

“The condition for a miracle is difficulty, however the condition for a great miracle is not difficulty, but impossibility.” – Angus Buchan (Faith Like Potatoes)

‘No hope’. This is what **Connie**’s doctor said, in English, to Karen. The tumor that was growing in Connie’s kidney had become so large that it was pressing on her other organs and causing internal bleeding. The hospital had hoped to be able to do chemotherapy to try to shrink the tumor first before operating, but it was too late for that. Connie needed a miracle, and soon.

One-year-old Connie had arrived into New Day’s care just two weeks earlier, on March 26, only nine days after she had been found at the gate of her local orphanage. Her abdomen was very swollen from the large growth in her kidney, and she had needed a blood transfusion before she travelled so that she would be stable enough to survive the journey. We hoped that chemotherapy would be able to shrink the tumor before she had surgery; just three days after she arrived, however, she began to bleed. We took her in to the hospital, and could see that she was in a lot of pain.

A blood test showed that her blood platelet levels were dangerously low, so low that it is amazing that she survived. She needed to be admitted to the ICU, but there was no bed available so they gave her a blood transfusion and kept her in the emergency room for observation. When the doctor examined her the next day, he kept on saying how serious her condition was; she needed to be stable enough for chemotherapy and surgery in order to have a chance of surviving. All they could do was continue giving her blood transfusions.

Then Connie vomited blood, and there was still no bed available for her in the ICU. It was at this point that the doctor told Karen that there was ‘no hope’. We knew that her impossible situation was a condition for a great miracle! Yet we had to make a difficult decision – to do another blood transfusion, or bring her back to New Day and just hold her? Eventually we were able to make contact with the surgeon who had successfully operated on another New Day child with the same kind of tumor, and she was willing to attempt a surgery, even though she warned that it would be very high risk. Connie was moved to the surgery ward.

Connie was in such good hands. The medical team decided not to attempt to remove the tumor at this stage because she was too unstable, and instead performed a less risky procedure to cut off the blood supply to the kidney where the tumor was growing. This was urgently needed because the tumor was growing so fast, increasing by 2cm in just two days. The surgery went well, and Connie was eventually transferred to the ICU after a long wait in the operating room because a bed was still not available. At this point it was a miracle that Connie was still alive, when the doctor that had examined her earlier had warned us that she would probably not survive the day, but she still urgently needed to have the tumor removed. They couldn’t take her off the ventilator because the tumor was making it hard for her to breathe. Surgery was scheduled, but blood tests showed that she had an infection and her platelet count was too low.

Through the Easter weekend, which happened to coincide with a Chinese holiday, Connie remained on the ventilator in the ICU, stable but sometimes running a low fever. On Wednesday 8 April, Connie went into the operating room and underwent a three-and-a-half hour surgery to remove the tumor. It was successful; they saw that the massive tumor had ruptured, which is what had been causing her internal bleeding. After almost a week, Connie was finally able to come off the ventilator, and a few days later she was transferred out of the ICU onto a regular ward.

Connie still had a lot of recovering to do, and she needed to have chemotherapy, but she was alive, and her life was already proof of what can happen when we refuse to accept ‘no hope’ as a diagnosis.

In August, 2015, Connie was admitted to the hospital near New Day to have her 5th round of chemotherapy, but she was unwell and they weren’t able to start the treatment. They spent the week running tests and trying to find out what the problem was; she was diagnosed with an intestinal blockage and scheduled for surgery in a Beijing hospital on Friday.

This was clearly bad news, but the timing of it was amazing. If the symptoms had begun to present themselves even a day later, Connie would have started the next round of chemotherapy and her immune system would have been too weak for her to be able to have the surgery that she urgently needed. This sense of miraculously good timing continued, as Karen explains:

There was a massive line of cars waiting to park outside the hospital, so our driver dropped us off at the hospital entrance and joined the line for a parking space. In the hospital, we could clearly see on the X-ray that there was a blockage in her system, from the place where her kidney had been removed. She needed to have a CT scan to figure out what the blockage was, but that hospital didn’t have a CT machine, so we needed to take her to another building to have it.

Connie was unstable and we needed to move fast. The hospital we’d transferred her from that morning had put her on an IV to try to give her enough strength for the journey, but now it was going to take even longer. We called the driver and he didn’t pick up his phone, but when we walked out of the main doors of the hospital he was right outside, having just reached that point in the line for a parking space! Then, at the other hospital, there ‘just happened to be’ a parking space right by the entrance, which is highly unusual to say the least.

We lined up to pay for the CT scan and then went to a different building to have the scan. There was no line at all, which again is highly unusual. Even right after we got there, six more people suddenly appeared in line behind us.

After the scan we took her back and she was put on an IV to get her ready for surgery. Then we were able to go down to get the results of the CT scan. The films slowly came off the computer, followed by the report explaining the results. I watched Sharon’s face as she read it (I don’t read Chinese well enough). A big grin appeared. “The report says that it’s not another tumor”.

It turns out that part of Connie’s intestine had been damaged, either by the massive tumor in her kidney or during the surgery to remove it. At 4 pm she had surgery and the surgeons were able to remove the damaged section. It was a set-back, but again, miraculously, Connie survived, and now she is back on the road to recovery.





He performs wonders that cannot be fathomed, miracles that cannot be counted. Job 5:9

Sylvie was the first child that came into the care of New Day Foster Home and had a liver transplant in her first 24 hours with us!

Almost-one-year-old Sylvie had been in the care of another foster home in Beijing, but they were not able to pay for the liver transplant that she would need so they asked us if we would be able to help. Initially we did not have a bed available for her to come straight to New Day Foster Home, but we went ahead and had her name put on the waiting list for a liver.

On the morning of Monday 11th of May, we got the call that a liver had become available for Sylvie. It sounded like a perfect match for her, so we quickly headed to the hospital to meet with the doctor AND to meet Sylvie for the first time. Sylvie was still in the care of the other foster home when we got the call, so we let them know the news and they rushed her to the hospital.

Sylvie spent the day being taken all around the hospital for tests and scans to see if the transplant was going to be possible. She was so sweet and brave, and quickly won our hearts in those hours before she went in for surgery. At 5pm we signed the surgery papers, and handed Sylvie into the arms of the surgeon, having been warned that the surgery was quite risky and could take over 12 hours. The waiting began.

Just after 2am we got word that Sylvie's new liver was in, and they were starting to close her up. At 2:45 we caught a glimpse of her being transferred from the operating room to the ICU. The doctor said that the surgery had gone well, and just six hours later we got another update; Sylvie was awake.

By Tuesday morning she was off the ventilator and breathing on her own. We were amazed by the speed of her recovery! On Thursday she was able to move out of ICU and onto the regular ward, which meant that one of our nannies could be with her.

We are just in awe of the miracle that has happened in Sylvie's life. She still has a fairly long road to full recovery, but we know that now she has a bright, hope-filled future, and we are privileged to walk this part of the road with her. Her new liver came from a 7 month old baby. We don't know much else about Sylvie's donor, but we are so thankful for the family that decided to provide hope to others, even in the midst of their loss and grief. It's truly beauty from ashes, and Sylvie's life is going to be very beautiful.

Tim arrived into our care in March, 2015, just two months old and suffering from serious heart disease. He was so small and fragile that the doctors wanted to wait to do surgery, but by May he had to be admitted to the hospital because his heart was so unstable and he needed treatment for pneumonia.

This was not our usual hospital for heart surgeries, but the surgeon strongly recommended that Tim needed surgery immediately because his heart function was deteriorating daily. We were faced with a decision; to go ahead with surgery, or try to have him transferred to the hospital that we usually use, who were recommending a different approach. After a long meeting with the surgeon, we decided to go for immediate surgery, so on May 29 he went into the operating room.

Even the journey from the PICU to the operating room was an anxious one, with a long wait for the elevator, the doctor 'bagging' Tim to keep him breathing. Then there was a long wait while the surgery was underway. The plan had been to avoid open heart surgery, as Tim was considered too weak to survive it, and instead to attempt a minimally invasive surgery. When they tried to place a patch, the heart wall was too thin for it to hold, so they had to perform open heart surgery after all.

The surgery went well and we had a miracle...Tim was stable. The doctors did have to leave his chest open for two days because his heart had enlarged too much to close it. We waited to hear news about his recovery, hoping that there would be no infection.

Three days later he was still on the ventilator and had a lung infection. The days went by and we kept on hoping...

On June 9 his infection was getting better and we danced a happy dance when he heard that he had been taken off the ventilator! On June 16 he was back on the regular ward, with one of our nannies there to take care of him.

Make more amazing stories possible.
 **NEW DAY**
foster home
www.newdaycharities.org

Eli came to us at the end of May, 2014. He was two months old, and he was tiny, weighing just 2.8 kg (6 lbs). His skin had the grey-blue tinge of severe heart disease, but he needed to grow bigger and stronger before he would be able to have surgery.

In October his situation took a dramatic turn. Eli had been battling a fever for a while, but one night he developed breathing difficulties and was crying inconsolably. Amy (the foster home manager) and his nanny rushed him to the hospital. His oxygen levels had dropped very low, showing readings of 22, and his nanny was very worried. They administered oxygen in the car and got his levels up to 40/50, which is still low but a lot better.

When they got to the hospital there were no beds available. Eli was very blue and he vomited. The hospital staff were seriously concerned and said his situation was very dangerous. They wanted Eli to be transferred to another hospital because they felt they were not able to help him.

When they reached the bigger hospital, Eli and his nanny had to stay in emergency room overnight. The doctors had wanted to put him on a breathing tube, but Amy questioned this, raising the concern that it would be hard to get him off it again. They called the head doctor and he agreed, so Eli was set up with an oxygen tent instead.

The next day he was able to be transferred to the heart hospital, the beginning of a long stay. He kept running a fever and getting diarrhea, so he was not a candidate for the surgery that he badly needed. Thankfully the hospital did not just discharge him and send him home to get well, and Eli was eventually able to have surgery on November 4.

The surgery took just under three hours and the doctors said that it went well. Eli remained in the ICU for 10 days before he was stable enough to move to the regular ward. How we rejoiced when we heard the news that, just two weeks after his surgery, Eli was being released from the hospital! Our tiny treasure has not had an easy start, but he has been safely held in strong hands and he's survived. We are so glad to have Eli back with us, and we are full of hope for his future.