because in hospital, he didn't have a hypo at all. But, of course, as soon as he came out, he started using energy, then he did. And my first recollection of him was the next morning, when he woke up, and he just looked like a madman. His eyes were popping out of his head; he was most strange. I had to go to work. I was just absolutely bewildered. And had I not known that he was a very gentle person, I would really and truly have been quite frightened by his appearance. I went to work. When I came home that evening, I just didn't know what to expect. As I turned the corner of the road - it was the road of bungalows - there was no light on in the house, so that frightened me in the beginning. I opened the door and found him lying on the bed. There was a light outside, and it just gave enough light to show him lying on the bed, because it was November, and he was just groaning. I was absolutely petrified. In those days, very few people had telephone. Because it was a new road of bungalows, nobody had a telephone. I was relieved to hear him groaning - at least I felt he wasn't dead - but he was just slumped on the bed. I went out of the house, I went into the main road to find who had got a telephone - I had to go by the wires that went into the people's houses - to phone up the doctor. The doctor came round - they did, in those days - and he informed me that I should give him a sandwich with some jam in it.

(5) Did he have many hypos, subsequently?

Yes, he did have quite a few, and, like a lot of things, you learn by experience. I woke up in the middle of the night, found that he was in convulsions, he was foaming at the mouth, and again, I was absolutely petrified. By this time, I think it must have been a bit later than just after he came out of hospital, because our next door neighbour had changed. And he had been a pharmacist, and because he was a pharmacist, he was allowed to have a phone. And we hadn't a phone, nobody else in the road had a phone, so I went in the middle of the night, round to him, knocked on the door and asked him if I could then use his phone. And again, the doctor came in the middle of the night, as they did in those days. And I can't remember quite what happened, but by the time I'd

got back, whereas I'd left him in convulsions on the bed, foaming, by the time I'd got back from next door, he was lying on the floor. And the doctor came, and I suppose, perhaps, possibly, gave him an injection - that I can't remember. But it was only the next morning, when I came to, and I thought "my goodness, it was just like a fit", because a boyfriend of mine had told me how his father had had a fit in the middle of the night. And his mother woke up to find her husband foaming at the mouth and in convulsions, and that's just how I found my husband. And, of course, he damaged... my husband damaged his back, because of the convulsions, and he was in agony for some days after that.

How did your husband cope at work?

Well, fortunately there was an elderly lady, in one of the departments, who had diabetes, so she helped an awful lot, although, she had been diabetic for rather a long time, and she was really on the old regime of you couldn't have anything sweet at all. And she would interpret everything she ate, all her carbos as sugar, and she would never have a sweet thing. So, she was a great help. But my husband tried to just be normal. But it was in about the 1960s when there was a disablement act, whereby, according to how many people worked in an office, you were asked to employ so many disabled people. And they then wanted him to register as a disabled person, which he was very much against, and which he resisted, because he felt that the disablement act was for people who were blind, spastic, or somebody who was really disabled in more ways than one.

(6) How much were you involved in your husband's diabetes, in the early years?

Well, I used to give him some injections - not all, because, in those days, he didn't have four injections a day, like he does at the moment, so it wasn't so onerous for him. But, of course, the real big problem, and always has been, is food, and to this very day, food is my problem, meal-times. And I would love it if my husband cooked, and just gave me a chance of forgetting about food. So, my only compensation now is to go away and have it cooked for me.

So, what were your meals like, in those early days?

Not so luxurious as they are now! We couldn't afford it. Our allocation for food was very limited, because we used to have luncheon vouchers at work, and so that was always really and truly our main meal. We worked in London, and Lyons Corner House was always somewhere to go, where you could get a reasonable meal. And, in time, one got to know, perhaps, one or two little restaurants that were around, that catered for people with luncheon vouchers, because several firms did give their staff luncheon vouchers, and then any top-up you paid out of your own money.

And what were your meals in evenings and at weekends?

Probably more of a supper, in the evening. But at the weekend, I have been a person that's always cooked meals, and we've always tried to eat lunchtime, our main meal, and more of a supper dish in the evening. But I've always eaten a

lot of fruit. An aunt of mine had a greengrocer's. I was brought up on fruit, I think, although, during the war, never had anything like a banana. When he first came out of hospital, we were taught to - or we were told, let's put it that way, from booklets which we had to acquire ourselves - to measure everything. But then, after a time, you get to know just how much one can eat and how much one can't eat, although I don't think my husband, to this day, recognises what carries carbohydrates and what doesn't.

So, it was up to you to recognise?

Certainly; yes. In my early days, I used to like cooking, but after fifty odd years, I regret to say that I've gone off cooking! But ready meals do help, with some vegetable supplements.

(7) Can you tell me a bit more about your meals?

We've always been extremely rigid with our meals. We are very disciplined. My husband is exceptionally disciplined, so it doesn't matter where we are, we always get up - now it's six o'clock in the morning, perhaps it was about half past six, when we worked; I can't remember that. But we would then have our lunch... our breakfast, sorry, and, of course, then go to work. Lunchtime was obviously twelve or one o'clock, depending whether you chose the twelve or the one o'clock slot, and then, of course, the evening meal as soon as we got home. And we have rigidly kept to that. But, of course, being diabetic, Gordon always had to have this interim between all meals, whereas I've tried to resist eating between meals.

What would he have between meals?

Well, I suppose it's changed, over the years. Possibly, at first, it might have been biscuits, a plain biscuit, or perhaps just a cup of coffee or something, and perhaps just a biscuit in the afternoon. But I can remember when he went 'on the road', as we say - because he travelled a lot in the latter years of his working life - he used to take cut up apples with him, which he would eat in the car travelling around, or even carrots. I used to cut up carrots, and he often used to say "I don't know what that person thought of me, in the car: they're eating a carrot"! Even after fifty years, he still doesn't appreciate that other people are not like him, or not like us, and have such a rigid timetable. And when we're sitting eating a meal, and he sees somebody going by out on a walk, "how can they get out?" he says. I said "because, invariably people don't wake up on a Sunday, or don't get up until about ten o'clock or eleven o'clock, and then they have a meal at four o'clock. Not like us: breakfast, midday meal and evening".

Did you ever manage to go out for meals?

We could never afford, in those days, to go out and pay for meals ourselves. But occasionally we would go over to the Shell place... no, sorry, I think it was BP - because his father worked at BP - and I can remember there sitting, on more than one occasion, ordering a meal, and Gordon would have done his injection, and then wondering when the meal was going to come along. And

from then on, I have always taken food around with me, because I've always been very disappointed, when I've gone out for a meal. I've never been able to relax, because you're never 100% sure when the meal's coming.

(8) How were your children affected by your husband's diabetes?

Well, of course, they were brought up in a very rigid household, as far as meals were concerned, so perhaps we are quite a disciplined family, as such, because of this. And I've often thought that it has made me, perhaps, more disciplined than I might be, because I'm really quite a casual person. And I'm sure I would have been much more casual, had I not had this strict routine. Obviously from... health-wise, I think it has been good, from the point of view we have always eaten healthily. We had an allotment when we had a bungalow. We've got a large garden now. We've always grown our own vegetables, we've always had lots of fruit from the garden, and so my children have been brought up in the healthy ways - 'five a day' - which people talk about now. But also, I think they have learned to be caring for other people, because my husband has had several hypos. And I can always remember my daughter, when she was quite young four, five, say - saying how she hated hearing her daddy groan in the middle of the night, and this used to be when he... prior to him going into convulsions, he would start groaning, and apparently that did worry her. My grandchildren, in particular, they are very much aware of the fact that their granddad is diabetic. And I suppose one of the good things about it is that they've never been afraid of injections; they've always loved it, now that they... he has to do a blood count, and then especially if he's low, and he says to them "don't tell Grandma, will you?" And you can guess what they do. The first thing they do is they come along and tell Grandma what he is. But also, they've also helped in many ways, because, perhaps he might be playing a game with them, and then suddenly he might go blank. And then they come rushing to me "Grandma, Granddad's being funny", and I've had to go and give him something to eat, or administer something. They are all very aware what it is like to be a diabetic.

(9) What are your memories of your husband's medical treatment?

Well, once he left Guildford, and he was working in London, he soon realised that no way could he travel to Guildford for attention. So, he then got transferred to King's, and he stayed at King's until he retired. And the thing with King's, which I used to have to tolerate every time he had an appointment, was how long he had to wait. He said "I know I shall be out by one o'clock, because they will want to go to lunch". But they make all the appointments at nine or ten in the morning. They seem to think that they are the only people that have got a job of work to do.

So, he might wait from nine until... how long?

Twelve, one o'clock. As I say, he said you knew that you would be out by lunchtime. He used to complain, because he is of the type that does complain. He's always looking for solutions, because, quite frankly, he's rather an impatient person. I sometimes call him an impatient sod!

And where was he treated after he retired?

He then transferred from King's down to Guildford. I think he might have carried on at King's for a very short time, but when the travelling in London became impossible, it was so horrendous that he said I'll have to go down to Guildford, although he'd been with King's for so long, he had a loyalty towards them.

And what was Guildford like?

Smaller, much smaller. He used to take himself to the ordinary clinic, but when it was the eye clinic, because they put drops in his eyes, I always had to do the driving. And that was always a long wait; always. So, invariably, we would make it that we would go out afterwards somewhere, and make it a day's outing. I would take lunch, and we would perhaps sort of go up to Guildford's cathedral, have our lunch up there, and visit the cathedral, and walk round the cathedral, and visit the Children's Chapel, as I have lost two children, and they have their names in the remembrance book, which they now have in the Children's Chapel.

(10) Has your husband ever been treated by a GP?

Not for diabetes. Our particular practice hasn't got a clinic for diabetes. And the fact that he was at King's and worked in London, then, and then on his retirement moved to Guildford, he only ever goes there for other matters, really. Although, of course, all... the hospitals always send all the letters to the GP, and keep him in touch with whatever's going on.

What impressions did you have of the doctors who treated him?

Well, he went to King's, and he, when he first went there, saw Dr Lawrence. And he was under him, and obviously, from time to time, saw Dr Lawrence in the same way as he now sees the professor down at Guildford. And he obviously had a lot of help. But if you've got a younger doctor, I think he often felt that he was imparting more information to them than they were giving back to him. And sometimes he did feel his journey there, and his wait, was really a bit of a waste of time. But occasionally you got a very good doctor, who would be perhaps more interested in diabetes, as such, and therefore took a real interest in you personally.

Did they recognise that he perhaps knew more than them?

I think it's like a lot of things: in theory they might know quite a lot, but in practice it doesn't always work out that way. Over the years - going back to: in the theory they know more, but in practice it doesn't work out - they constantly told him that a certain type of insulin - I'm not quite sure which one it was, now - only lasted four hours, and that there was no build up. Because my husband had these fits, I maintained that the body used... the insulin would build up, and then it would release itself in these fits, but they wouldn't have it. Since then, I've read reports that they discovered that this did happen. And when I did mention it to my doctor, once, he said to me "you might well be right". So,

I think it isn't always the case that the doctor knows best; in practice you have found out to the contrary.

(11) Have his hypos and fits continued all through your married life?

They changed once he went onto Humalog and Levemir. But even now, he might start to begin to jump, and I think "oh dear, you're not going into a fit, are you?" Because, although I have had him in fits many times, I must admit, I hate them, and I hate seeing him in them. And I just feel it's awful. But when he used to have his fits, in the middle of the night, it was really horrible, because I used to wake up - I suppose I only ever half slept - and just the switching of a light would sometimes be enough just to send him into convulsions. And it was the convulsions which I didn't like. I used to try and hold him in position, with his mouth on one side, and try and support his back, because I knew what it was like from the very first one he had, and how long it took for it to get better. So yes, he still has hypos, but I can recognise them quite early, just by the way in which he walks, he holds his hands, his look. Other people, perhaps, wouldn't notice it. And there have been many embarrassing times, when perhaps someone's called at the door, and it's meal-time, and I can see him just beginning to fade, because he might go quite quickly.

So, how does your husband cope when you're not there?

Well, he'll always try to tell me that he can cope, but I can assure you he cannot cope. And it would be lovely if I could go out for the day and forget that I'd got a husband. I regret to say, I have to put all his meals out for him. I have to leave them as such, and even when I come home, I dread to think what I might find.

(12) Has your husband had any complications related to diabetes?

Well, I think his eyes were affected quite early on, and they've always been concerned about his eyes, and naturally I have and he has. But fortunately... apparently, it is so near the centre of his eye that they've always felt that it would be more dangerous to use laser, than not, or even before laser was being used, to do anything. So, he is still very lucky and has got his sight in both eyes. And his feet: I've always looked after those, and I have even been told that his feet are in very good condition, and that I must have looked after them very well. We then went through a stage where somebody visited us and was doing research, because it came to light that a lot of people - a lot of diabetics suffered from heart attack, and it tended to be regarded as something inevitable. Then this researcher found out that it was better to treat a diabetic, if they had any heart problems, like a normal person, and try and prevent having heart attacks, et cetera. And I can remember her coming here and spending the whole morning here, and said that afterwards she had to go around and talk to the doctors about it. And you can imagine, she told us, how some doctors took that advice from her. Another thing that affected my husband was, later in life, when he seemed very drowsy one morning. And I thought "oh dear, he's having a hypo", because night-time has always been a nightmare, and I think, for most

diabetics, it's the same. And I got up and I gave him some damson juice, which I used to make myself, because I knew how much sugar was in it, and it was a more pleasant way than having glucose tablets, or anything like that. And I gave him some damson juice, and he still seemed very, very vague. And then I realised that he wasn't talking either. And after about an hour or so, I felt it was perhaps more than that, and perhaps he was having a stroke. And I fear that's what it was. Ischaemic attack; I think it's known as a TIA.

(13) Also, he couldn't speak, which was rather frightening. I called an ambulance, and they took him down to Guildford hospital, but it was only very temporary. And he had another one later on. But it was this stroke that really brought about his retirement, because he was then under a lot of stress, at work, and we realised that he could not go back to work again. I think I've always been aware that there are these complications with diabetes, mainly because I had - or still have - a cousin who was married to a diabetic, and unfortunately he died with two young children, and that was rather tragic. So, I've always been someone that has been fully aware that I could be left with two young children, and have always saved one penny in every pound, because we have been discriminated against, as diabetics. Nobody wants to insure you. If they did, everything is astronomically expensive, so I thought I would create my own insurance.

And now, after a pause, you've just been telling me about travelling difficulties. So, how do you manage when you're travelling?

Well, over the years, I've found, really and truly, I must always cater for myself, because I've had so many experiences of going into restaurants, waiting for meals, and that type of thing, and I do find going on holiday quite strenuous. I can remember coming back from America - the only time I've really done a long flight: never again, because of the time lag and the difference in food. That was all very disconcerting - and he had a hypo, one morning, on the way back. At airports, if the aeroplane's late taking off, I've had to, while in queues, feed him with stuff. Out in Venice, I can remember there, waiting, because we had to wait for something. On a very crowded bus, when all the school children got on, there was me trying to feed him with his food. There have been several occasions, and so now I don't ever rely on thinking we will get a meal somewhere, because we are quite strict with our diet. And perhaps that's why, now, he has got a gold medal for being diabetic fifty years.