

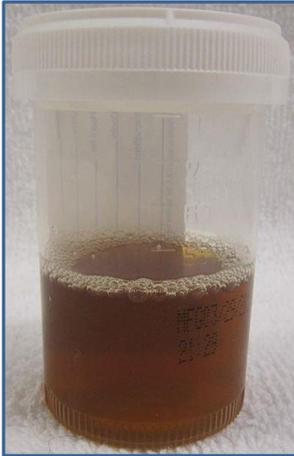
Rapid Lesson Sharing



Event Type: Onset of Rhabdo during Physical Training

Date: March 27, 2014

“I would describe the pain as someone wrenching your thighs in a vice while someone else hits them with a baseball bat.”



Because the engine captain decided to go to the hospital soon after he starting feeling the severe pain in his legs, his onset of Rhabdo was diagnosed—and treated—early. And while he didn't have dark urine, this can be a symptom of Rhabdo (see photo)—along with severe muscle pain.

Narrative

This is the story/chronology of a 29-year-old engine captain, who—during morning PT a few weeks ago—thinks he is having severe heat cramps. Fortunately, he decides to go to the hospital—where he is diagnosed with Rhabdomyolysis (“Rhabdo”). [*Rhabdomyolysis is the breakdown of muscle fibers resulting in the release of muscle contents into the bloodstream. These releases can cause multiple symptoms and, if left undiagnosed, can lead to kidney and muscle damage, and in rare cases, results can be fatal.*] The engine captain’s immediate treatment in the ER prevents his kidneys from completely shutting down. Now, almost four weeks later, he’s still on light duty, is experiencing pain and dizziness, and is not sure when he will be fully recovered.

How did this happen? This is an important heads-up for all of us.

Here’s this Engine Captain’s Rhabdo Story in His Words—and His Lessons:

March 6 – I take and pass the pack test at the arduous level, with no complications.

March 7 –Resume normal Physical Training schedule for fire season.

March 24 – Begin leading crew Physical Training for the engine crew.

March 26 – Morning PT consists of upper body weight training with limited lower body workout (bench press, curls, dumbbell flies, etc.). The work day includes moving boxes, fire gear, camping gear, and miscellaneous materials from the engine bay up one flight of stairs to the cache. I drink water throughout the day while performing these duties.

Spend evening at home with my family. Have a balanced dinner and continue to drink water throughout the evening. Receive about a full night’s rest—was up a couple of times throughout the night with my 7-month-old son.

March 27 – Start my morning at 0530 like I normally do. Prior to leaving for work, have two cups of coffee and a glass of water. Arrive at work at about 0745 and dress out for crew PT. I gather up my crew and we drive over to the high school track. Temperature is in the mid to high 50s. Relative humidity is in the high teens.

Prior to workout, the crew gathers up and stretches out. I instruct the crew that first we are going to run a mile. I and one crewmember run our mile together in roughly 8 ½ minutes. After completing my mile, I walk a cool-down lap of about a quarter mile. During this time, I stretch some more and the crew gathers back up. Our next work out is going to be a series of wind sprints—at 100% effort.

“I decide that I do need to see a doctor—as soon as possible.”

I start out on my first wind sprint. I make it about 20 yards when I feel both of my quads “pop”. I immediately slow to a walk and finish the 100 yards. Reaching the end of the wind sprint, I lie down on my back to try to stretch my quads. This just makes the pain worse. I would describe the pain as someone wrenching your thighs in a vice while someone else hits them with a baseball bat. I begin to get nauseous.

I instruct the crew to head back to the engine. We return back to station. After arriving there, I let my FMO know about what is going on with me. I fill out a CA-1. My FMO asks if I want to see a doctor. I tell him that I want to wait to see if the pain will go away.

We dress out and gather up for our morning briefing. While going through morning briefing, the pain continues to increase. Feeling even worse now, I decide that I do need to see a doctor—as soon as possible.

“The main concern is that levels of certain proteins in my blood will cause my kidneys to shut down or fail—resulting in either a kidney transplant or dialysis.”

At approximately 0930, I am admitted to the local hospital’s Emergency Room. The pain in both my legs continues to increase—making standing, sitting, walking, almost unbearable. When I’m interviewed by the ER nurse, I tell her about what I’d been doing for PT when the pain started and how it had continued to get worse. After completing her interview, she says that I might be dealing with Rhabdomyolysis.

They put me in a bed, start an IV, give me some meds to help the pain and other meds to help my body take in the fluids that I’m now being given.

About an hour later—after reviewing my blood work—the doctor confirms that I do have Rhabdomyolysis. I will need to spend the evening in the hospital—to be monitored and to receive more IV fluids. The doctor explains that my treatment will be to take on lots of fluids to flush my system and prevent my kidneys from shutting down.

Avoid Kidney Transplant or Dialysis

I spend three days in the hospital. The main concern is that levels of certain proteins in my blood will cause my kidneys to shut down or fail—resulting in either a kidney transplant or dialysis. Thankfully, by seeking medical help sooner than later—and being in better-than-average physical shape and young—I am able to avoid this.

The doctor believes my Rhabdomyolysis condition was brought on by being dehydrated, not taking fluids during PT, and my prior history of heat exhaustion. To avoid this from happening again, the doctor tells me to make sure that I: 1) drink more water before coming to work—and continue to hydrate during physical training; 2) have a well-balanced diet—consisting of fresh fruits and vegetables, plenty of carbohydrates and protein to support muscle growth and maintain the health of my muscles.

Uncertain How Long Full Recovery will Take

After my discharge from the hospital, I am restricted to no activity for a week. I am currently on “light duty” for two weeks. After this period, I’m not sure if I’ll be cleared to resume my normal duties. Side effects I continue to experience include pains in my legs—caused by nerves still firing—and dizziness. It is unclear how long my full recovery time will be.

Lessons from this Engine Captain

1. **Listen to your body.** If something doesn’t feel normal—seek medical attention. The quick decision I made to go to the ER probably saved me a long recovery time. Don’t be afraid of potential ridicule that you may receive for going in.
2. **When returning to a PT program, ease back into it.** Don’t try to rush it. Allow recovery time for your body. Due to family reasons, I was pretty disengaged from fire over the last year and hadn’t had a super active PT program.
3. **Proper diet and hydration helped me to recover quickly once in the ER.** If I hadn’t had that, I would have had more negative complications with my experience.

Do you have a Rapid Lesson to share?
Click this button:

Share
Your Lessons