Weekend MAGAZINE



Intrepid couple takes adventure to new heights

AFRICAN ODYSSEY

hat am I doing? This is the question haunting me while sitting in a tent, physically shattered, on the other side of the world. It's only 2pm and the exhaustion is so great I just want to go to sleep, but my guide won't let me. Tumaini, Swahili for hope, is urging me to eat,

and eat, but I've got zero appetite because of the fatigue and effects of altitude.

I contemplate how I came to be in this situation.

It was growing up in East Maitland that I can first recall hearing the name Mt Kilimanjaro. I was 10 or so watching *Sale of the Century* when Tony Barber asked the contestants "What is the highest free standing mountain in the world?" I thought "what a weird name" and forgot about it

until I met a girl from across town years later.

It meant little to me that at 5895 metres above sea level Mt Kilimanjaro was a dormant cluster of three volcanoes a few degrees south of the equator in Tanzania, Africa. So I was surprised that anyone with a modicum of fitness could climb it— walk it is really a more apt description—barring dreaded altitude sickness.

"Climbing Kili" as Alysia would describe it, was something she would talk about from time to time when day dreaming about our next holiday.

I don't know how she planted the seed, but I was now looking at my wife across a foldout camp table and she looked worried. The fried chicken and chips just glared at me, goading me.

icken and chips just glared at me, goading me. "How do you think they managed to cook this?" Alysia wonders out loud trying to distract me. It's an interesting question given we're at 3500m and there's no way one of our nine porters carried a deep fryer up here when there's no electricity

What worries me more, at the end of day two, is how I'm going to climb this geological marvel with four days yet to come.

Altitude sickness, or acute mountain sickness, is the result of exposure to low partial pressure of oxygen at high altitude.

It commonly occurs above 2400m and presents as a collection of non-specific symptoms. It is generally experienced as nausea and headaches but can progress to lifethreatening pulmonary or cerebral oedema.

My biggest worry at this moment, however, is this meal Tumaini insists I eat. If I don't, months of preparation and thousands of dollars will be wasted. He knows it, I know it, so I begrudgingly chew another mouthful.

We booked our expedition with Tumaini Sandi, the Tanzanian managing director of Majestic Kilimanjaro, in February after considerable research (yes, we surfed the net a lot).

There are many tour operators but only a handful that offer a wide choice of routes up the mountain – there are six in use – while catering to small groups. Just the two of us

small groups. Just the two of us.
"Just eat half the chips," Tumaini urges me. I
want to scream at him but he's just too nice about it.

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