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LEGION OF MERCY

Scott Coleman is one of a corps of dedicated pilots who give sick patients free flights to better care



"It's a unique way to help," Scott Coleman (right) says of flying little Erika Carlson and mother Melonie (above, left) to Boston for a week of vital medical tests and treatment.

AS PONYTAILED SCOTT COLEMAN guides his twin-engine Cessna 310 toward the runway of Boston's Logan Airport, Erika Carlson can hardly keep her seat. "We're gonna land!" squeals the delighted 6-year-old, throwing her hands in the air. Erika, who was born with a life-threatening disease, fell ill in 1991. At first her parents, unable to afford air travel, had no choice but to drive 12 hours from their home in Caribou, Maine, to the closest specialized treatment, at a hospital in Boston. "By the time we got there, she was exhausted,"

says Erika's mother, Melonie, 38. "She can't handle that kind of trip." Now, with the help of pilots like Coleman, that's one less trauma Erika has to endure.

An air-traffic controller and amateur pilot, Coleman, of Hampton, N.H., is one of an unheralded air force of 832 who donate their time, planes and thousands of dollars in fuel and operating costs to shuttle patients to hospitals around the country for free. For Coleman, 34, who shares a three-bedroom house with his wife, Kim, 33, and their 2-year-old son, Liam, such trips don't come without sacrifice. Flying the Carlsons to Boston



costs \$1,200 in fuel, insurance and maintenance fees—money he needs to repair his 1989 Audi Quattro and buy new tires for Kim's 1991 Isuzu Trooper. But the cars could wait; the Carlsons couldn't. "They're going through so much," says Coleman. "I can't see being able to help somebody in a way like that and not doing anything."

For the Carlsons the flights have been "a real lifesaver," says Melonie. Married in 1982, Melonie and her husband, Dave, 44, were told by doctors that their chances of conceiving were slim. But Erika was born in May 1990. "We consider her a miracle," Melonie says. Then, 17 months later, Erika began vomiting heavily; she became lethargic and unresponsive and couldn't

stand without falling over. "We wanted some answers, and the doctors up here were like, 'Gee, we've never seen anyone like this,'" Melonie recalls.

Eventually they found answers in Boston, but the kind no parent would want to hear. Erika was diagnosed with a mitochondrial disorder, an insidious ailment that interferes with the ability of her cells to convert food into energy and impairs many of her bodily functions, leaving her with an array of problems, including asthma, nearsightedness and seizures. "There is no cure," says Erika's physician Dr. Frances Dougherty. "We can manage the disease for as long as these kids live." The life expectancy for children like Erika varies, but sooner or later the disease will kill her. "That's the hardest thing to deal with," says Dave. "You hold her, and you love her. You do whatever you can for her. But we know this is going to happen to her, and she doesn't."

The family's problems were complicated two years ago when Melonie lost her job as director of Child Development Services for Aroostook County in Maine—and with it the family's health insurance. Since the Carlsons' medical bills average more than \$2,500 a month, Dave, a research engineer who specializes in grinding-wheels used to sharpen knives and automotive parts, was forced to close the consulting business he ran

from home and find work that offered health benefits. The closest job he found was in Westboro, Mass., 447 miles away. He stays with his sister in nearby Marlboro, living on \$20 in pocket money and sending the rest of his paycheck home. The family would move, but Erika, who is enrolled in a state-administered federal insurance program that covers medical therapy and hospital stays, would need to live in Massachusetts for 60 days in order to reestablish her eligibility—a gap in coverage the Carlsons don't dare risk. Four times a year, Erika must travel to Children's Hospital in Boston or Shriners Hospital for Children in Springfield, Mass., for tests and treatment by as many as eight different specialists. The drive soon became too much to bear. "[The doctors] were seeing her at her worst," Melonie says.

Then, a few months after their first visit, the Carlsons heard about AirLifeLine from a woman sitting next to them on a plane trip to Florida, where they were going to see Dave's parents. Now they're frequent flyers. And while air travel can't alter Erika's prognosis, it helps the Carlsons "to try and make her happy for however long we have her," says Dave. That's a sentiment Scott Coleman understands. "Now that I'm a father," he says, "I just imagine my son needing that kind



▲ Slow motor-skills development was an early sign that something was wrong with Erika (right, at school in Caribou with teacher Debbie Nelson and classmate Justin Gauvin).

► "Their lives can be very difficult," says Boston Children's Hospital physician Dr. Frances Dougherty (treating Erika in September) of children with mitochondrial disorders.





▲ “We’re comfortable, but we’re not rich by any means,” says Coleman (with wife Kim, son Liam and pooches Sammy and Norris).

of help and nobody being around.”

In fact, compassion is something Coleman grew up with. Raised in a housing project in Middletown, Conn., Coleman was always looking out for the younger kids, recalls his mother, Deborah, 52, now a sheet-metal machines operator at a factory in nearby Deep River. “If there was a kid that was an underdog, he was pretty good about befriending them,” she says. As a teenager, his grandfather Bill Coleman remembers, Scott worked in a convalescent home: “And on his time off, he used to go and visit some of the patients. That’s the kind of boy he was.” Though his own family always had food and heat, “there were things we did without, and when I was younger we didn’t have much contact with my father,” says Scott, who lived with his mother and younger brother Brian after his parents divorced when he was 3, then moved to live with his father at the age of 12. “Looking back on it now, I don’t think it was the greatest way to grow up.”

At the time, though, Coleman had his head in the clouds—searching for

planes. “Ever since I can remember I’ve been fascinated with them,” he says. “I always thought I wanted to be an airline pilot.” Then the 1970 disaster-movie *Airport* changed his mind. “When they were in trouble, [the film] would cut away to this circle up in the corner of the TV, and they would have somebody with a headset on talking to the pilot,” he explains. “I was like, ‘Wow! What are these guys doing there?’” The pilot got the glory and the girl, but as Coleman saw it, the air-traffic controllers really saved the day.

They also won a recruit. In 1981, a year after graduating from Woodrow Wilson High School in Middletown, Coleman began a 7½-year career with the Air Force, first as a jet-engine mechanic, then as an air-traffic controller. In 1985 he fulfilled his other childhood dream by earning his pilot’s license. Then, five years ago, when he was working for the FAA in Portland, Maine, Coleman noticed an ad in an aviation magazine for an organization called AirLifeLine. By that time the Sacramento-based network had been ferrying pa-

tients for seven years. “There were so many people out there willing to volunteer their resources,” says Tom Goodwin, 52, president of his own printing and graphics corporation, who started AirLifeLine in 1978 initially to transport donor organs. “All they had to be shown was the way.”

Coleman heeded the call and now flies three or four missions a year—as much as the family budget allows. “If he were to say, ‘I’m going to fly somewhere for fun,’ then I might say something,” says Kim, a dance instructor and ASPCA volunteer who met Coleman when he signed up for ballet classes at her family’s Seabrook, N.H., dance school in 1985. “But I wouldn’t think about denying [AirLifeLine].”

That’s good news for the Carlsons, who “really could not have gotten by without it,” says Dave. That’s all the incentive Scott Coleman needs. “When you can see how much it means to somebody,” he says, “it just makes you want to do it more and more.”

■ ANNE MARIE O’NEILL

■ LORNA GRISBY in Boston