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# SUN POST

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## Faster, farther

Track teams will be well-represented at Masters meet.

**SPORTS.  
PAGE 22**

# Born again

A battle with Hepatitis C wasn't the end of the road for Terry Saunry. His liver transplant was a chance to start living.

**NEWS. PAGE 4**



Glenn Moore/Sun Post

## Lathrop layoffs?

City Council members and union reps are still trying to avoid layoffs and furloughs.

## MUSD's good eats

Local schools get a thumbs-up from the federal government for serving up healthy food to their students.

## It's walking time

Put on your best shoes Saturday for Manteca's 24-hour American Cancer Society Relay For Life walkathon.

# A new lease on life

A tattoo inked long ago set Manteca's Terry Sauntry on a long, life-changing journey

By Bill Poindexter  
Sun Post

Terry Sauntry once was a man focused on, as he puts it, "the unimportant things in life — stature, position, who I hung out with." He had a big-time government job in high-speed circuit design and, with it, a nice house in Manteca, two- and four-wheel toys, a boat, money.

For years, he ignored the pain, the fatigue, the erosion of his mental faculties, the excess fluid, all for the sake of the job.

"You know how guys are, we just muscle through it," Sauntry says.

There finally came a day when Sauntry couldn't muscle through it anymore. So overweight he couldn't walk or sleep, he went to Doctors Hospital of Manteca. That visit began a long, hard tumble down the mountain, one that saw Sauntry plummet from a peak of 363 pounds, past his normal weight of 220, all the way to 147.

Sauntry learned his liver was failing, attacked by Hepatitis C that was conceived through an infected needle way back in 1978 in a tattoo parlor in Yokosuka, Japan. It lay dormant all those years before coming to life, torturing and nearly killing him.

Sauntry was so sick he was placed on the transplant list just days after visiting Stanford Hospital and Clinics in January 2006. He was on an operating table a mere seven months later.

Sauntry drifted into surgical unconsciousness and didn't fully awaken until nearly a day later. He awoke a changed man, not only because of his new liver but because of his heart and head,

which during his illness "had already been thoroughly cooked."

Once so caught up in the job that he ignored his suffering body's cries for help, Sauntry now treasures the time he spends with his family, and he makes frequent trips to Stanford to speak with and offer hope to pre- and post-op patients.

"Without the grace of many, many people — doctors, friends and my family — nothing would be as it is today," he says. "They didn't just save a man's life. They really saved my soul."

## Source of infection

Sauntry was a U.S. Navy man, and like many sailors, he just had to get a tattoo. It's on the left shoulder; a fighting eagle in a boxing stance with gloves up and a Dixie cup hat with the letters "USN" underneath.

Sauntry noted that artists today use ink in single cylinders. Not in 1978.

"Shared well, as they call it," he says.

Sauntry and his wife, Mindy, landed in Manteca 23 years ago with daughter, Danielle, now 25, and son, Jason, now 26. Another daughter, Julia, is 16.

Sauntry said he landed impressive jobs as a government contractor working on bridges, dams and fusion centers, and designing circuit boards for cameras that capture the reaction of firing neutrons, atoms and other elements.

"Very cranial," Sauntry says.

The jobs paid big money then, though now,

after what his brain went through, he has forgotten many formulas and semantics.

It was during that time that Sauntry began to feel sick, but he pressed on. He blamed it on getting old or another kidney stone. He blamed the humidity for feeling ill during a trip to Singapore. He considered his ails "little things" and "nuisances."

"You know how guys are," Sauntry says. "Little did I know ..."

## Disease comes, possessions go

Sauntry finally began missing work, so much so that he lost his job — and his benefits. But the disease stuck around and worsened.

Evonne David, an advanced licensed clinical social worker with the adult transplant program at Stanford, noted that most go to Stanford on an outpatient basis, but Sauntry was rushed there. "In Terry's case, yeah, he was pretty sick."

With Hep-C preventing his liver from processing fluids, David said, Sauntry began suffering from ascites, fluid overload in the abdomen. He suffered an edema, a collection of water in the legs and feet. He suffered from encephalopathy, high ammonia levels in the body, during which he experienced disorientation and mass illusions, and suffered inguinal hernia because of the fluid.

"I couldn't keep my pants or socks dry," Sauntry says.

With the ailments came treatment — multiple paracentesis and thoracentesis to extract fluid from his body, shots, blood screenings and transfusions.

"By all means, I should have been dead," Sauntry says. "I didn't know until it got so bad I couldn't work.

My focus was elsewhere, not on myself. I was trying to preserve our livelihood."

The Saunttrys either sold or lost everything.

"We were penniless," he says. "We lost our house, vehicles, every dime of our savings. We have yet to recover. We still have nothing. We couldn't even keep up with the terms of bankruptcy."

## The transplant

The Model for End-Stage Liver Disease is a scale that determines how sick and in need of a liver a patient is.

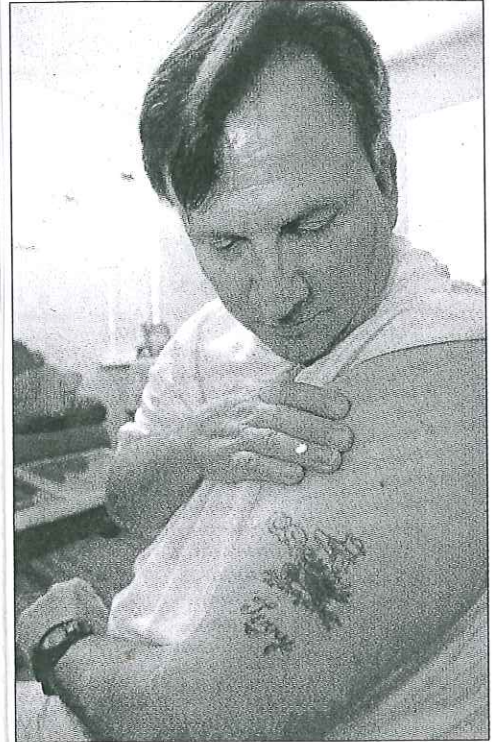
"For livers, you have to be the sickest person on the list," David says. "Blood type also has much to do with how readily available an organ is. There's a shortage, a supply-and-demand issue. But what happens is, people get sicker and more debilitated, so recovery is harder."

David says there are about 460 patients on Stanford's liver list. Nationally, close to 18,000 await a liver, but only 5,000 or 6,000 transplants are performed each year. Statistically, people who need livers are in their 50s. Sauntry is 48.

Sauntry says he was notified five times that he was next in line, but the surgery didn't actually take place until that fifth time.

"Every time I was told I was going to get a liver, it didn't happen," he says. "On the fifth time, I begged the priest to let me come home and die at home."

It was July 21, 2006. Sauntry wasn't home for an hour when the phone rang, again. It was Stanford. A liver was in the house, donated by a 22-year-old man who was killed in a motorcycle accident. A longtime friend taxied Sauntry back to Stanford, as he had so many times before.



Glenn Moore/Sun Post

**THE START OF IT ALL:** Terry Sauntry of Manteca shows the tattoo he received in Japan in 1978. Doctors traced Sauntry's near-fatal case of Hepatitis C to the ink job, which he got while in the U.S. Navy.

Sauntry was admitted and told by a nurse she was going to give him something and, "Out I went."

A double transplant was planned and then nixed — Sauntry remains on the list to replace an ailing kidney. He was told 80 percent of the liver went to him and the other 20 percent to an infant. He's also been told the

baby is doing well, but that's the extent of the information he's received.

He never considered himself a religious man before the operation, saying, "I drove by many churches. I was what they call a CEO: Christmas and Easter Only."

SAUNTRY, CONTINUED ON NEXT PAGE

**SAUNTRY** CONTINUED FROM PAGE 4

Then he woke up after the operation.

"The guys actually freaked out. I was screaming, 'Thank you, God, thank you, Jesus,'" he says. "They thought I was going crazy, but that's how fast it worked. Within 48 hours, the yellow was gone."

Recovery, though, has been difficult for Sauntry, who had an extended post-op stay at Stanford for rehabilitation. His new liver has done well, but he continued treatment for Hepatitis C, which David says stays in the blood post-op. He was put on Pegasys/Ribavirin to fight the Hepatitis virus, and he experienced cold sweats and vomiting. His red and white blood cell counts dropped to critical levels, so he has had more transfusions. He was put on a high dose of anti-rejection medication.

"Terry had a very difficult and long recovery," David says. "He was here for several weeks. Because he was so sick before the transplant, it wasn't safe to leave without acute in-patient rehab. He was de-conditioned. He needed rehab."

Sauntry is home again, but he still makes required trips to Stanford and Veterans Administration facilities in Palo Alto and Livermore every other week for biopsies.

**More emotion**

Sauntry cries a lot — over Mindy, his wife of 25 years come August, who has been by his side through the whole ordeal, overcoming her history of heart problems and adjusting her work schedule to drive him to and from appointments in the Bay Area.

Sauntry cries for the young man who donated

his liver and the parents who lost their son, and he cries for the eight roommates he had at Stanford who never received livers.

When Mindy went to Stanford, Julia stayed with friends on the weekends until Tuesday morning each week. Mindy then would return to Manteca, pick up Julia, take her to school, go home and get some sleep, run errands, then go to work. The car finally gave up on Mindy one night, so her mom bought the family a car.

"It was hectic — it was very hectic," Mindy says. "I look back now and I would never want to have to go through that again as far as having to watch what happened to (Terry). But when you're faced with it, you do it. ... You don't truly know what to expect until it happens, and it's hard to prepare for that, so you just take care of it when it happens, and you do the best you can and hope to God you do the right thing and it all works out. "And here he is."

**A speaker at Stanford**

Sauntry says he felt the change the moment he awoke from surgery. David and the staff at Stanford have seen it, too.

"It's powerful. And he can give back and have an impact," she says. "There's no substitute for someone who has walked the walk. He's been a huge voice for us."

Sauntry has visited patients who are on the organ waiting list and those who have already had a transplant. He visits with the caregivers. He gives out his phone num-

ber and keeps in touch with patients via e-mail.

"He has a bellowing voice and is very passionate when he talks," David says. "This whole transplant has had a profound and transformative impact on this man: 'I stand here before you today, and I'm getting well, and I'm getting my life back. I feel like a million bucks.'"

"The message he gets across is hope, and don't give up."

Says Sauntry: "For complete strangers to come up and give me hugs and start getting emotional and say, 'Thank you for helping,' that's almost more rewarding than anything else."

"I've never felt like this — I never did things for other people," says Sauntry, a self-described certain-part-of-the-back-side pre-op who shops for groceries with his mom and watches his grandson play baseball post-op. "I knew I was leaving. When you are confronted with your own demise, with your own death, it does an amazing switch in your head. Everybody says there's sort of an epiphany that moment just before."

"Fortunately for me, I have the virtue of being able to have lived through it. When that happened, it was real clear you don't take anything with you. There's one thing you take — your memories — so I am living my memories right now. That's why I live for every moment. I really like who I am now."

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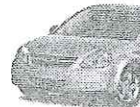


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