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## **So Many Everests**

From Cerebral Palsy to Casualty Consultant

Written by

Diana Webster and Victoria Webster

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# So many Everests

FROM CEREBRAL PALSY  
TO CASUALTY CONSULTANT

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DIANA AND VICTORIA WEBSTER



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## CHAPTER (

It was the rubber boots that puzzled me. Why was the doctor in the room wearing rubber boots?

As he came to my side, I asked: 'Why are you wearing boots?'

He looked surprised, then embarrassed and said: 'The blood...'

Blood? Wading through blood? Oh. I supposed foggily that there possibly was a lot of blood in childbirth, though I hadn't thought about it before.

Then another of the tidal waves hit me, rolling down my body like an unstoppable surge.

'Puss!' said the Finnish doctor. 'Puss!'

I pushed – or tried to.

'More hard! Puss! More hard!'

It couldn't be harder, I thought. Not possibly. Then the wave stopped as if it had met the shoreline. Almost immediately, another rolled in.

This time the doctor was not saying 'Puss' but telling me the opposite.

'Hold back! Hold back!'

But how could you hold back the sea? My body was no longer mine but in the grip of something much stronger,

over which I had no control at all but which simply took me over and did what it liked with me. I was as powerless as King Canute had been to stop the waves rolling in.

Finally they stopped of themselves and it was as if I had been thrown up floundering onto the shore, breathless, too tired to do anything but lie back exhausted. Had I had a baby?

‘It’s a little girl, Mrs Webster,’ said the doctor.

Everyone seemed to be very busy somewhere. Didn’t babies cry when they were born? They did in the films.

‘Where’s the baby?’ I asked

‘We must take the baby away.’

‘Why?’

‘There is lack of oxygen. It was difficult.’

And that was how my daughter, an otherwise perfect and healthy baby, was born with brain damage.

It was nobody’s fault.

It was Good Friday. The hospital was under-staffed. My regular gynaecologist was attending a conference. The baby was too early. None of this was supposed to happen. It was nobody’s fault; there was nobody really to blame. It would perhaps have been easier if we had been able to blame someone: perhaps the doctor who had been on duty that night and who failed to give me the Caesarean which these days I would certainly have had. But the hospital was short-staffed. Thirty-five was not so very old to have a first baby even in 1965, and I was healthy and fit. It’s perhaps understandable that the doctor did not think it entirely necessary.

Not that I understood anything at the time. I had of course read the books available for new mothers-to-be; I had gone to classes, practised the breathing. But it was all a bit like my early sex education, when I had read an extremely detailed book called a Medical Dictionary of Sex. As a result, I was more primed than most with knowledge of

sexual deviations and unusual positions and practices, but what had somehow escaped me was the basic information about the essential actions and sensations. The same was true now about childbirth. The fact was that I had really had no idea what to expect either in having sex for the first time or in having a baby. What's more, I couldn't ask now. I was in Finland, in a Finnish maternity hospital and my Finnish was very limited. The ability to ask where the station was or to buy a litre of milk in another language did not equip me for describing the type and severity of my contractions in labour or anything else I needed to explain or ask at that moment.

In the early hours of Good Friday, Mike had taken me in to the maternity hospital, where he had left me outside the labour ward. Husbands were not allowed to come further. I lay on a hard, narrow, rexene-covered hospital bed in a dark indentation in a corridor with a very thin cotton blanket over me. Occasionally another woman would be wheeled beside me. The women never spoke anything else but Finnish, so we exchanged little but groans. Then one by one the women would be wheeled away and I would go on lying there alone. At what seemed long intervals a nurse would come to ask me how I was doing – or so I supposed, because the only English-speaking nurse eventually went off duty. Had my waters broken? I didn't know, because I didn't know what to expect – the books had not gone into details – was it a tiny trickle or was it a flood? At any rate apparently my contractions were somehow never satisfactory enough, because I was never wheeled away.

The morning became the afternoon; the afternoon became night; the light in the corridor became dimmer; it was impossible to read or to do anything but lie and wait for the next searing contraction. At first I had rung

Mike from time to time to tell him that there was no news, but the only telephone was a long walk down the corridor. Eventually I became too tired to make the effort. I longed for him. I longed for a friend. I longed for anyone who could speak English. I have never felt so lonely, so desolate and so helpless. To be bereft of the ability to make yourself understood is to be no longer in control of your life, to be disempowered.

At last the moment came when I was wheeled away to another room. It was in darkness, with light only showing from a small strip of window at the top of the door. I traced the glint of metal, the outline of lighting equipment over and above a slab a few feet away from mine. The Delivery Room? Now, I thought, now I will have the baby. But nothing at all happened, only the recurring contractions. Presumably they were still not satisfactory. To me, however, they were intolerable. Was this what labour was like? Was it always so terrible? The books had made it sound fairly easy, and I had no comparison to make.

‘How are you, Mrs Webster?’

It was the Finnish doctor on night duty, someone I had not met before.

‘Not good. Can I have something for the pain? I don’t think I can stand it.’

‘It is normal, Mrs Webster.’

‘It can’t be. Please.’

‘No. I am sorry.’

‘Why not? Why not?’

‘It can be not good. Not good for the baby. You must be strong.’

‘Please!’

‘No. Sorry.’

He went, leaving me alone in the dark. I looked at the

dim outline of the windows. Could I open them? Throw myself out and end this? But I felt too weak even to get up.

The next time the doctor came in I was screaming. This time he gave me an injection and things became more manageable again and a little vague.

Then bright, blinding lights. I was in yet another room, lying on yet another green-rexened slab. That was when I saw the doctor's rubber boots.

So the baby was at last delivered, and taken away immediately before I even saw it. Not for me those touching scenes in the films where the midwife delivers the naked baby wrapped in a towel into its smiling mother's arms and she looks down with relief, pride and joy. I still lay on the slab, waiting.

After a time the doctor trudged over to me, still in his rubber boots.

'What is the baby's name?' he asked.

'What...? We haven't got a name yet.'

'We must have a name.'

'Why?'

The doctor hesitated. 'The baby must be...' He didn't know the word, 'A priest must give a name.'

'You mean baptize her?'

'Yes. Baptize.'

But that meant... Surely that must mean...

We had thought we had plenty of time for names: a situation like this had never crossed our minds. We had giggled over the choice, thinking up names that were not really for people but sounded as if they could be: Semolina, Forsythia, Rubella. I remembered now that Mike had also joked about calling the baby something beginning with V – then she would be able to have a car with her initials on the front: VW.

What girl's name began with V? Violet – no, no! Victoria? I'd had a great-aunt called Victoria. It was a pretty name,



optimistic too: V for Victory, we'd said as children in the war. What would Mike think of the name? I didn't want to decide our baby's name without him.

'Victoria,' I said.

The doctor went away and I continued to lie on the slab. Some time later the midwife came in with a white bundle.

'Your daughter, Mrs Webster.'

My daughter. She was in swaddling clothes. I had only ever seen swaddling clothes or heard the expression in medieval pictures of the Christ child but I recognized them at once. Tightly wrapped, almost like a tiny shroud, with only her pale face visible in its wrappings and a wisp of black hair. The midwife did not give her to me to hold. I reached up a slow finger, drew it very gently down the little length of her face. Her skin was like warm silk. Victoria.

'Hello, little one,' I said.

Then she was taken away.

## CHAPTER 2

I dozed fitfully in my bed in the maternity ward until the morning began to grey. They had put me in a separate room, so again I was alone. Sometimes I was wakened by the distant cry of a baby. Not mine, though.

Finally the events of the night began to return and I woke up for good. I felt strangely detached, as if I had never had a baby, but my fingertips still remembered a warm, silky skin. They had taken it away to give it more oxygen, they had said. Surely oxygen was something essential? What did a lack of oxygen mean? Would it damage the baby and, if so, how? Where was Mike? I wanted Mike.

‘When can I see my husband?’

The nurse spoke some English. ‘In visiting hours, Mrs Webster.’

‘When’s that?’

‘Between one and two o’clock.’

‘But that’s another six hours away! Can’t I see him before that?’

‘I am sorry, no, Mrs Webster. They are the rules.’

‘Can I telephone him then?’

‘Yes, of course. I will bring a telephone to your room.’

The phone didn’t come. Gingerly, I got up – the birth had torn me and I had had to have several stitches, so sitting down had to be done carefully, balancing on the side of one buttock. I went out into a white corridor and walked along to find a nurse or a phone. As I did, I passed a long glass window in the left-hand wall. I looked through. Babies. Rows of baby faces peeking out of swaddling bands in their cots like tiny Egyptian mummies. Some I could see were crying, crumpling up the folds of their faces and opening and shutting their mouths, some squidging a grimace, some giving a delicate little yawn, others sleeping tranquilly. Some had tufts of black hair showing, some had a faint yellow down, some were totally bald. None of them was my baby. I returned to my room.

After a long, long while someone came with a telephone. I dialled our number, but Mike wasn’t at home.

Suddenly I felt impelled to do something, anything that might help the baby. So far I had been, it seemed, totally helpless, a mere birth-machine in the hands of others who had decided everything for me and had finally removed my baby. That baby was somewhere here, though, in this very hospital, in an oxygen tent. Was she still alive?

Then I remembered Pelle. Pelle was a consultant at one of the children’s hospitals in Helsinki and was a friend of my mother’s. Wouldn’t a special hospital be better than here? In any event, there would be someone who knew us at the other hospital, to whom the baby would not just be any baby but our baby.

It was a Saturday and I prayed that he would be there, knowing that doctors often did not work at weekends, but Pelle was on duty. He was always a laconic man and no more so than on the telephone. He just listened and said: ‘Right. I’ll get her over here right away.’

He didn’t offer comment or sympathy – he just acted –

and I lay back on my bed with a huge sense of relief. She'd be all right now – Pelle would see to it.

I waited through the long, long time until visiting hours. At last Mike opened the door and came over to hug me.

'I'm so sorry, sweetie,' he said.

'You know?'

He nodded. 'They phoned me.'

'They gave her four points at birth, they said.'

'What does that mean?'

'Apparently they give points to babies when they are born. As if they were in a health race. Ten points to the best babies.'

'Ah.' We looked at each other.

I said: 'I got through to Pelle. He said he would get her sent over straight away to the Children's Hospital and look after her.'

'I know. He told me and I went over to see her.'

'You've seen her?'

'Such a pretty baby, sweetie. Lots of black hair.'

'I couldn't really see. She was almost all covered up when they showed her to me.'

'A lovely baby. Clever old you.'

It was much, much later that Mike told me that when he saw her in the Intensive Care Unit she was having a convulsion. She was in a domed glass case, like a Victorian trophy, with a tube in her nose; while he was there she turned rigid, blue. He never said either then or later what his feelings were about the whole thing but just did everything he could to make me feel better.

'Look, I've brought you this.'

He held up an unsightly dark red rubber ring, which he proceeded to blow up.

'What...?' I said.

'It's for people with piles, but I thought it would do for you.'

I giggled and tried sitting on it. From then on, for my three or four days in hospital I was the envy of many a precariously buttock-balancing mum. I asked a nurse if it wouldn't be a good idea to have a supply that women could borrow.

She shook her head disapprovingly. 'No, it is not good for mothers,' she said.

'Why on earth not?'

'They heal better with no... no cushion.'

I didn't believe her for a moment – 'They just haven't thought of it,' I said to myself, and continued to sit comfortably. There seemed in fact to be a general feeling in Finnish hospitals at that time that pain was essential to childbirth, perhaps because of the famous Finnish *sisu*, a word which expresses a kind of stoical persistence in the face of all hardships. An Italian friend of mine, who had a baby a couple of years later in a private hospital, asked as I had for something to help the pain, but was told curtly and unsympathetically: 'You can't expect to have a baby without pain. Finnish women don't.'

Attitudes have fortunately changed since then and Finland is as advanced as any other western country in pain relief. Changes have happened elsewhere too: husbands are regularly present at the actual birth and there would be no rules about visiting hours for a husband to visit a wife whose baby had been taken to intensive care or who had died. But it was not so in 1965 – and worse was to come.

A couple of days later I woke up to a soaking wet nightie and sheets. I couldn't think at first what had happened. There was a familiar and yet unfamiliar smell, slightly sour. Milk? Yes, but... Again the books hadn't mentioned this aspect of it – I didn't know you *leaked*. There had only been pictures of a happy mother and a blissfully sucking baby. I hadn't realized either that you could have milk without

having the baby. It seemed so unfair.

When the nurse finally came, she said: 'Ah, your milk is in, Mrs Webster. I bring a bowl.'

A *bowl*? What would I do with a bowl? Have the milk with cornflakes?

The nurse came back with a largish metal bowl.

'Here you are,' she said. 'You must – express – the milk.'

'Express?' I asked, baffled.

She made movements of pulling at her own nipple. I realized that she meant I must milk myself. Like a cow, I thought. After all, that's what happened to cows, wasn't it: they had a calf, then the milk came for the calf, then the calf was taken away but they kept on milking the cow. I suppose they leak too if they aren't milked. Poor bloody cows.

'I show you,' said the nurse. 'It is easy.'

She put her finger and her thumb on either side of my nipple with a squeezing motion and a spray of milk shot out into the bowl.

'Now you try.'

It had looked easy. However, it was surprisingly difficult to master, to find exactly where to press, the precise movement of the fingers needed and the critical pressure. After I had tried and failed several times, the nurse said: 'I get you – machine.'

She returned with a metal instrument with a small cup which she clamped to my breast. The milk began to come out again. I remembered those rows of cows in the milking sheds with metal pumps attached to their teats. No, I would not be a dairy cow.

'Stop, please,' I said. 'I want to try again myself.'

And finally I did get the hang of it. A steady stream of milk squirted in a narrow spray against the side of the metal bowl. I recalled the sound. As a child on a farm in the summers in England I had watched the farmhand milking

a cow by hand: siss! siss! siss! into the metal bucket. I also remembered a painting I had seen of a Madonna and Baby, one of the thousands, by – whom? some Italian? – but the only one I had ever seen where the milk was coming out of Mary’s breast in a fine spray of misty white. Well, at least that artist had seen the real thing and recorded it, although I did not feel a bit Madonna-ish.

‘Why do I have to do it?’ I asked the nurse. ‘What’s the point when I haven’t got a baby?’

‘Then you make more milk. It do not stop. So then when Baby come home, you can feed her.’

‘Oh yes!’ I said eagerly. ‘I want to do that.’

‘And before baby is well, you can take your milk to hospital each day.’

‘But would she get it?’ I asked. ‘Would it go to *her*?’

‘Oh yes,’ said the nurse, though whether she really knew or not I couldn’t tell. ‘Or,’ she added, ‘you can sell it.’

‘*Sell* it?’

‘Yes. Mother’s milk is very expensive. You can take it to shop. They give you good price.’

I saw her point – yes, there must be a demand for mother’s milk, probably very sick babies might be prescribed it or some mothers who could not feed their own child might want it – but the idea of selling it still appalled me. When I thought about it, though, I saw it could be a source of real income to the very poor, as it had been to them in days gone by, when the rich mostly did not feed babies themselves but farmed them out to a wet-nurse in the country, for good or ill.

After this, I industriously milked myself, telling myself that if – when – the baby was returned to us I would be able to feed her and, until then, I could send her the milk daily. I knew that it probably did not make any difference which baby got my milk or whose milk my baby got, but subconsciously I felt it did: it would be a distant bond with

her, part of me going to her. Besides, it was the only thing I could do for her, the only way in which I could help.

Then the day came for me to leave hospital. I had read the notice in my room: Mothers and babies should leave the hospital between the hours of 11 and 12. A member of the family or some other person should come to the hospital to fetch them.

Mothers and babies... Or, as it turned out, mothers without their babies as well. When Mike came to collect me, we walked down the corridors together. Other husbands were there too. They had bundles in shawls in their arms or were carrying the tiny bundles in carry-cots, mothers shooting anxious glances at their men in case they dropped them. All were excited, happy, relieved. Mike and I held hands tightly.

He had to leave me on a bench by the exit while he went to fill in forms. I watched the parents and their babies, heard snatches of conversation.

'Look, Kati, it's your baby sister!'

'Isn't she tiny!'

'Do you think she's warm enough?'

The tears began to dribble down my face. I had not cried until that moment. Somehow, up to then, everything had seemed slightly unreal, but now the reality was made visible: others had babies; I did not.

Why, I wondered then and wonder now, had nobody considered the cruelty of making people like us leave at the same time as the others? Couldn't the rules have been bent to allow at least half an hour in between? Would it have been so much more difficult to administer? And why had nobody protested?

Tears were also in Mike's eyes as we left and we rode home in a taxi with our hands clasped painfully tight, almost without words.