

IT'S ALWAYS SOMETHING!

An Atlantic Crossing in a Contessa 32

Anne Kolker

(Anne Kolker is an anesthesiologist (anaesthetist in British English) who worked at Memorial Sloan Kettering Cancer Center in New York for 30 years before retiring to do more sailing. She and husband Alan became avid sailors about 29 years ago, and had plans to retire and cruise aboard their Stellar 52 Etoile until Alan died in 2008. Since then, Anne has made many cruises along the US East Coast in Etoile and taken part in numerous offshore races with all-female crews, as well as sailing as crew/ship's doctor on other racing boats.)

I had been talking about doing an Atlantic crossing with *Etoile*, but the complexity of her systems made it seem like a daunting project. When my friend Margaret 'Garet' Wohl sent me a copy of *Cape Horn to Starboard* by John Kretschmer, featuring a Contessa 32, I thought the story was compelling. Garet had bought a 1985 Contessa 32 and asked if I would consider an Atlantic crossing with her as part of a crew of three. Garet and I had sailed together on many offshore races over the previous ten years and it sounded like a real adventure on a much simpler boat than mine, so I said yes without hesitation. Garet asked a friend with whom she had done an ARC race many years ago to join us and he too agreed to come.

Garet had owned *Salacia*, her Contessa 32, for about six months before deciding to do the crossing. She documented the boat in Denmark for ease of EPIRB registration, then worked very hard to get all systems ready including adding new sails, a small solar panel, safety equipment and an IridiumGO! for communications. She took short sails from her home harbour of Sète, France and in late September 2018 began the passage down the coasts of France and Spain to deliver *Salacia* to the Canary Islands. We hoped to depart from there in January 2019, but in early October Garet called to say that her ARC friend wouldn't be joining us due to a heart problem. She searched for a replacement through an online site for ocean crew and found Chris, an experienced 58-year-old British sailor who had done two west to east Atlantic crossings and was, per Garet's evaluation, a very capable sailor with mechanical skills as well.

To familiarise myself with the boat I joined Garet for two weeks on passage from Barcelona to Valencia. *Salacia* was small and sturdy. We had a problem with the overheat alarm for the engine but it turned out to be the alarm, which was old, not the engine, which was new. We also had a windvane self-steering gear, which seemed like a good idea although it was totally new to me. Our Spanish coastal trip was mostly motor-sailing, so we never used the self-steering.

* *Cape Horn to Starboard*, published in the US by Burford Books in 2010.

Garet at the helm





Labelling cans for storage

We departed on 3rd January and, once beyond the shadow of Gran Canaria, had good wind and nice weather with little wave action. We settled into our watch routine of three hours on and six hours off, and all was good until 2230 on day three, when I was making tea in anticipation of my 2300 watch. I was pouring boiling water into my mug, but not holding on, when the boat lurched and I went flying backwards against a knob with the teapot in hand. I was able to place the teapot on the nav station desk before I crashed and felt immediately that I had fractured my clavicle (collarbone). As a physician I was fairly sure I knew what had happened. My first reaction was nausea, and then

*We planned to depart the Canaries in early January 2019. I arrived in Gran Canaria on the 1st and met Chris at the airport, so we shared a taxi to the marina where *Salacia* was docked and stowed our gear aboard. Chris was clearly an easygoing and capable crew member. After a few days of final preparation and provisioning we set off for Mindelo in the Cape Verde islands, since there was very little wind to take us west but enough wind to take us south until the butter melted.*



Checking the anemometer and antenna



I fainted. I recovered quickly, however, and ascertained that my shoulder, arm and hand still worked and, aside from intense pain, I was probably not badly injured. I insisted on standing my watch for a while to get some fresh air, then tried to sleep as best I could in whatever position wasn't painful.

Anne, Chris and Gareth in the Canaries

Front view of my arm and shoulder a week after the injury

The next few days were relatively pleasant, with lots of marine life and occasional ships to watch. Chris and Garet chased a leak that was causing the bilge pump to cycle, which was a concern for battery drain. It turned out that two areas of hoses (the engine exhaust and a through-hull vent for the heater) were not adequately sealed, but they were easy to fix. We reached Mindelo on 11th the harbour with gusts to 29 knots for the shower, where I was finally able to see my shoulder, which was covered in a deep-purple bruise that flowed down to my elbow. I checked some reliable sources to be sure that there was no real treatment for a clavicle fracture. Aside from pain on movement, so long as I took lots of ibuprofen I was fine.



January, navigating into during the approach. After docking I headed

Ilhéu dos Pássaros in the approach to Mindelo with 29 knots blowing

After adding to our provisions and resting for a few days we left Mindelo on 14th January. Again, we settled into our routine. We picked up the equatorial current for a nice ride, giving us a speed of about 5 knots. After dinner on the 16th we planned

to charge the batteries, but the engine wouldn't start, the starting battery registering only 4.7 volts. We deduced that leaving the starting battery's switch in the 'on' position had drained it, but luckily we were able to jump-start the engine and recharge it.

A panoramic view across the Canal de São Vicente towards Santo Antao



On the morning of the 19th Gareth woke me to come on deck – Chris was clearly not well. He admitted to having chest pain similar to what had caused him to have a cardiac stent inserted several years earlier. We knew nothing of this history. Chris had talked quite a bit about biking the hills of the Tour de France, running half-marathons and doing solo English Channel crossings on his small sailing boat. He had seemed like a very fit 58-year-old, and apparently had been given a clean slate by his doctor and was taking no medications. I questioned him about his medical history. His father had died at 60 and a male cousin at 50, both of cardiac causes – and I quickly decided that we needed to have him rescued. His pulse was faint, colour was grey and pain was evident and constant. I immediately gave him two aspirin, the only first-line therapy we had for him. It seemed pretty clear to me that he was dehydrated and that his stent, which was in a major blood vessel supplying his heart, was clotting off.

Chris had the phone number for the Maritime Rescue Coordination Centre at Falmouth, England and we called them on the satellite phone. They patched us through to a physician, to whom I was able to give a cogent history and review of the problem. They immediately agreed to arrange for a rescue with a boat-to-boat transfer. I sent Chris below to lie down, telling him to drink water and remain quiet. He was very anxious and clearly uncomfortable but declined any drugs to ease his pain. I was ambivalent about giving him painkillers, knowing there would be a transfer at sea that might require some agility, but thought they could have helped.

Falmouth MRCC asked us to broadcast a Mayday, which we did without any reply – we were pretty sure that there were no boats within range of our VHF radio. They also asked if we could turn back toward Cape Verde, but with 20 knots of wind behind us and very little fuel, any attempt to return nearly 500 miles would have been futile. We continued on after being told that *Frontier Jacaranda*, a 292m (958ft) freighter on passage from South America toward Rotterdam would rendezvous with us at around 0300 next morning. We began to communicate with the freighter via e-mail, giving our position every few hours. The captain explained his plan to position the vessel so that we would be in their lee for the rescue.

I checked on Chris regularly to be sure he wasn't feeling worse. I worried that his continued chest pain, despite the aspirin, indicated that the clot I suspected was continuing to further damage his heart. I tried to help him remain calm and gave him some information about what he might expect in the coming days. I explained that transfer home to Great Britain was unlikely until he was stable. I gently added that I thought this event would surely diminish his ability to do strenuous exercise, but that his exercise tolerance would be evaluated much later, once he was home and stable. We were both anxious, yet trying to be calm. What I found most disturbing was that Chris was certain that he had never been told to take daily aspirin, which would be the norm for patients with cardiac stents in the US.

Finally, at around 0130 GMT on 20th January, we hove to, waiting to see *Frontier Jacaranda*, having already spotted her on AIS. She appeared with all deck lights on, fenders lowered and crew along the rail. I spoke with the captain, explaining that Chris needed to be picked up in their rescue

boat, as had been arranged, since he was unable to engage in any sort of physical exertion. We dropped our sails and motored as close as we dared,

Frontier Jacaranda, the ship that came to Chris' rescue

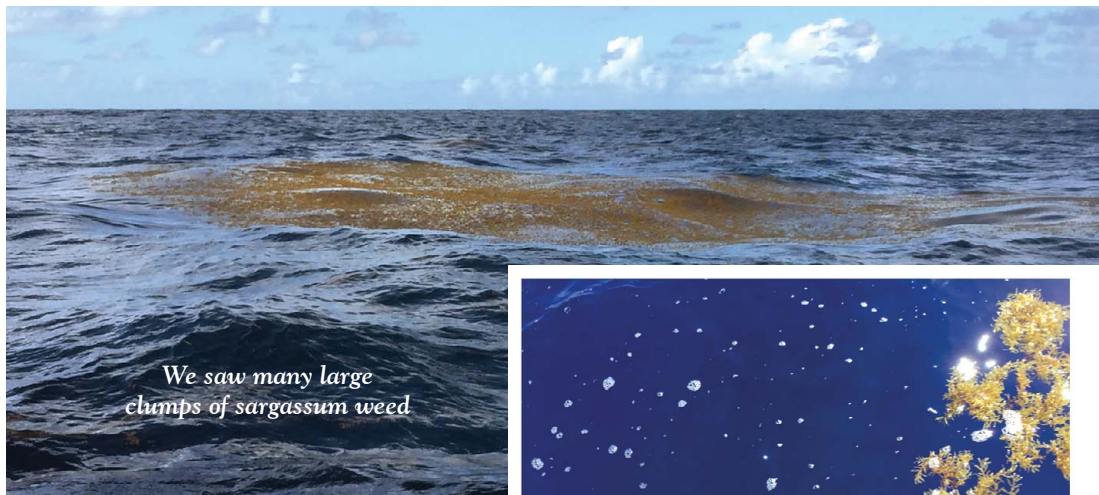


the freighter moving slowly as we came near. The rescue boat was lowered and came toward us with four crew and a huge bag of what looked like two-inch diameter rope. Despite my injured state, I was able to catch the line and tie it to our midship deck cleat while they approached and tied alongside. Chris left us, carrying only his PFD (lifejacket), wallet, passport and mobile phone. We watched briefly as they turned back towards their ship. It was about 0400 GMT. Although we were extremely sleep deprived we raised our sails and turned west just before sunrise. Now we were two sailors with at least 1800 miles to go.

The next two-and-a-half weeks were slow. Most of the time we had little wind (between 4 and 8 knots), clear skies, virtually no rain and flat calm seas. We saw shooting stars every night and flying fish all day. Sunrise and sunset were the usual beautiful offshore events. The only really overcast day and night, unfortunately, was during a total eclipse of the moon, an event I had been excited to experience in the dark skies offshore. Our routine of three hours on and three hours off was exhausting, so we set our phones to wake us every 20 minutes during the night to be sure we didn't miss an oncoming freighter. Otherwise we spent our days reading, resting and fixing things. A low-pressure oil alarm kept sounding off, but even though it seemed to be another alarm problem, not a pressure problem, we contacted the engine manufacturer via e-mail to be sure. Then the toilet seat on the vacu-flush toilet fell off and needed to be fixed in order to get the toilet to flush...

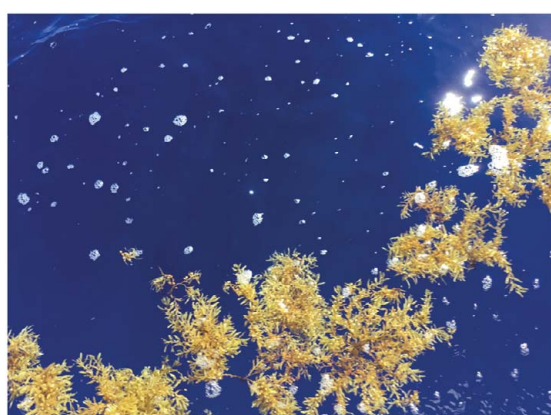
Each day our weather forecaster seemed to think we were about to have better wind, but it never happened. We sailed under poled-out jib alone and gybed to change course. It required a big effort from me to roll the sail in and out, but with just two of us there was no other choice. Dealing with the pole was beyond my shoulder strength. As we neared the Caribbean, we struggled with sargassum weed clumping on the rudder of our windvane self-steering, which created drag and caused us to veer off course. Ultimately, and with some effort, we were able to push it off with a boat hook, but the battle lasted several days and nights.

One of the many flying fish which came aboard



We saw many large clumps of sargassum weed

Sargassum weed in close-up, looking beautiful and harmless



We passed south of Barbados, having decided to make landfall on Grenada where Gareth has a house. Then I planned to fly home from the first port we reached so that I could finally get medical attention. We arrived in Grenada's Prickly Bay just after midnight on 6th February. My final job was to make a large loop and lasso a mooring as we came alongside it. It worked on the third try. Finally, we could sleep more than three hours! But first we tied up properly, opened a bottle of wine and celebrated. It was about 0900 by the time we awoke.



Salacia on a mooring in Grenada

I flew home the next day and was seen by an orthopaedic surgeon who confirmed that my clavicle had been fractured into many pieces. Surgery was not required and after several months of rehabilitation and exercise I was almost back to normal.

Chris survived. After two days *Frontier Jacaranda* reached the Cape Verdes, where he spent another two days in hospital before being air-transferred to Gran Canaria where he spent a further two-and-a-half weeks in cardiac intensive care. From there he was transferred back to the UK for continued hospitalisation. He received an AICD (Automated Implantable Cardioverter Defibrillator) in addition to intense therapy with a blood thinner, probably to protect against further clotting. When I heard from him a few months later he reported that he was starting cardiac rehabilitation. He explained that his functional status was quite limited due to a high degree of heart failure. He thanked me for having told him what to expect, saying that everything had happened as I had said it would. He added that his doctor told him that my care had saved his life. It is gratifying to know that he survived – not knowing the outcome, Gareth and I had worried about him for the rest of the crossing.

Gareth shipped *Salacia* back across the Atlantic and, once my shoulder had recovered, I went back to sailing *Etoile* in the Marion Bermuda race. I now carry a big bottle of aspirin on board – you never know what might happen!

Editor's footnote: The events described in this article took place early in 2019. During the course of correspondence in January this year the author mentioned, 'By the way, Chris is alive and well. I had an e-mail from him about a month ago'.

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