

Summit Fever

I was in a small tent, cushioned by pine needles, squeezed against my tall friends, outside of Rocky Mountain National Park in Colorado. I had a beanie pulled low over my face and a sleeping bag pulled up to my chin. It was July in 2020, but that night was a brisk 50°F. My friends and I, passing around a Nalgene full of beer, spent three hours debating our plan for the next day.

We'd hiked many fourteeners (14,000-foot mountains) over the past month. That night, we were trying to decide whether we should hike the mountain Longs Peak or another, less demanding mountain.

Longs Peak is notoriously difficult; about fifty percent of people turn around. Someone has died almost every year on the climb since 1915.

"We should do it," James, a former roommate of mine, said.

The group was inclined to dismiss James. A philosophy major, he was a First-Year Outdoor Orientation Trip leader at Yale and experienced in gauging risk. But he had also hiked two weeks alone in the desert, and on another occasion had encouraged us to only bring bars instead of real food on a three day backpacking trip. The scarier an outdoor adventure, the more he loved it.

Caitlin frowned. "Don't want to do it, I think," she said. She was an intense marathoner training for an Ironman, but she'd also hiked through half of Yosemite on a broken foot. These days she pushed her limits within reason.

I was all in. "I want to try a Class 3 hike." The rock climbing scale ranges from zero (flat) to five (straight vertical). Class 3 hikes are therefore known as "gentle" climbs, although many hikers opt for ropes for extra safety. We didn't have ropes, but this would be a new experience; it would be the hardest hike I'd ever done.

I'd loved the fourteeners we'd climbed. The ten- to fifteen-mile hikes were an emotional journey. At the beginning of the hike, before sunrise, I would be filled with anticipation. Halfway up I'd feel dispirited, knowing miles remained. Near the top, adrenaline kicked in and turned to elation at the peak. At the bottom I'd feel proud, exhausted, and relieved it was over. Since it would be a Class 3 hike, I knew climbing Longs would be more physically demanding than the previous fourteeners. I'd feel more accomplished. I imagined telling people how I had climbed Longs Peak — yes, *the* Longs Peak.

Rob and Alej, the other two in the group, were quiet for most of the discussion. Rob finally spoke up.

"Honestly, I think I'm prepared," Rob said in his soft Southern accent. He was an intensive climber, trained in wilderness first response. He'd led backpacking trips across the Appalachians and the Alps every summer of college. "But I'm not sure about the rest of us."

Alej nodded. As an Eagle Scout, he knew his limits, and ours. "We should start up the Longs Peak hike and split at the end to do Mount Lady Washington," he said. "It's mostly the same hike, we just do the peak right next door. It's easier."

At 3:15am, we woke up, the stars blazing above us. We dressed silently and piled into the car, inhaling Clif bars and bananas and instant coffee.

We arrived at the trailhead around 4am. We would need to climb up the peak and get back down before the afternoon storms would likely begin at 1pm. Our headlamps illuminated flashes of the pines and waterfalls around us. As we increased in elevation, the trees grew smaller until

only shrubs remained. After we had powered up 5,000 feet of elevation and 6.5 miles in three hours, no plants lived, just rocks.

The trail split at 12,500 feet, the base of Longs Peak. The trail on the left snaked up the gentle rocky slope of Mount Lady Washington, culminating just 700 feet later at the 13,281-foot summit (below the prized 14,000-foot line). No one was taking the trail up Mount Lady Washington. Towards Longs Peak, an imposing cliff towered above us. A steady trail of hikers in alternating red black blue windbreakers were headed up toward its base.

Mountaineers talk about summit fever, in which an overpowering desire to reach the peak takes hold once a climb has begun. Hikers with summit fever trivialize inclement weather, the path's difficulty, and even injuries sustained on the way up. To combat summit fever, mountaineers have developed a set of pithy phrases. "Turn around if it's no longer fun." "The car's the most important destination." "We're all in or no one's in."

We had decided on Mount Lady Washington the night before. But at the fork of the trail, Caitlin changed her mind. She wanted to hike Longs Peak, along with James and me. Now Alej and Rob were the only ones wary of the hike.

"On one condition," Alej said. "If anyone wants to turn around, they speak up immediately."

We turned up the Longs Peak trail. We scrambled over a slope strewn with sandstone boulders the size of small cars. While there was no plant life, we did spot the occasional marmot, grown fat on abandoned Clif bars and trail mix. I was grateful for my gloves and beanie as the wind whipped at us. My hamstrings stretched as I hoisted myself over rocks, and I envied my tall friends.

Ahead loomed a narrow opening in the rocks where the climb turned onto the far side of the mountain.

"Hey!" Rob shouted, waving us over. He stood next to a huddled figure underneath a reflective silver emergency blanket.

"I saw him lying on the ground, and that was an immediate wilderness first responder scenario flashback," Rob later recalled. "I was like, I need to check in on this dude. People don't normally just lay on the ground at 13,500 feet of elevation."

On the side of the mountain, we huddled around the man.

"Hey, you doing okay, dude?" Rob asked.

"Yeah..." the man said. His speech was muddled and his eyes stared off into space. We coaxed answers out of him. He had been in San Francisco the day before. Instead of telling him to adjust to higher altitude in Denver for a week, his Coloradan friends had brought him on this hike. He was out of shape, and his friends had not stopped for food on the way up the mountain.

Now he had altitude sickness: his vision was blurry and he struggled to breathe. His friends wanted to complete the hike, and told him to wait there.

Before we'd come across him, he said, a hiking nurse had measured his blood oxygen level and told him it was 79 percent. Normal is 97 to 100; values under 90 are low. Apparently the nurse hiked Longs in her free time, on the lookout for underprepared hikers like him. She'd determined he'd be fine, and left him.

We offered him water, trail mix, layers, Nuun electrolyte tablets, anything. He waved us on, telling us only that if we encountered his friends to tell them he was waiting.

On a rainy Friday in October a year later, I went to observe a Wilderness First Responder class at University of Vermont. I wanted to learn about why people get into tough situations in the wilderness, and what it's like for people to be alone without support.

The class was meeting in Camel's Hump State Park that day. Tall oak trees shaded the park in orange and red. Mountains peeked through the forest in the distance. The day was gray and cold. Thankfully I'd packed extra layers; I'd over prepared, determined to show the class that I knew something about wilderness safety. In the parking lot, twelve students clambered out of pickup trucks, sporting muddy hiking boots and torn up Patagonia backpacks. They would be certified as Wilderness First Responders at the end of the semester-long course.

"The point of today is to put the skills you've learned in class into practice," the teacher, Patrick Malone, said. Pat is a stout, graying outdoorsman, who had been teaching UVM's course in wilderness medicine for over thirty years. Over the course of the day, he told me many crazy rescue stories. Once, he held a patient's head to stabilize their neck after they slipped on ice; his hand went through their skull and touched their brain. Another time, he hiked someone with a broken leg out ten miles from the deep woods, the whole journey taking over twelve hours.

"First, we hike," he told the group. "We're going to practice carrying someone out of the woods."

He sent half the class to pull out a bright yellow plastic stretcher from his pickup truck. On top of the stretcher lay a plastic, 170-pound dummy Pat called Frank.

The students groaned at Frank's weight as they pulled him out of the car.

We hiked up the muddy trail for an hour. Every fifteen minutes, the class swapped who carried Frank. Whichever six people were carrying Frank complained the whole time, and constantly negotiated foot placement and the height at which to hold the dummy. It's awkward to carry something large and heavy, sharing the load with other people, over roots, rocks, and other obstacles. Frank was the perfect useless injured patient, staring up at the sky with glassy dead eyes.

As they hiked, I asked the students about their experience with the class.

"I spend lots of time outdoors," said Sadie, a small, smiley girl. The two of us talked about shared experiences skiing, mountain biking, and climbing. I asked her why this class, in particular, as opposed to another outdoors class offered at UVM. "I want to feel prepared for the one percent of time when something goes wrong," she said.

The main event of the day was practicing responses to an encounter with an injured hiker. At one point, a soft-spoken blonde, Eliza, was the injured patient. Pat pulled her aside and explained her injury and behavior.

Eliza walked off trail and draped herself on the ground next to a tree awkwardly. The rest of the group walked up to her. Sadie knelt down, echoing Pat's instructions to "get on their level."

"My name's Sadie," she said. "Can I treat you?"

There's a litany of things to run through as a wilderness first responder. The first step is checking whether the patient is awake, verbal, and either responsive to pain or unresponsive. Then, they helped Eliza sit upright.

"Eliza is lying down — we need to worry about her spine," one student said. They'd erred by helping her sit up without checking for spine injuries. "Let's do the exercise over again."

Each time they forgot a step, they started the scenario again from the beginning and incorporated each other's feedback. Around the third try, they'd gotten to the point where it was

time to start treating Eliza's "injuries." After palpating her body, they found a broken leg and a note on her hand that said "very bloody."

"Can someone splint and someone else wrap her hand?" Sadie asked the group of four students.

One student corrected her: "You need to tell people exactly what you want them to do. Point: You do this; you do this."

I was impressed by how much focus they gave the exercise. If I were injured and not surrounded by people who knew what they were doing, a minor mishap could become terrifying and lonely.

When they'd finished caring for Eliza, wrapping her up in clothing and giving her water, Pat came in to check on their progress.

"You guys forgot to write down her vitals for when the ambulance arrives," he said. He knelt down and lifted up Eliza's leg. "The splint looks great."

After Pat stood up, the group unwrapped Eliza's leg. Sadie grasped Eliza's arm and hoisted her to her feet.

On Longs Peak, after saying goodbye to the hiker with altitude sickness, we climbed over the boulder field onto the back side of the mountain. In front of us lay a 1,000 foot drop, with the narrow path continuing up one side of the cliff. The Rockies lay spread ahead of us. We paused a moment for photographs, stunned. The rocks had changed; instead of easy to hold sandstone, they were now slick gray shale.

We continued on. Now, we had to use built-in steel ladders to pull ourselves along on a three-foot-wide path. The temperature was just above freezing, but I took my gloves off to better grip the slippery rock.

At 13,500 feet, one mile from the summit, we encountered the most challenging move yet. The path turned into a narrow ledge that passed right next to the 1,000 foot drop. A green carpeted valley spread out thousands of feet below that drop. To continue onwards, I would have to grip the rock, facing towards the rock but with my back leaning towards the cliff, for about four steps.

Rob later described the corner. "It's freaky. Until you actually physically get half of your body around the corner, it looks like you are going into the void."

I knew that this move would be easy on the ground. But I was nearly 14,000 feet in the air and I didn't want to fall.

In front of me, Rob had already nimbly passed over the ledge.

Rob turned around. "I'll spot you." He stood on the very edge of the path, arms out, as I passed between him and the rock. In spite of my claw grip, the slick rock glided under my hands.

On the other side of the ledge, I tried to catch my breath. The dazzling view had turned terrifying. I turned and put my head in between rocks to avoid the sight. Meanwhile, Rob had already spotted Caitlin across; James and Alej had no trouble.

I was stuck in place. I sensed that they were waiting for me, but my friends said nothing, joking with each other instead.

I have no memory of what happened next, but later I learned that while I was breathing, a group of five men came from below. My friends asked if any of them were John and Doug, the friends of the man who had lain alone in the boulder field. None of them were.

The first four passed the ledge easily. The last man paused before the move. He stared at it in fear, as I had.

“You can turn around,” Rob said to the stranger quietly. “This is supposed to be fun.”

“No, I have to,” the stranger told Rob.

Rob spotted him across the ledge just as he had spotted Caitlin and me and told him where to place his feet. The man continued up the mountain.

Through all this, I stood with my head in the crevice, silent. Eventually someone brought up the topic that had been floating on the periphery of conversation. Was it time to turn around?

At first, everyone was quiet. I suspected James wanted to bag the peak. Caitlin was determined to prove that heights no longer bothered her; I knew that the last time she did a Class 3 hike, she had trembled like me.

With my head between two rock crevices, eyes forced away from the valley below, I wrestled with myself.

I knew I could do the moves. Going forward was not a question of skill. But I wasn't sure if I could shake the deep fear of falling that had taken hold of me. We'd only gone half a mile of the one-and-a-half miles up, and the final mile would take over an hour. According to the trail map, this crossing was the worst of the entire climb. Even if the rest was easier, I was already dreading crossing back over the ledge.

After some time, Alej said, “I don't think this is fun, I'm happy to turn around.”

We went back. My heart sounded louder and louder in my ears as we approached the crossing. My hands, bereft of gloves, dripped sweat.

Rob spotted me across the ledge again. I didn't look down, placing every thought into the feeling of my hands against the rock, my feet on the ledge.

I'm grounded, I thought. I'm grounded.

On the other side, we paused.

I'd crossed the ledge twice. But tears began leaking down my cheeks as we descended. I blamed my emotional response on the lack of sleep, the physical effort, the low oxygen at high altitude.

The tears didn't stop.

“That was when you started — I don't like to use this word because it's gendered but this is the best way that I can say it — you really went hysterical,” Rob said over the phone. “Really were openly wailing, crying.”

It's possible I screamed. I leaned back against a rock wall. My mind filled with images of my friends slipping, falling, with blood spurting out of their heads at the bottom of the ravine. Caitlin, grabbing my arm as she collapsed. Alej, tumbling down rocks. James, impaled on a stubby pine tree below. Rob, neck sideways.

I began breathing fast, loudly. My palms were sweaty. I noticed how odd it was that these thoughts arrived after I'd completed the hard move twice. It was only down from here.

I climbed up onto a rock away from the path. The visions in my mind's eye felt so real and I didn't know how to make them leave. Rob sat down next to me, took my hand, and placed it on his chest.

“Breathe in when I breathe in, and breathe out when I breathe out.”

I felt his chest rise and fall, first with my eyes closed, then staring at my hand placed on his chest. I followed along. My focus narrowed. His chest, my breath. His breath, my chest.

The image of my heart pulsing helped displace the images of my friends dead on the ground.

When we left, I followed my friends' path down and placed my feet where theirs landed, and moved slowly before regaining my confidence. I followed them for an hour before I felt ready to no longer step in their tracks.

After the climb had turned back into a hiking path, I headed towards an outhouse. Rob told me that when I was gone, James asked if he was okay.

"I let out a massive exhale," said Rob. "I said, 'Whew I haven't had to do that in a while.'"

On the way down the mountain, we encountered hiking groups who were still on their way to the peak. On the way up the mountain, we'd sped past these same groups. We'd felt like super hikers, moving fast and not breaking a sweat.

"Wow, you guys were so fast earlier, did you make it to the top already?" Five or more groups asked us variations of this question.

I watched my friends reply that no, we didn't, we couldn't make it. Humiliation curdled in my stomach.

The other hikers nodded, their faces dropping. I knew what they were thinking: That won't be us. We're better prepared, we'll make it to the top.



Camel's Hump State Park



The students practicing hypothermia wraps. Eliza is on the ground; Sadie is next to her in the

yellow coat.



Longs Peak, right after the panic attack. Alej is taking the photo. From left to right, behind him: James, me, Rob, and Caitlin.