

TIME HEALS ALL WOUNDS

BY TOM SCHAFFNER

Photo courtesy of Donald J. Morehouse



A HALF-CENTURY LATER, A CT SCAN REVEALS A KOREAN WAR VET'S WOUND SHOULD HAVE BEEN FATAL

Donald J. Morehouse has led a good life in his 71 years: He's a decorated war veteran. He's held a steady job for 48 years. Now, he's retired and enjoying a good golf game.

But shaving a few strokes off his golf game wasn't always at the forefront of his

mind. A half-century ago, he was just trying to stay alive. Morehouse took a bullet to the chest while serving in the Korean War. Physicians at the time told him the bullet missed his heart by an inch. But a computed tomography (CT) scan and bypass surgery last November revealed

that the bullet had not missed his heart at all. Not only had the slug passed cleanly through Morehouse's heart, but the wound healed itself.

Morehouse's story started June 12, 1953, in the closing weeks of the Korean War. The then 21-year-old was on a patrol that took

him and 14 members of the 25th Infantry Division miles away from their encampment. While crossing a field, his unit was ambushed by 200 Chinese and North Korean soldiers.

During the ensuing gun battle, Morehouse was struck by seven enemy bullets. Fortunately, he was wearing a flak jacket that deflected six shots. However, the seventh bullet entered through his left shoulder, penetrated the left atrium, passed through the heart, exited the right atrium and lodged in the right side of his chest.

"It felt like someone stuck a hot poker through my body," recalls Morehouse.

The bullet, which he describes as "just a shade over .29 caliber," was used by the enemy in the war for a specific reason. He says the bullets were altered to a smaller size to fit in American guns if they ever got hold of them. However, the Americans could not use enemy ammunition in their guns since the bullets were too large to fit.

Although seven other members of his unit were also injured in the ambush, no one was killed.

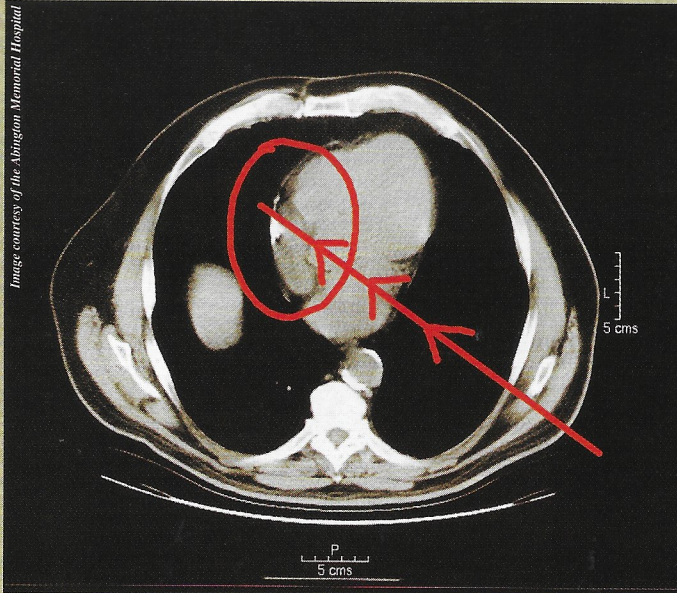
"I was treated by a medic on patrol with us," he says, "who immediately gave me a shot of morphine and stuffed bandages in my left shoulder to stop the bleeding."

Although most people would be dead within a few minutes from such a wound, Morehouse made the three-mile trek to safety before collapsing and being taken to the field hospital.

At the hospital, surgeons sewed up Morehouse's thorax and removed the bullet from his right side, which did not exit his body due to the vest he was wearing. Morehouse spent the next six weeks recovering in a Tokyo military hospital before being assigned to a special service unit for the remainder of the war.

JAW DROPPER

Forty-eight years later, Morehouse checked into Abington Memorial Hospital in Pennsylvania last November, after a stress test revealed a need for bypass surgery unrelated to his war wound.



A line shows the path of the bullet through Morehouse's heart. Opposite page: Top left, Morehouse (right) and friend getting some much needed R&R one month after the injury; (bottom right) Morehouse at home in Pennsylvania.

Morehouse's physician, James McClurken, MD, chief of thoracic surgery at Abington and professor of surgery at Temple University Hospital in Philadelphia, learned from the Morehouse's medical history that a few days after the initial surgery, physicians had drained a dark, bloody fluid from his chest. This bit of information led McClurken to suspect that the bullet may have pierced the heart.

After hearing his patient's history, McClurken ordered a CT scan to check for any bullet fragments, since he had past surgical experience operating on World War II veterans.

"We didn't see any shreds of metal, shrapnel or bullet fragments," he says, "but there was calcification along the lateral side of the left heart border and calcification along the right border. And at surgery we found that calcification actually represented scarification plugging, where the bullet entered the heart along the left atrium and exited along the right atrium."

McClurken believes that the small caliber of the bullet passing cleanly through low-pressured chambers is the reason why Morehouse survived the ordeal. "He probably had a very low blood pressure as he bled into the sac around his heart and into the chest, and then stopped bleeding actively," he says. This, he surmises,

would explain why physicians had to remove fluid from the Morehouse's chest.

In the operating room, McClurken says that he and his surgical team had a "collective jaw-dropping" at the discovery.

As Morehouse recovered from surgery, McClurken checked around to see if he could find a case similar to this. But, so far, this is one for the record books.

"To my knowledge, [Morehouse] might be one of the first or only reported survivors of a through-and-through gunshot of the heart ... that wasn't treated directly with an operation within a short period of time," says McClurken. "Most people with that injury die with or without treatment, but I haven't been able to find the experience anywhere else."

LIVING TO TELL THE TALE

After the gunshot wound, Morehouse was administered last rites twice during the whole ordeal — once at the field hospital, and a second time in Seoul, when enemy planes dropped hand grenades on the Red Cross hospital where he was recovering from the surgery. Amazingly, nine weeks after he was shot, Morehouse was back to full mobility.

Physicians gave Morehouse the bullet to him after the surgery, and he was awarded the Purple Heart.

Upon his military discharge in 1954, Morehouse returned to the United States, where he resumed his job with the United Auto Workers Union, which included a 22-year stint as a drug and alcohol coordinator for the state division. He retired in 1996, and now enjoys a good golf game whenever he can.

These days, the only hole Morehouse wants to see is a hole in one.

— Tom Schaffner is the new editor of RT Image. Comments on this article are encouraged and can be directed to tschaffner@valleyforgepress.com.

