

Published: 10:00AM GMT 28 Jan 2010

Judith Woods records the physical and emotional trauma of breaking her back

Thrown from a horse while trekking in France with her family, Judith Woods broke her back and faced physical, emotional and financial agony. Her diary records the trauma that followed

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Judith Woods before the accident, with Tabitha, 10 months, and Lily, seven

August in south-west France, and we are visiting the idyllic lakeside campsite my sister runs with her husband. Her two girls, aged nine and 12, are horse-mad, so I book une balade à cheval – a pony trek – with the riding centre nearby, leaving my husband to look after our 10-month-old daughter, Tabitha. While the French girls are relatively experienced riders, my seven-year-old daughter, Lily, and I are able to do a rising trot but no more. My horse is bigger and more powerful than I would have expected, but the ride passes off sedately, until the teenage girl who

is taking us out starts to lose control of her mount, which is sidling and shying and refusing to obey her commands. As I am directly behind her, I pull up to a standstill.

Suddenly, out of nowhere, there's a thunder of hooves and the other three ponies bolt past on my left. Lily is screaming hysterically, and just as I try to register what's happening my horse rockets into a gallop from a standing start. From the corner of my eye I see both my daughter and my elder niece tumble off, and I throw my full weight back, until I am almost horizontal, hauling violently on the animal's mouth. But just as I feel I might be regaining control, I lose my battle to stay upright and slam into the ground.

The pain in my back is unspeakable; like nothing I have ever experienced – including a caesarean when the anaesthetic didn't work. A deep, visceral bellow of animal terror explodes from somewhere deep inside me. Instinctively, urgently, I know I am fighting for survival and I scream, 'Docteur! J'ai besoin d'un docteur – I need a doctor.'

The girl who led the ride is sobbing and can't get a signal on her mobile because we're in the middle of a wood. Lily is wailing, but I can tell from the pitch that her injuries aren't life-threatening; maybe she has broken an arm, but at some level I judge that her cries fall within the parameters of normal pain, and I am ashamed to say I focus back in on myself and yell at the girl, 'Où est le docteur?' again and again, bullying her, trying to stay alive.

The heavens open, and I am lying on the grass as the rain cascades down, soaking my T-shirt and leggings. I am precariously balanced on my right side, my right arm pinioned to the ground, the entire weight of my body resting on my left arm. My elbow is rigid to prevent me falling forward or backward, despite the pulses of agonising pain. My nieces have taken the horses back to the pony-trekking centre to get help. Some men come, I shout at them to leave me alone when they try to lay a coat over me. No one must touch me. No one must move me. They stand around smoking and chatting as I struggle through the white-out of pain and croak a reassurance to Lily – by now cradled in the teenage girl's arms – that of course mummy isn't going to die. I'm not sure I believe it myself.

After maybe an hour, a doctor comes wading through the long, wet grass, and two fire brigade crews follow. I am rolled, groaning and yelling, on to a bodyboard, and taken to the ambulance, where I am given morphine. My sister has arrived and travels in a second ambulance with Lily.

At the local hospital I am X-rayed. Thanks to the morphine and the adrenaline, I feel numb in every way and ask the doctor – more out of polite interest than anything else – if my condition is serious. I am genuinely, irrationally, surprised when he confirms that it is very serious indeed. My back is broken, and although I can wiggle my toes now, a piece of bone is in danger of piercing my spinal cord. My French isn't great, but even I can understand that if I move, I will be paralysed.

By now Tabitha is due a feed and my breasts are filling with milk. I force myself to think of other things or I may fall apart.

I am wheeled into the emergency room. Lily has suffered torn muscles and bruising, and is being discharged with medication, whereas I am placed in the hands of a sullen, potato-faced nurse who treats me with what feels like unnecessary roughness. In my raw-nerved state, I am convinced she is evil. I explain I need to go to the loo and she brings a bed pan and repeatedly makes to tilt my pelvis upwards – which could cripple me for life. I burst into tears and say, 'J'ai cassé mon dos – I have broken my back.' When I beg the doctor to help me, he instructs her to insert a catheter, which she does, with obstreperous slowness, causing me, I'm sure, as much discomfort as possible.

Arrangements are made to transfer me to a large regional teaching hospital, where I am X-rayed and scanned. My highly unstable fracture is confirmed and I am placed on a high-dependency ward. My husband stays by me as I drift in and out of an opiate-induced stupor. As he prepares for the long drive back to the campsite where we are staying, I hesitate, then ask him to call a friend who knows a healer in London. The healer had treated my friend's mother, who was suffering from cancer and, my friend said, he had brought her back from the brink of death. I expect my husband to be dismissive of the idea and I concede it's a long shot because I'm not a faith-healer type of person, but I urge him to call. Perhaps it's a way of clawing back control, or perhaps it's a reaction to the morphine. Either way, within the hour he has the healer's number. The healer starts work on my back, remotely, around midnight.

Day two

Snapshot images flash into my mind of paraplegia, of pale, atrophied limbs and being hauled into and out of a wheelchair, my children grieving for the childhood they won't have. I summon up the concentration to pray, without much success. My brain is too addled with medication and pain. I am wheeled along the corridor and taken down to the floor below to be X-rayed again.

My husband visits; the healer called him first thing to say he has realigned my vertebrae overnight. Oddly, despite my frantic insistence the day before, I greet this news with complete indifference. I barely have the energy to register what he says. My French brother-in-law arrives and translates for us when the doctor does his rounds. The orthopaedic surgeon, who looks like Woody Harrelson, isn't yet sure whether I should be prescribed on-going bed rest and a body cast, or have surgery. My husband asks about the splinter of bone seen yesterday. The surgeon says the new X-rays show a clean fracture of L2, one of my lumbar vertebrae. He can see no splinter; the bones, he suggests, must have realigned themselves overnight. My husband and I exchange a long, silent glance.

Day three

I feel so low and in such pain, I want to die. The surgeon has impressed on me that I must not move or I risk permanent debilitating damage. I couldn't move even if the mattress were alight, nevertheless, the staff – kindly but no-nonsense – are required to flip me on to my side three times a day to massage my back with oil. It is excruciatingly sore.

I lie flat on my back and drink revolting claggy green soup through a large syringe.

Day four

I am given a head-to-toe bedbath by one of the male auxiliaries. He is discomfitingly handsome, and talks animatedly about Chelsea's French players as he peels off my white surgical stockings and soaps my body.

My sheets and nightgown are changed, as they are each day of my stay, and the room is constantly mopped, wiped and dusted. My husband makes a four-hour round trip to visit, leaving Lily and the baby with my sister. He brings me books; I am devouring Philippa Gregory's 600-page historical blockbuster doorstops at a rate of one a day, arms held aloft above my prone body. My biceps ache but I cram the words into my head because it stops me thinking.

Tabitha, he tells me, is fine and drinking from a bottle, which causes a jolt of sadness in my belly. Lily is sore and sad and beset by night terrors, clinging to her daddy in bed. My husband's eyes are red-rimmed and well up with tears as he looks at me. Neither of us dares to voice our fears, but we both know what the other is thinking.

He has brought me a French-English dictionary, and I am able to converse with the staff and even make jokes. I discover the French for having a bad day is *J'ai le cafard* – literally, I have the cockroach. How apt. I feel just like Kafka's Gregor Samsa, helplessly trapped on my back.

Day five

The healer calls my husband to ask the name of the horse I was riding. The poor creature, the healer says, is feeling guilty, and needs work. Until the horse is absolved, he explains, my own healing can't continue. My husband isn't happy about paying £70 an hour for a horse's rehab, but feels it would be churlish to say so. My feeling is that having placed ourselves in his hands, we need to trust him or there's no point, so that is what we do. I am to have surgery, scheduled for tomorrow morning. After all the waiting, I feel excited that something is happening, and make a conscious effort to damp down the fear that oscillates around my body. What if something goes wrong?

Day six

My pre-op begins at dawn, when I am washed and readied for theatre. The anaesthetist puts me to sleep and four incisions are made in my back. Titanium screws are inserted, and titanium bolts to hold them in place and stabilise my spine, allowing the bone to heal. After surgery, I groggily come to in the recovery room and tentatively flex my knees, something I haven't been able to do since the accident. I realise I will walk again. The scale of what has happened hits me like a juggernaut and I weep with gratitude and relief and fear of the journey that lies ahead.

A nurse appears; her serene face comes towards mine. 'Ne pleurez pas, Madame,' she says softly. 'Don't cry, Madame. It will do you no good.'

Day one post-op

Even with the morphine, the pain from my surgical wounds is crippling. I feel wretched and very sorry for myself. I am on multiple drips, and am nil-by-mouth, which is a relief, as I haven't the strength to mainline even mulchy leek potage.

The attitude of the staff has changed; they are even more brutally hearty than before, to the point of theatricality. One of them cheerfully informs me that she will have me sitting up – maybe even getting out of bed – tomorrow. Won't that be great!

I am terrified she might mean it.

My husband comes and grips my hand – about the only part of me that isn't sore. He looks awful, and admits that the baby has been teething every night since the accident. By now my breasts are painfully engorged with milk, but I refuse medication to make it dry up. I don't know why. It would be an acknowledgement that something precious had been lost, perhaps. My husband offers to bring Tabitha in to see me, but I say no – I couldn't bear it when he took her away from me again.

Day two post-op

We have no travel insurance. No clause with our building and contents policy, no overlooked cover with my credit card. My husband has been making frantic phone calls to the British consulate about the E111, and discovers it has been superseded by some kind of card. I dimly remember getting such a thing years ago but have no idea where it is. We thought we had insurance, but we have let it lapse.

As far as we can tell the NHS will pick up 80 per cent of the bill under an EU reciprocal agreement for emergency costs – God knows how big the remaining 20 per cent will be given the volume of drugs I've been given and the level of nursing. When we return to Britain we will need full-time childcare and the doctors have signed me off work for three months – I don't tell them I'm freelance and will have to prop my laptop on the pillow, if only to pay for a nanny.

The doctors assure me I will make a full recovery. One of them jokes about rodeo riding and I smile sadly. But it is going to be a long journey, even before we address the financial and legal situation. I'm still woozy after the operation and it's easy to avoid thinking about the financial mess we are in.

Day three post-op

Two nurses come and, without any preamble, winch the top of the bed up so I am sitting up. It feels like torture, and I groan, but at least I can now eat my revolting soup with a spoon.

After the accident I gave my iPhone to my husband to make and field calls. Tabitha was due to be baptised at St Mary's Cathedral in Edinburgh at the weekend, so all the guests have to be informed. He is inundated with kind messages, love and concern, which he relays to me when he

visits and which make me cry. He brings Lily to visit. She is wearing glittery make-up and lip gloss from Claire's and I agree she looks gorgeous. My back is now so tender-yet-itchy that when the auxiliary comes with her bottle of moisturiser it's the highlight of my day and I beg her not to stop.

Day four post-op

My husband is driving home to London with the children today. We had planned to stay somewhere overnight on the way to the ferry, and make it an adventure. Instead he is undertaking the marathon slog to Calais without stopping, although I hope he remembers occasionally to feed the children and change the odd nappy. I feel glad they are going back home to normal life, although Lily won't be going to school for a few days until she's settled down after her injuries and the trauma of it all.

I have reassured everyone I won't feel lonely but I well up with emotion when my sister and her family come to see me, bringing chocolate and an illicit coffee from the cafe by the main entrance.

After they leave, two nurses come and get me to swing my legs off the bed and gently haul me up. The vertigo overwhelms me, my head swims and they quickly lay me down again. That's enough for today. Staying upright is a bigger hurdle to overcome than walking, I am told. I remain to be convinced. The pain is worse at night so I swallow morphine pills and have to call for assistance if I want to change position. I hate being so dependent, it's entirely against my nature.

Day five post-op

Today I am helped to sit in a chair, and as I pant and grimace and fight the dizziness, the nurses pretend not to notice and make bright remarks about their weekend plans over my yelps. But by now I have a lot of sympathy for them. Working on the orthopaedic ward requires brute strength and a stout emotional constitution; it can't be easy forcing weeping, damaged people in horrific pain to do what's best for them. I check the dictionary, but there isn't a French term for 'tough love'.

Later, I take my first proper steps, gingerly moving forward and into the bathroom, clutching a walking frame. It's not like the movies where the first faltering footfalls end in a running embrace.

I am grunting like a cavewoman, shuffling, and when I catch sight of myself in the mirror, I do a double-take; who's the old crone? There is talk of discharging me in a couple of days, but I don't feel nearly ready enough, although I miss my two girls so much that it's sometimes hard to breathe.

Day six post-op

My mobilisation is moving on apace. Shortly after breakfast – coffee and strange dried toasts that leave painful crumbs in the sheets – a physiotherapist arrives and announces we are going for a walk. I manage to stand up unaided by clasping hold of my knees and then sliding my grip up my thighs until I am upright. I reach for the walking frame, but apparently I no longer need it. I don't have the vocab to argue. I step very carefully into the corridor and find I am walking sideways like a crab, so I adopt a sedate zig-zag. Then I am presented with a flight of stairs, and am expected to climb them – and I do, somehow.

When my sister arrives later, she is told to take me for a stroll, so we haltingly progress down to the cafe. I cling to her in fear at the sight of people coming towards us; everyone is in such a hurry, I feel tearfully vulnerable. Tomorrow I am to go home. My husband wants to fly over and accompany me but I dissuade him, saying that after all the upheaval the children need him more than I do. This is true, but I am also worried about the cost of another air fare – without insurance, I have to pay for my own repatriation.

I am given another set of X-rays to take home with me, although I remain very agitated about the fact that I'm being discharged rather than transferred to a British hospital. The doctors say there's no need, and I can be seen as an out-patient. Why don't I want to go back to my own house? Two weeks in, and I'm evidently institutionalised.

Day seven post-op

My flight is at 3pm, but the ambulance is due to arrive at midday, so I am given an excessively fishy lunch at 11am. I wish I could thank all the staff who have looked after me; instead I tearfully grab the arm of the only one I can find and thrust a large box of coloured macaroons into his bemused hands. On reflection, I'm not even sure he was one of my nurses.

I am wheelchaired down to the ambulance, then placed on a trolley inside. At the airport we have to wait for almost two hours, but at least I get to stay lying down. I'm going home on a scheduled flight, in a standard seat, which is almost intolerably uncomfortable. I am met at the other end by my husband and a private ambulance he has hired at a cost of £210 to take me the 45 miles home because the NHS won't collect me, broken back or not. By now I am in a great deal of pain and need copious amounts of Entonox gas and air to make the bumpy roads bearable.

I arrive home at teatime and am half-carried to my front door. Neighbours come out to greet me, then see what a fright I look and quietly withdraw without speaking. Lily has filled the sitting-room with balloons, and my husband has bought flowers and chocolates and manhandled the bed from the spare room downstairs for me.

Tabitha makes 'mamama' noises and hits me in the face with excitement. I can't hold her; I'm too fragile and she's too squirmy and heavy. I've been warned not to carry her for three months, and have no idea – yet – just how much that will distress me and affect our bonding. She is whisked away to her cot and I lie in state on my bed, feeling strangely disconnected from my family.

In the days that follow, the district nurse fails to turn up, so my dressing goes unchanged and I have to inject myself in the stomach with my blood thinner. At my local hospital I see a back specialist who gives me a back brace which I must wear for two months, until the bone has healed. But by the time of my next appointment the specialist has been signed off on long-term sick leave and there is, it seems, no one to replace him. The orthopaedic consultant I see instead isn't sure how to read my X-rays, and suggests I return a fortnight later to see his colleague who 'knows a little bit about backs'. I ask if I have any other options and he shakes his head. Stressed and anxious, I am left feeling cast adrift by the NHS. Although I am entitled to a referral to a back specialist, no one seems to be prepared to take responsibility for me, so I spend weeks shuttling between my GP and the hospital, writing letters and becoming increasingly upset.

Meanwhile, the healer gets in touch and says he is keen to meet me. After having been so keen to use him, I suddenly feel hesitant, without knowing quite why. On some level I believe he has played a crucial role in my recovery, but am uncomfortable about admitting it. His final bill nudges four figures, but I pay it without a second thought.

Eventually I become so frustrated with the NHS that I decide to pay to go private and see a Harley Street spinal surgeon – Mr Colin Natali – who is sympathetic and professional, assures me the prognosis is excellent and offers to see me at his NHS clinic at the Royal London Hospital.

At home, my domestic life is unravelling. Tabitha bangs her head on my brace and cries whenever she's placed on my lap for a cuddle, so she prefers to be held by anyone other than me. Since the accident, Lily has acute insomnia and lies awake for hours every night. I play her soothing CDs, take her through relaxing visualisations and speak to a child psychologist, who advises me on strategies to overcome the trauma of the accident and the terror that she might lose me. It breaks my heart to hear her still pacing about her room as I arduously climb the stairs to bed.

Moving on

At Mr Natali's behest, I have a CT scan, and the results confirm his suspicion: two of the titanium screws are pressing against a nerve. He recommends that I have the metalwork removed. I burst into tears at the prospect. 'The pain is excruciating the second time around,' he admits. 'First time around, when your back is broken, you are in such agony already that you don't notice so much.'

We are still waiting to hear from a solicitor that specialises in accident claims to see if we can pursue a claim against the stables. Even if an action goes ahead it could drag on for a year. Medical bills are trickling in; the latest are €400 for Lily's emergency ambulance, €800 for mine – not cheap, but a small price to pay for the strong arms that strapped us into neck braces and bodyboards, and carried us through the rain-drenched fields to safety. I feel it would be immoral even to cavil at the cost.

Meanwhile, convention dictates that I must feel lucky; lucky I can walk, lucky I'm not in too much pain. I do feel that way – God knows I do! – just not when other people, who aren't locked into a back brace 16 hours a day, tell me so.