



Terry – Chronic low back and leg pain

A mid-air collision in 1963 began almost 40 years of chronic pain for Terry, eventually leaving him completely bedridden for four years.

Had he not finally been referred to Dr John Ditton and his team, he may have ended it all. “They saved my life, they really did,” says a thankful Terry.

An RAAF pilot, Terry’s life was altered forever during a routine air combat exercise. “We had done six passes practicing trying to shoot each other down and it was my turn to take a crack at him. I looked over my shoulder at where he was supposed to be – I had done this a thousand times before – but he wasn’t there. Something made me look up above me and there was this wing coming at me, getting bigger and bigger, and I just went straight through.

“The impact forces, someone calculated, were in excess of 16G over 1.25 seconds.”

The crash left Terry with severe chronic pain in his back, hips and legs, as well as post-traumatic stress disorder (PTSD). While Terry was able to return to work, eventually leaving the air force to become a commercial pilot with Qantas, the constant pain took a toll on all areas of his life.

“I don’t think I was a great dad, because of the pain. My three kids had to see it and put up with it. Flying would take me away for ten days at a time, and then I would have five days off but would have to spend two days in bed getting over the trip.”

His relationship with his wife also became strained as his life became a long series of doctors’ visits and searches for solutions.

Terry tried “every kind of oral therapy” (taking up to 24 tablets a day to control the pain); TENS machines; and even spinal fusion. He became incredibly frustrated with the lack of relief and the medical system overall. “As soon as I mentioned PTSD I’d be sent off to a psychiatrist. I think the doctors thought that if they could get my head sorted out, they could sort out the pain. But it was all the other way around.”

Eventually, Terry was in so much constant pain that he became bedridden, often sleeping for 23 hours a day. He experienced accidental overdoses as a result of self-medication and considered suicide, but couldn’t go through with it.

Then Terry found a new GP.

There are many stories of lives being saved in emergency wards and operating theatres, but former fighter pilot Terry believes he would no longer be alive if it weren’t for the RPA Pain Clinic and his intrathecal pain pump.

The first thing his new GP did was refer Terry to Dr Ditton at the Pain Clinic. Dr Ditton began evaluation for pump therapy straight away. Four months later, Terry had his implant.

Pump therapy involves surgically placing a pump under the skin in the abdominal area, just above or below the belt line. A thin flexible tube called a catheter is connected to the pump and is tunnelled under the skin to the site where the medication is to be delivered.

The pump releases the medication at a set rate, and the medication flows through the catheter to the delivery site in the intrathecal space surrounding the spinal cord. Because this therapy delivers pain medication directly to the receptors in the spinal cord, smaller doses are required to gain relief.

Now, four years later, Terry couldn't be more grateful and wants to help people in a similar position by telling his story.

"They have given me my life back. I had just considered my life tumbling deeper and deeper into a black hole. I never thought I would get to this stage again.

"If only I had known about it ten years ago I wouldn't have had to go through such a terrible period."