

# Bikie scalped to stop double vision

A road accident left Jamie Chapman with a piece of shattered bone pressing down on one eye socket, causing double vision. The only way surgeons could get to the fracture was by a procedure involving peeling back his face. By Kelly Andrew.

JAMIE CHAPMAN was riding his much-loved Harley Davidson 1340 motorbike on Waikaranga roads when he had the accident that nearly claimed his life.

It was a Sunday afternoon, July 4 last year. He had just rounded a bend on the north side of Mount Bruce when he saw a car that had slowed to about 30kmh directly ahead of him.

He was clocked travelling at 105kmh by a traffic officer shortly before the accident, but says he was riding safely.

Mr Chapman tried to avoid a collision by swerving to his left but still ended up crashing into the car.

His memory of the accident is almost non-existent.

"When I left the bike my mind shut down," he says. "I could see the road flashing under me like sandpaper."

Mr Chapman suffered severe head injuries and went into a coma.

Doctors told his wife Claire Chapman that he had a 20 per cent chance of surviving and that if he lived he would have brain damage.

The former truck driver spent more than a month at Wellington Hospital, including several weeks in intensive care.

But, he has made an almost miraculous recovery in the past 15 months which he attributes to excellent medical care, support from friends and family, and "prayers from Wellington to Wanganui".

His short-term memory is still poor and his right leg is uncontrolled from the knee down because of damage to the left side of his brain.

When the 44-year-old Masterton man spoke to *The Dominion Post* he was resting on a bed at Wakefield Hospital in Wellington, awaiting a complicated operation that he hopes will help him see properly.

He seems surprisingly relaxed for a man about to go into surgery, but says all of his worrying has already been done.

The surgery will correct a fracture in the bone that forms the roof of his left eye socket. The injury was caused by the force of the impact.

A piece of shattered bone has been pressing down on his eye socket, pushing his eye forward and causing double vision that makes him feel nauseous. He wears a patch on the lens of his glasses to stop the double vision, but this means he loses depth of field.

He has been told that the surgery, which is rarely performed in New Zealand, is not guaranteed to correct the problem, but he is willing to give it a shot. "I know there are no promises and no guarantees but I don't want to spend the next 40 years wondering if I should have had a go."

He is hopeful that he will be able to stop wearing a patch on his glasses.

The two-hour surgical procedure, to be performed by Wellington plastic surgeon Charles Davis and neurosurgeon Agadha Wickremesekera, involves making an incision across Mr Chapman's scalp from ear to ear to avoid scarring around the eye, peeling forward a flap of skin to reveal his skull, and cutting out a piece of bone at the front of the exposed skull to give

the surgeons access to the fracture.

His brain will be lifted upwards and out of the way with a retractor instrument, and a new piece of bone cut from Mr Chapman's hip will be shaped to fit the curve of his eye socket, replacing the damaged bone.

The piece of skull is replaced in its original position and held securely with titanium plates.

Hours after speaking to *The Dominion Post*, Mr Chapman underwent the procedure, which the doctors said went well, though its success or otherwise would not be known for two to three months when the swelling went down. Three days after surgery he was discharged.

Mr Davis says Hutt Hospital's plastic surgery unit sees one patient a week with an eye socket fracture. Wellington Hospital sees about one a month, usually severe head injury cases.

Most are from sports accidents or assaults and a few from road accidents. A CT scan is needed to confirm a fracture, which can be difficult to diagnose.

Mr Chapman's case was unusual, Mr Davis says, because the problem was in the roof of his eye socket. More commonly it is the thinner bone underneath the eye that breaks, causing the eye to sink in rather than bulge out. This can also cause double vision or even blindness in severe cases.

Mr Chapman's fracture affected the muscles that hold and control the movement of the eye ball, allowing it to drift to one side.

"We've told him that there are no guarantees that this [procedure] will fix it," Mr Davis says.

Despite the uncertainty ahead, Mr Chapman is upbeat about his situation and laughs often, usually at jokes about himself. He describes his attempts at running as looking "like a baby in nappies" and takes some good-natured ribbing from family members about his woolly beard and poor track record at doing housework.

Inevitably, his head injuries have affected his personality as well as his memory, concentration and physical wellbeing. The father of two teenagers — aged 16 and 13 — admits to acting like a teenager himself sometimes.

"When I first went home I was prone to throwing tantrums."

**'I'm quite sure I want to ride again, but I won't know the full impact of the accident till I throw my leg over it.'**

He has had one grand mal, or serious epileptic seizure resulting in loss of consciousness, about 10 months after the accident. Mrs Chapman believes this was probably triggered by his anti-depressant medication.

She describes her husband as a free spirit.

"As long as he's doing what he wants to do everything runs smoothly. So it's just that little bit harder because of the injury, but his medication helps."

A professional who works for National Bank in Masterton, she was reluctant to become his full-time nurse, so he has caregivers at home to help him.



Mr Chapman says that after the accident he gave his wife the option of leaving him.

"I said if she wanted to, she could go. It would upset me immensely but eventually I would get over it."

She says: "But I'm still here."

Mr Wickremesekera says it is amazing that Mr Chapman is able to walk and talk considering the severity of his injuries. He describes the recovery as "remarkable".

As part of his rehabilitation, Mr Chapman goes to a gym three days a week and uses weights and an exercise bike to help control his weight, which grew from a frail 72 kilograms before the accident to 105kg at one point.

He has now eased back to 96kg.

It's a source of frustration and disappointment for Mr Chapman that doctors have told him he is not allowed to drive or ride a motorbike because of his head injuries.

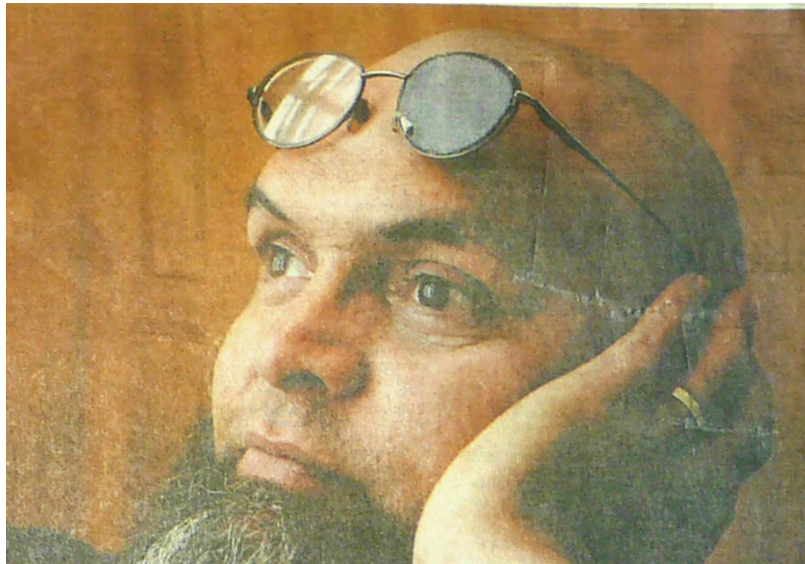
He does ride a push bike — against doctors' orders — but feels wary of "idiots in tin tops" on the roads.

His next project is to reconstruct his badly damaged Harley Davidson — which was worth \$18,000 when he bought it just 10 months before the crash.

He still dreams of being able to ride it again and is not sure whether he could bring himself to sell it.

"I'm quite sure I want to ride again, but I won't know the full impact of the accident till I throw my leg over it."

But, Mrs Chapman is adamant that she will never ride on the back of the bike again.



## ▶ REBUILDING A SHATTERED EYE SOCKET

This is a breakdown of the two-hour surgical procedure performed by Wellington plastic surgeon Charles Davis and neurosurgeon Agadha Wickremesekera to correct Jamie Chapman's eye socket bone fracture.



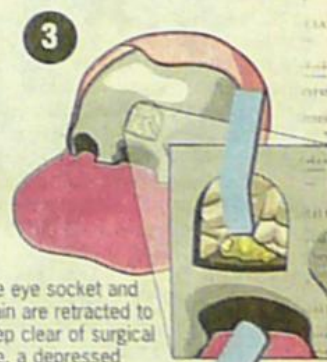
An x-ray of the fracture before the operation



1 An incision is made from ear to ear across Mr Chapman's scalp to avoid scarring around the eye, peeling forward a flap of skin to expose his skull and the top of his eye socket.



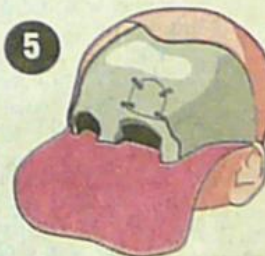
2 A piece of frontal bone is removed, exposing the brain, to give surgeons access to the fracture.



3 The eye socket and brain are retracted to keep clear of surgical site, a depressed bone fragment pushing into the eye socket is revealed.



4 A new piece of bone is fashioned to fit the curve of the orbital roof and prevent the brain herniating into the socket.



5 The frontal bone is plated back into position.



6 The wound is closed and will eventually be covered by regrowth of hair.

Source: CHARLES DAVIS  
Illustrations: RICHARD PARKER