



## **CURE OF DOCTOR EDWARD ERWIN GATZ OF AN ADENOCARCINOMA OF THE ESOPHAGUS**

*Report prepared by Dr. Edward Erwin Gatz, February, 2009*

Doctor Edward GATZ is a retired anesthesiologist who lives in Omaha, Nebraska, in the United States of America. He was born on April 19, 1937 in O'Neill, Nebraska.

In November 1988, at the age of 51, he became aware of an onset of multiple, tiny bumps on the back of his hands, and the skin became unusually thick and coarse. The bumps were similar to goose flesh, but smaller and much more numerous. Doctor James Regan, a dermatologist, believed the changes could be “an occult neoplasm” (hidden cancer) and referred him to his internal medicine physician, Doctor David Jasper. Over the next eight weeks, tests and consultations were conducted. No data or exams revealed evidence of Doctor Regan’s diagnosis. Thus, Doctor Gatz considered the possibility that he might have cancer of the transverse colon, as had his mother, who died from it at age 45. However, he had no signs or symptoms, other than the hands. His weight was stable, appetite unchanged, no difficulty swallowing, and he continued to work his usual 84+ hour week, until he had vacation time beginning January 9, 1989.

An endoscopy on January 9, 1989, revealed the presence of a large adenocarcinoma in the esophagus, extending into the stomach. The patient was hospitalized at the Mayo Clinic in Rochester, Minnesota. Two days later, on January 18, 1989, Doctor Victor Trastek, a cardiovascular-thoracic surgeon, stated that there was a 50/50 chance of completing the palliative partial esophago-gastrectomy. The final decision would be based upon findings at the time of operation when risk to benefit ratio could be more adequately determined.

Doctor Trastek did complete the palliative procedure. The postoperative diagnosis of the surgically removed tumor was reported as a stage 3-b adenocarcinoma with distant metastasis. Subsequently, Doctor Gatz was given the opportunity to have chemotherapy and/or radiation therapy. Each department admitted that their therapy would not be curative alone and/or in combination. Neither department encouraged consideration of the choice(s) in order to “prolong life,” which had been estimated to be six months based on the above diagnosis. [Two and a half years later, doctors at the Mayo Clinic did additional studies on the cancerous tumor and found that it was an aneuploid cell type (“wildest of the wild”). The Omaha physician who requested the study concluded that Doctor Gatz was “lucky” to still be alive. Furthermore, he commented that four months would have been optimistic had they known the cell types was aneuploid.]

On the day that Doctor Gatz’ cancer was diagnosed (January 9, 1989), his wife spoke with a priest, Father Richard D. McGloin, S.J., to tell him about her husband’s illness and to seek some consolation. This priest encouraged Mrs. Gatz to pray with him “every day without fail” to Blessed Jeanne Jugan to intercede for a cure. He gave her the novena prayer to Blessed Jeanne Jugan, whom he knew

through the Little Sisters of the Poor, since he had formerly been their chaplain at their Home in Milwaukee, Wisconsin, and whom he held in great respect and veneration.

The promulgation of the decree of the Congregation for the Causes of Saints, authorized by Pope Benedict XVI, acknowledging the miracle through the intercession of Blessed Jeanne Jugan (Sister Mary of the Cross) was signed on December 6, 2008.