

25 May 2011

Chloe Leong (29 June 2009 – 20 April 2011)

It had been a month since my little darling passed away. Not a single day passed that she had left my mind. I thought of her all day long. She is the last thing on my mind before I fall asleep and the first thing that occupied my mind when I wake up. She seemed so real to me – I felt like I can almost reach out and touch her. Maybe she's just in another room except I can't see her.

When I was pregnant with Chloe, I often wondered if I could love her as much as Rin, my first born. Would there be place in my heart for another child? I soon found out that it was totally possible. She was very different from Rin. While Rin was playful and chatty, Chloe was much quieter and gentle, though no less adorable. She would beam in delight when she saw me and WK laughed at her little songs and dances. She loved to hide behind chairs and the curtain and with her sweet little voice, declared "I'm here". Every night before turning in, she would ask for a little waltz with her daddy and plant kisses after kisses on my lips till I begged her to stop. She would then chuckle happily before turning to her side to sleep.



April 20, 2011(Wed) – our lives were changed forever. Chloe left suddenly and to this day, cause of her death remained unknown. It was 2 months 9 days short of her 2nd Birthday. She would be turning 2 years on 29 June, if she were alive.

April 16, 2011 (Sat) – Chloe woke up with a slight fever, which climbed above 38.5 deg C by noon. I was dismayed. She was totally well and active the night before! I administered paracetamol and ibuprofen on my own throughout the day and her fever seemed to be under control. She remained active and had a hearty appetite, eating 2 bowls of porridge for lunch and 1 bowl of porridge for dinner. She drank her usual amount of milk and continued to sing, dance and play with her elder sister. We passed it off for viral fever.

April 17, 2011 (Sun) – Her appetite dropped. She skipped lunch and dinner and her milk intake halved. However, she remained active and played happily with Rin throughout the day. I thought that was normal with viral fever and wasn't too concerned. But we decided not to go out anyway as we felt that she needed a rest. At 7.30pm, she sneaked 1 spoon of Rin's dinner and threw up promptly. I cleaned her up; she didn't look unwell. At 9.30pm, she asked for milk and threw up again. I started to get worried and told WK I would bring her to see a pediatrician the next morning as it seemed like she was down with stomach flu. She threw up another 2 times at 3am and 4am after her midnight feed. I gave her some anti-vomit medicine and it seemed to work.

April 18, 2011 (Mon) – Chloe had stopped throwing up but she looked lethargic. I was very worried. That was abnormal. The pediatrician confirmed my guess. Chloe was down with stomach flu. He asked me not to give her any solids or milk as it would worsen her condition. Only rice water, barley, fruit juice and plain water until her vomiting and diarrhoea stopped. I told the doctor that Chloe did not have any diarrhoea and he told me it would start soon. He asked me if she had any cough or blocked nose. I told him no but she seemed to have difficulty breathing. He told me he did not want to prescribe any flu medication as it wasn't good for such a young child to take flu medication. He told me that her fever would continue for the next 2 to 3 days and that the only danger with stomach flu was dehydration. As long as she stopped throwing up and was able to tolerate liquids, she would be fine. There was no medicine to treat virus infection and she would get well on her own. Only paracetamol, ibuprofen, hydralyte, anti-vomit and anti-diarrhoea medicine were prescribed to relieve her symptoms. He was right. Chloe started having diarrhoea that afternoon.

April 19, 2011 (Tues) – I went back to work as it seemed that Chloe was suffering from common stomach flu. When I went to fetch Rin and Chloe home that night, my baby sitter told me that Chloe did not seem to be getting better and her feet had turned yellowish. She asked me to bring Chloe back to the doctor the next day. I told her not to worry as the pediatrician had already pre-empted me that Chloe would get worse before she would start to recover by the fifth day but nevertheless, I would still bring her back to see the pediatrician since April 20 would be the fifth day of her sickness. Chloe seemed extremely thirsty. When I got her home, she pointed at the hydralyte solution and cried. I gave her 1.5 packs of hydralyte which she lapped up and drank another 250ml of brewed barley water. I was satisfied with the amount of liquids she drank; at least she would not suffer from dehydration although her tummy looked like it was going to explode with the amount of liquid inside. She lay down on her tummy to sleep after drinking. Chloe looked extremely lethargic and seemed to suffer from blocked nose. I gave her some nosedrops and her breathing eased. I fed her medicine at 10.30pm and monitored her temperature hourly. Her fever did not return. Couldn't wait for morning to come so that I could bring her back to the pediatrician to ask what was wrong with her.

April 20, 2011 (Wed) – At 1am, I woke up as I could hear her having diarrhoea. I changed her and she went back to sleep. At 2am, she woke up and asked for water. I passed the waterbottle to her and she hastily slurped about 100ml which she threw up promptly. I cleaned her up and she passed loose stools again. At 3am, she woke up and stood up to look for me, without realizing I was sleeping right next to her. She must have thought I left her side to go onto the bed to sleep. I called her name and she asked for milk. I gave her Isomil Advance, the soy formula that I bought from the pediatrician clinic as I was told not to give her milk until her diarrhoea stopped. She didn't like the taste and push it away. I used a syringe to feed her 50ml to fill her stomach. She rolled to her side to sleep after that. At about 4.15am, I heard her grinding her teeth. I ignored it as she ground her teeth sometimes. At 4.30am, I heard her whining in pain. I woke up to take her temperature. It was 37.6 deg C. Not bad, I thought to myself. Her fever had become less frequent, managing to drag for 6 hours instead of the 4 hours for the last few days in between medication. I gave her paracetamol. After she took it, her eyes widened and her head rolled to one side. She looked like she had a heart attack. She pointed to her nose to indicate she couldn't breathe. I administered nosedrop for her and she dropped her hand. Her expression remained glazed. I told WK she didn't look right. WK told me she was probably feeling tired with me waking her up every hour to change diapers or to feed her water. He asked me to put her down to sleep. I laid her down on her pillow and she rolled to one side. I thought WK was right. Rin woke up from the commotion and asked for milk. I went out to make milk for Rin when I

heard WK speaking to Chloe in a panicked voice. I ran into the room and WK told me that Chloe had rolled back to face-up position again; her hands and legs were straightened and her jaws were locked. I asked him to check her heartbeat and breathing. He confirmed that she was breathing and her heart was beating. I told him we need to get to the hospital right away. He carried Chloe and ran out of the front gate while I went into the study to get Chloe's birth certificate and health booklet. When I reached the gate, WK told me Chloe had stopped breathing and there was no pulse. We ran home to call 995 and I asked for instructions to perform CPR. The ambulance took half an hour to come. I did CPR on Chloe but her pulse and breathing never returned. I knew she was gone but like any mother, I was hoping for a miracle....that the medics could resuscitate her with their machines. I didn't give up hope and push on with my CPR until I could hear air escaping from her body. The medic heard the hissing noise of escaping air over the phone and told me it was a good sign as it meant that she had air in her body. WK pointed out that she seemed to inflate like a balloon when I blew air into her and deflate when I pressed on her chest. I refused to listen to logic but hung onto the hope that although she wasn't showing any signs of breathing on her own, at least I had gotten air into her body. The medics reached my home at 5.15am and we reached KKH at 5.40am. The doctors at the A&E unit tried to resuscitate her for half an hour before pronouncing her dead at 6.10am.

I was devastated. How can this even happen? Chloe had no pre-existing illnesses, and the doctors did not find any signs of abuse on her. She was a chubby toddler at above 50th percentile for her age group, a perfectly healthy child. A lot of What-Ifs went through my head. What if I have checked her into the hospital on Tuesday night after I have fetched her home? Would she have survived? Or maybe I should have checked her into the hospital on Monday morning instead of going to the pediatrician. At least if she had the attack, medical care would be available immediately instead of waiting for over 1 hour to get to the hospital after the attack.

I don't blame God or anyone else. If there was anyone to blame, it would be me. I'm her mother and yet I let her die. I wish that the virus had claimed my life instead of hers. After all, I have already seen the world for almost 35 years but she had not even seen it for 2 years. This is totally unfair.

Now I can only place my hopes that God had taken Chloe into Heaven. Maybe her grandmothers are taking care of her up there. And maybe one day, if I'm good enough, I can see her in Heaven again. I hoped she will still remember me.