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Struggling to breathe

A Citrus High goalie plays his last game before undergoing surgery. Will he ever play again, he wonders.

By DAWN REISS
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INVERNESS

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A.J. Woythaler paces Citrus' goal. Dressed in a lime green jersey that looks like a turtle shell with its black patches, he dribbles the soccer ball with quick flicks of his legs. His shaggy blond hair mimics his movements. Up, down. Up, down. He does this 30 or 40 times before every game.

He isn't sure when he'll be here again. This night is the last time he'll play soccer this season, perhaps for a lifetime.

When - and if - the freshman goalkeeper returns is largely out of his control. Today he will have an operation that will take him off the soccer field but allow him to breathe.



[Times photo: M. N. Golden]

Citrus High varsity soccer goalie A. J. Woythaler suffers from a pectus excavatum, or inverted sternum. The condition results in a severe depression in the chest resembling a bowl.

Hidden under his jersey is a chest sunken from an inverted sternum. The cavity is so deep it looks like a meteorite hit Woythaler and left its imprint.

From a distance, it appears he is sucking in his stomach so much it almost touches his back.

The cause is a condition called pectus excavatum, a chest wall deformity in which several ribs and the sternum grow abnormally, producing a caved-in appearance.

Woythaler, 15, was born with it but never paid much attention. It wasn't a big deal to his friends, but by high school other students heard about his condition. Some would ask him to lift his shirt, so they could see. He's heard the freak-show alien jokes. At a party, someone joked he looked like a cereal bowl. So he ate Fruity Pebbles out of the cavity.

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Growing up, Woythaler was always the fastest one on the field. By seventh grade, though, he couldn't keep up. He would have to take breaks during games to catch his breath.

"People just thought I was bad at running," Woythaler said. "I didn't have a clue about what was going on. It made me think less of myself, because I was getting worse at sports. I thought I was just out of shape."

Frustrated, he spent extra time practicing. The 128-pound, 5-foot-11 Woythaler began eating healthier, ordering salads and grilled chicken while his family ordered burgers in the drive-through.

Nothing helped. He would come home from soccer practice at 5:30 and nap until 8 or even sleep until morning.

"I noticed he'd come home and sleep for hours," said his mother, Belinda "Lindy" Woythaler, Hernando Elementary's principal. "I just attributed it to him being a teenager."

She thought he might have been anemic but tests showed otherwise. She didn't think he had asthma since he didn't wheeze when he was struggling to breathe.

Then a large, round, bluish knot, slightly larger than a quarter began appearing on Woythaler's

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neck under his Adam's apple. It would randomly appear when Woythaler was lying on his stomach to watch television.

"Then he started telling me this thing is hurting me. It's getting too hard to breathe," his mother said. "If he pressed on it, it hurt for him to breathe. So I told him don't lay that way anymore."

Tests showed the knot was benign, but his breathing problems worsened.

"It was okay to tell him don't lay that way; it wasn't okay to tell him don't run anymore," she said.

They went back to the doctor, whom she asked if Woythaler's chest was normal. "He laughed and said, 'No,' " she said.

A pediatrician led the Woythalers to Dr. Andre Hebra, the director of minimally invasive pediatric surgery at All Children's Hospital in St. Petersburg.

Hebra was concerned about the long-term complications that can come with an inverted sternum. Most people develop noticeable symptoms shortly after birth or in early childhood, but about 30 percent, Hebra said, don't show signs until a growth spurt during puberty.

Woythaler had passed the ideal age 8-12 for surgery, when a child's ribs are most pliable, but was young enough - and severely enough affected - to be a candidate for an operation. Hebra, who said he does about 30 to 40 of these surgeries a year, said Woythaler's condition is unusually severe.

The surgery requires inserting a horizontal stainless steel bar that is rotated 180 degrees to bend the sternum and ribs. The bar is left in, along with another stabilizing bar, for two to three years.

"It's similar for braces for teeth where you are trying to remodel the appearance of the jaw and teeth by applying force in progressive fashion," Hebra said. "We do the same thing but it's not progressive; it's instantaneous. Ribs are malleable so we bend them just enough to reshape themselves without breaking them."

Having the bar in also means no contact sports, for at least a year, possibly longer, since a blow to the chest could cause the bar to flip and force another surgery.

"My husband and older son (Scott) were gung-ho (about the surgery)," Woythaler's mother said. "But I was having mixed feelings about it."

Woythaler still wasn't sure. He feared the procedure was dangerous but continued to gasp for air during routine workouts. The decision came after an October practice when he could run only two of six laps around the field. "I just couldn't take it anymore," he said.

He told his mother on a trip home from church. "I didn't realize how deformed I looked to other people," Woythaler recalled telling his mother. "And I just want to be able to breathe."

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The fog settles on Lecanto's soccer field. It's Friday, and it's Woythaler's last game for the foreseeable future. He's the last to run on the field. Citrus coach Steve Ekeli gives a quick tug on his jersey and reminds Woythaler to relax and have some fun.

Instead, Woythaler thinks about memories from the soccer field. He has been at home there since he was 6, making the leap to year-round teams the past few years.

Only a freshman, he's wrested the starting goalkeeper job away from a senior. Ekeli likes his talent and dedication.

"He's one of the toughest young men I've come in contact with, especially to be a freshman and have gone through what he's already gone through," Ekeli said. "You ask him what's wrong, he'll say, 'Nothing coach.' He doesn't ever want his condition to ever be in the way of what he's doing."

That shows, even in his final game. With 12 minutes to go Woythaler jumps to stop a shot.

He falls to the ground and struggles to stand up, clutching his chest. He can hardly breathe. The referees stop the game to make sure he's okay, but he continues. Before he knows it, the game is over and the Hurricanes have lost to Lecanto 2-0.

Woythaler had hoped things would end differently, especially against a county rival. The clock ticks to zero. Tears fill his eyes as he leads the team, walking two-by-two, off the field.

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by AJ

06/26/07 01:59 AM

thank you everybody for the comments, the surgery went well and im playing baseball if u know anyone with the problem and are thinking of getting the surgery contact my house 726-6973

by Gayle

12/26/06 11:02 PM

This is an interesting story, we also have a son with the exact same situation. He had the surgery to correct it three years ago. It is alot better but not perfect yet. Another surgery is still needed. Hang in there!!!

by Barney

12/19/06 09:38 PM

What a wonderful and enlightening story . He is a brave youngstor with lots of guts.God bless him



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