

**LIGHTNING DATA CENTER
MINUTES
OCTOBER 9, 2009
ST. ANTHONY CENTRAL HOSPITAL, DENVER, CO
www.stanthonyldc.org**

Monthly Quote: “Opportunity often comes disguised in the form of misfortune, or temporary defeat.” Napoleon Hill. On the web at:
<http://quotations.about.com/cs/inspirationquotes/a/Opportunities15.htm>

1. Meeting began at 11:50 AM and adjourned at 1:05 PM.
2. Members present: Foley, Cherington (Michael & Nancy), Mullan, Langford, Sunderland, Wachtel, Yarnell, Clark, Wells, London, Gift, Cui-Gift, Collier, Engle, Nuanes, and Stewart. Clark moderated the meeting.
3. Congratulations to Dr. Michael Cherington! He was one of two people awarded the Nobu Kitigawa Medal in Keraunomedicine at the 2009 International Conference on Lightning and Static Electricity held in Pittsfield, Massachusetts. The award was presented by Dr. Mary Ann Cooper. Dr. Cherington brought the Medal to the meeting and showed it to all in attendance. He stated this would not have happened had it not been for the people who have been involved with the LDC over the years. Dr. Cherington had an article entitled “Lightning Injuries: Who Is At Greatest Risk?” in the August 1990 issue of The Physician and Sportsmedicine. Dr. Cherington had seen a bicyclist struck by lightning here in Denver, which aroused his curiosity about lightning injuries and sports. His research led to the writing of the article, which was first sent to a prestigious medical journal, only to be rejected. For two years, the article sat on Cherington’s desk, until he submitted it to this journal. After the article was published, he was approached by Ron Holle and Ron Larson, who had the same curiosity about lightning injuries as related to outdoor activities. The trouble was, they couldn’t find a convenient place to meet during the day, until Michael’s wife Nancy suggested approaching the hospital and seeing if a room could be reserved and a lunchtime snack be provided. That worked beautifully, as thus was born the Lightning Data Center, back in February 1992. With the inception of the LDC, lightning became “a second career” for Dr. Cherington. Congrats once again.

4. A lightning strike survivor, whom I will call “Charles”, came to the meeting, along with his wife. Charles was getting out of his vehicle and leaning with his hand against an awning, when he was struck. His wife reported seeing a bright yellow ball of light under the awning that appeared to be rotating. Smaller globules of light were seen moving along the awning rails. Immediately upon being struck, Charles said there was pain in his hand, like a hot needle in the hand. His hand muscles froze up, with his hand firmly gripping the awning rail. Try as he might, he could not get himself to release his hold of the awning rail, until roughly 1 to 3 minutes after the strike. There was a discussion of tetanic contraction and whether or not a lightning flash, being DC, would cause that. This condition is usually associated with AC electrocution. Clark thought the lightning might have multiple surges of current, each of which would be a half-wave voltage spike going through Charles’ hand. Once he got his hand free, he became rather emotional and worried and was ultimately taken to the hospital. Standard medical tests revealed no abnormalities. At the present, Charles has the following sequelae:

Some pain in his left arm.

Wakes up with pain after sleeping.

Muscle spasms, which appear to be worsening.

Headaches.

Irregular sleep.

Metallic taste in the mouth.

Lapses in concentration.

Claustrophobia.

5. In last month’s minutes, Dr. S presented the case of a woman that was struck while on an archaeological dig in New Mexico. Updated information has been received regarding this event. People that were nearby when the lightning struck were a few yards away from this woman. Following the strike, she was not breathing and so CPR was administered within 1 to 2 minutes, which, per Dr. S, undoubtedly saved her life. She was taken to the hospital via helicopter, which arrived on-scene between 20 to 40 minutes after the strike. Her hair was singed and there were burns on her chest, corresponding to a zipper on a garment she was wearing. She has been diagnosed, in part, with a midline cerebellum infarction. An infarction refers to tissue damage usually caused by a lack of blood to the affected area. It is not known if the infarction was due to the strike itself or some kind of trauma after the strike. Both eardrums were ruptured, and blood was seen coming from the right ear. At present, she is in a rehab facility as she is unable to walk or talk. Initially, there was nearly constant, uncontrolled movement of her limbs, but fortunately, that has subsided somewhat. She is regaining some control of body movement and has begun to respond to humor. She is able to communicate via a “communication board, which allows her to point out basic needs and desires to caretakers in her room. She was unable to sleep for about 2 weeks after the strike, but now she is sleeping approximately 4 hours a night. She is able to listen to and respond to music; however, that is done with caution as she can become over-stimulated by the music.

6. These minutes do not represent official positions of LDC or its members. They simply reflect the comments made at the meeting.
7. Next meeting: Friday, November 13, 2009 at 11:45 AM in the Main Auditorium at St. Anthony Central Hospital featuring a lightning strike survivor with Dr. Scott London. In case you missed it, here is the link to the Canyon Courier article describing this incident:
<http://www.lcni5.com/cgi-bin/c2.cgi?036+article+News+2009090116055036036009>

Respectfully Submitted,

Steven E. Clark, Consulting Meteorologist