

CORNELL

SEPTEMBER | OCTOBER 2020 \$6
Owned and Published by the Cornell Alumni Association

ALUMNI MAGAZINE

Facing the Challenge

CU begins a semester like no other

PLUS:

COVID 'fake news'

Four alumni friends: a story of survival

Ithaca eateries adapt



BAND OF BROTHERS

When four lifelong friends from Alpha Sigma Phi contracted COVID-19 on their annual ski trip, one became gravely ill. Could another help save him?

BY LAURA POWER



HITTING THE SLOPES (left to right): Lawlor, Aberg, John, and Twentyman in Vail in early March



For much of their ski vacation, everything seemed just right: the weather, the companionship, the conditions on the mountain. When it was over, the four Cornellians—men who'd been friends for nearly five decades—parted at the Denver airport amid promises to get together again soon. They couldn't have imagined that within weeks, one of them would be at the brink of death from COVID-19—and that another would be desperately trying to save him.

When the quartet—Norman “Randy” John '70, MBA '73, Roland Aberg '73, Jack Lawlor '73, MEng '74, and Mark Twentyman '73—packed for the excursion to Vail, Colorado, in early March, they hadn't been particularly worried. At that time, the U.S.'s only known cases of COVID-19 were in California and Washington; no infections were reported in Colorado or contiguous states. As John recalls: “We felt pretty secure.” During the trip, they heard reports of an outbreak in New Rochelle, New York, but the images of Governor Andrew Cuomo that flashed across a lodge TV screen seemed far away.

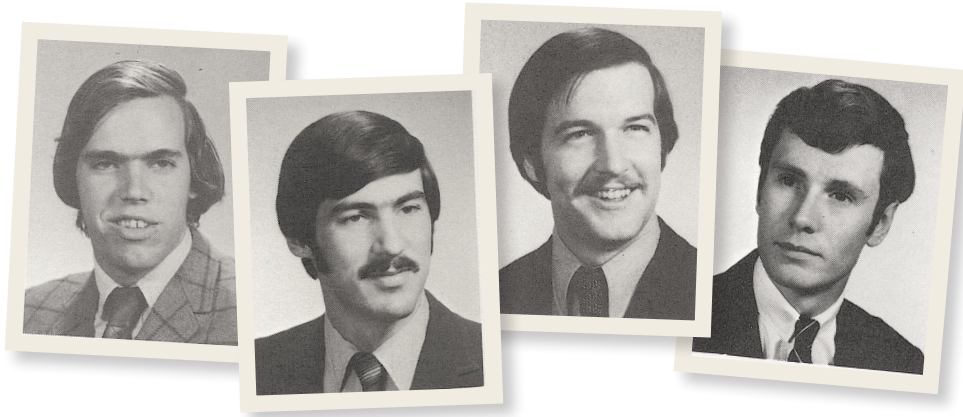
Near the end, though, there were hints of trouble. When John visited a local emergency room to be treated for dehydration, he asked a nurse if there were any COVID cases in town. She told him that they'd sent out a few tests for analysis, but wouldn't say more. At the hospital entrance, Lawlor and Aberg were questioned about symptoms by security guards wearing N95 face masks. Still, on their final ski day, all but John boarded the eight-person gondola for multiple runs. “We didn't understand fully that we were in the middle of a petri dish,” says Aberg, “and no one there seemed to know it or say anything, except for one sign at the hospital.” On March 11, the men bagged up their skis and headed home.

Three of the friends—Aberg, Lawlor, and Twentyman—had become buddies as freshmen, all living on the fourth floor of Sperry Hall. When they pledged Alpha Sigma Phi fraternity in spring 1970 they met John, a senior industrial engineering major who was already a member; the quartet jelled when John returned to the Hill in 1971 to pursue his MBA. Reunions brought them together over the years. After the excitement of new jobs, marriages, and children settled down, they often planned other get-togethers: dinners, excursions, and, more recently, ski trips. “We enjoy each other's company,” says Lawlor, an engineering alum who spent much of his career in the construction industry and is now retired. “Stories that we laughed about last year, we laugh about again this year.”

After the Vail trip, the four texted or spoke daily to check in. Lawlor, who lives in the central Long Island hamlet of Melville, had the sniffles but attributed it to a cold. In the Minneapolis suburbs, Aberg—a landscape architecture alum who's a principal at a national design firm—felt lethargic and achy, and his fatigue intensified over the next couple of days. When his wife read in the newspaper that someone in Vail had tested positive for COVID-19, he says, “the pieces started fitting together.” Aberg called his doctor, who got him a pass for a nearby drive-thru testing site that had just opened.

Of the four friends, John—who's retired from a career in the industrial gas business and lives outside Philadelphia—initially seemed the hardest hit. For a week he battled acute fatigue, a low-grade fever, and aches. A few days after his return, he'd called his doctor, who authorized a test; John was first in line at a nearby drive-thru clinic. By the time Aberg and John learned their results—both positive—their symptoms had abated. Lawlor's “cold” had cleared up, but with two companions infected, he felt he should be tested. He called his county health department, but by then New York was so overwhelmed that testing was limited to healthcare professionals and hospitalized patients. (Much later, an antibody test confirmed he'd had COVID.) ▶

PHOTOS: PROVIDED



FRIENDS FOR LIFE (left to right): Aberg, Lawlor, Twentyman, and John in their *Cornellian* senior portraits. Opposite page, top: Twentyman's tale of recovery, as featured in a Florida hospital newsletter. Bottom: The pals (seen in the same order) during their 2018 Vail trip.

Twentyman—a CALS alum working in real estate in Albany, New York—felt fine, and thought he'd dodged a bullet. After a week at home, he packed up for a solo drive to meet his girlfriend, Linda Vault-Smith, at her place in Cocoa Beach, Florida. He slogged through the 1,365-mile drive, but when he got to her condo he felt tired and irritable. He soon called his friends to say he was in bad shape. The next day, he was swabbed for COVID-19, and the test came back positive. He hoped to ride out his illness with his girlfriend's help, and she isolated him as much as she could in her three-bedroom condo. Early on, it was hoped that the malaria drug hydroxychloroquine, either

'Cards and prayers are not going to cut it,' John told Aberg and Lawlor as Twentyman's condition continued to deteriorate. 'We have to do something.'

with or without the antibiotic azithromycin, might mitigate the impact of COVID-19. Twentyman's doctor prescribed both, but they didn't seem to help. He continued to be tired and hot, but couldn't monitor his temperature because every store Vault-Smith visited was sold out of thermometers; John eventually overnighted him one.

Although Twentyman didn't feel short of breath, he had other symptoms of oxygen deficiency. He was restless and headachy and had no energy or appetite. His doctor ordered oxygen tanks and an oximeter, a finger-clip device that measures oxygen concentration in the blood. But his symptoms persisted and even with the supplemental oxygen, the oximeter showed a downward trend. His appearance during a FaceTime call shocked his physician daughter-in-law, Becky Ford Twentyman, a medical officer with the Centers for Disease Control. "You need to be seen immediately," she begged after assessing his symptoms. "Go right away."

An ambulance whisked Twentyman to a small, nearby hospital that had an available ventilator, and he was admitted to the ICU. For the first few days he seemed stable, and he was taken off the drugs he'd initially been given to maintain his blood pressure. But then his condition wavered. Some days he had a fever, others not. A few times, doctors tried to wean him from the ventilator, but Twentyman couldn't sustain breathing on his own. He again needed the blood pressure drugs; enzyme levels associated with inflammation damage trended upward.

Then, at the end of the first week, one of Twentyman's lungs

collapsed, a catastrophic event requiring surgery. His ventilator was set for maximum oxygen, with little effect. Dosage of the blood pressure drugs had to be increased. He had blood clots in both lungs, was unconscious, and struggled to breathe. Ford Twentyman and her husband, Michael Twentyman '99, got a call from the ICU: Do you want us to keep going, or should we stop treatment? They quickly opted for the lung-repair surgery.

With Mark Twentyman now seriously ill, his daughter-in-law texted frequent updates, and John, Aberg, and Lawlor checked in with each other every day. Meanwhile, numerous Cornellians followed his setbacks and victories via an extensive e-mail chain. The four buddies had developed a wide circle of friends from decades of attending Reunion, even in years when they didn't have official class gatherings. (In addition to his son Michael, there are numerous Big Red alumni in Twentyman's family including a brother, Lee Twentyman '69, a sister, Jane Twentyman MacDonald '78, step-siblings, and other relatives; his late mother, Esther Forbes Twentyman '45, also attended.) Soon, hundreds of people were monitoring Twentyman's progress. But as he continued to deteriorate, John told Aberg and Lawlor that it wasn't enough. "Cards and prayers are not going to cut it," he said. "We have to do something."

Due to the urgency of the COVID-19 pandemic, the FDA had approved a therapy called convalescent plasma—in which disease-fighting antibodies are extracted from the blood of someone who has recovered, then infused into a sick patient—for use under certain conditions on a case-by-case basis. While the therapy's efficacy hadn't been proven through clinical studies—and months later, its benefits still aren't fully known—it appeared to have aided some people. John knew that he and Twentyman both had type A-positive blood; could he help his old friend by donating plasma?

Because of past blood donations, John had established a relationship with a blood center in Bethlehem, Pennsylvania, and he arranged to give plasma there. But there were still some logistical hurdles. A receiving blood bank had to be found in Florida, as the plasma couldn't be shipped directly to Twentyman in the ICU. And the hospital's board of directors had to be persuaded to allow the treatment, due to its "investigational" status. Finally, on April 7, John donated four 200-milliliter units of plasma; two went to Twentyman and two to a local patient. (Lawlor and Aberg have since donated plasma for use in other COVID cases,

and all three intend to continue as long as it's needed.) In doing so, he felt a mix of relief and déjà vu: eighteen years earlier, John had donated stem cells that saved his daughter from leukemia.

The plasma for Twentyman arrived none too soon. He was still fighting blood clots and pneumonia. Within twelve hours of transfusing the first unit, though, he showed dramatic improvement. His 104-degree fever broke, his blood pressure stabilized, and indicators of inflammation improved—but he still needed the ventilator. After he received the second plasma unit the next day, his doctor was able to gradually adjust the ventilator settings so its breathing support was near minimal.

Unfortunately, though, those beneficial effects seemed to diminish after a few days. Twentyman had been sedated, and his doctor tried to wean him off the sedatives so the ventilator could be removed—but he wouldn't wake up. The doctor pushed for a tracheotomy as an intermediate step that would allow for easier breathing assistance and less sedation, but the surgical team refused on the grounds that Twentyman was too ill. Since more plasma might help, John agreed to donate again. Happily, Twentyman stabilized after the second donation, and the subsequent tracheotomy was successful. Within three days, he was no longer sedated and could breathe on his own for extended periods.

But there was yet another problem. Twentyman developed an arrhythmia (irregular heartbeat), possibly a side effect of the hydroxychloroquine he'd taken early in his illness. Some arrhythmias can be relatively harmless, but Twentyman's was dangerous; his doctor had to shock his chest to bring his heart back to a normal beat. Finally, after a month of mostly breathing on a ventilator, Twentyman moved from the ICU to a long-term acute care hospital, and thirty days later he transferred to a rehabilitation facility. But even then, his struggles weren't over: as one rehab staffer told him, "Clinically, you are like a quadriplegic." He had no strength in his legs, couldn't raise an arm off the bed, and couldn't even move his fingers to send a text. Thanks to several grueling weeks with a physical therapist and

his own hard work, he markedly improved. One major morale boost: a Zoom call from his rehab bed with Aberg, John, Lawlor, and more than a dozen other Alpha Sigma Phi brothers, who raised a toast to his recovery.


When Twentyman finally went home to Vault-Smith in mid-June, well-wishes poured in. A dozen or so Brazilian friends from his long-ago stint in the Peace Corps posed for a get-well photo and sent it to him. Residents of his hometown—Homer, New York, about forty minutes northeast of Ithaca—conveyed their affection. And of course, there was constant support from Aberg, John, and Lawlor. Says Twentyman: "Tears well up when I think about how much others did on my behalf, when I was so helpless." Even after getting home, he faced many more weeks of recuperation, including coping with a temporarily paralyzed vocal cord and healing bedsores that had become so severe they'd exposed bone.

Twentyman gains strength every day, but doesn't expect to be back to normal until near the end of this year; the four friends aim to gather in Ithaca next summer to celebrate his recovery. He remembers little about his COVID battle and nothing of his ICU stay—but he hasn't lost his sense of humor. When asked what he would have done differently, he replies: "I wished I'd skied in Vermont instead." ■

COVID-19: A Survivor's Story

In late March, 68-year-old Mark Twentyman arrived at Health First's Cape Canaveral Hospital Emergency Department in serious respiratory distress. Unable to breathe well enough on his own, clinicians intubated him within 10 minutes of his arrival. Following protocol for patients testing positive for COVID-19, he was placed in a negative pressure room in the Intensive Care Unit and a critical course of treatment was initiated.

The team of physicians and nurses in the Intensive Care Unit...



Mark Twentyman with his grandsons.

aggressive and appropriate treatments. This included two rounds of experimental convalescent plasma transfusions. "We were so grateful for Health First's advocacy in getting him the treatment he needed," said Mark's daughter-in-law, Dr. Rebecca Ford Twentyman, who was vital in shepherding the plasma donation through the proper channels and getting it to Mark. He eventually was weaned enough from the ventilator that he only needed it at night. To his family and care team, Mark's recovery was nothing short of miraculous.

"The care that my dad received at Cape Canaveral Hospital saved his life. We are very thankful for the teams that responded so quickly to save his life," Mark's son Michael shared.

The team also ensured that Mark stayed connected to his family, getting them in...

making critical decisions for his treatment. They never gave up, and neither did Mark.

After 28 days, Mark had recovered enough to be transferred to a long-term care hospital. Mark has even stayed in touch with his care team by talking with them through FaceTime.

"This experience has reminded us of the real value of local, community healthcare. Health First provided the best care possible for my dad at a critical time when he needed it most. The community should feel confident in knowing the care team is committed to the care of their patients and fully prepared to respond to a crisis like COVID-19," Michael Twentyman

