

# Memories of the Covid Ward

As they say here: “Sh\_t happens’. One never believes it will occur on your watch and it will affect one’s life in ways that cannot quite be imagined. But occasionally it does.

We are talking about Covid. Below you will find the kind of “memoirs” one would rather not possess. But life doesn’t ask for permission. It just happens with you or anyone else, seemingly out of the blue. And then you are infected.

It starts small. A bit of slightly irritated scratchy throat (how strange, didn’t have any cold drinks lately, no sitting under cold A/C air). A bit of a runny nose. How weird. You still cannot recognize what is taking place and try to go on with your life as usual. Then you notice a fever. A fever that doesn’t show up in aches and pains one would get when the body temperature goes up. No, you still go on with your life as normal, even when it goes up to 101°F (38.5°C). You just stop eating, have no appetite for any food. Your brain is clear, your body works mostly as before, and unless you measure the body temperature, you wouldn’t know. The discomfort is minimal. You sleep normally. This is one facet of this illness that kills so many people. It suppresses body’s immune system reaction. The body doesn’t fight it as it normally should. And by the time immune system recognizes the danger, and the lungs are giving up, it may be too late. We read about it before, but did not connect the dots when it caused us to falter.

Then a doctor’s visit and orders a blood test. It takes few precious (and wasted) days for the results to come back. They reveal nothing. By that time you have trouble walking down the building’s hallway and your strength is waning. The brain is still clear. Call your doctor, who tells you to go to the hospital immediately. You call an ambulance and tell them you will walk outside the building to meet them. In reality you don’t have the strength any longer. Grab the phone with charger, some money, ID. They show up, put you on a stretcher and cart you out. Oxygen is administered once the van begins to move; to the medical facility – a small hospital nearby – an affiliate of a much larger hospital in another part of town. Entire trip takes about ten minutes. The streets aren’t congested; you are admitted and answering many questions, show your driver’s license and insurance card; quick nose swab, blood test. A room for one, oxygen mask, connection to the monitor that shows your heartbeat, self-inflating cuff to measure your blood pressure around the clock and a finger oxymeter clip to monitor how your lungs absorb the oxygen, a.k.a. dispersion). They stick a

needle in your arm and fortify it with tape – this is for IV, which they immediately begin to administer. You are yet to see a doctor or doctors, they will come in by morning.

Nurses on shifts, attentive and responsive, come by on their own, existing, yet unseen schedules. And so do doctors responsible for your well-being. You pick out one or two, main ones, one of whom is your treating physician and another – apparently a lung specialist. And then, as time progresses, you see multiple other persons. They wave at you through the door's glass, as old friends; come in to ask few questions, maybe change your IV packs and disappear, never to be seen again. There is an order to all of it, but as a patient you have no idea if this is random or ordered by an invisible someone, who commands these motions. It is this constant flow of people, around the clock, who come to feed you, examine you or ask questions, administer medicines or procedures, clean the room, respond when you summon them for something or come in when you for one reason or another detach yourself from the monitoring system. Covid is an illness that imposes tremendous material strain on the medical establishments. Medical personnel comes into the room for a minute, but must don fresh gloves and garb, which instantly go into the garbage bin once they leave you. Imagine that on the nation wide scale. Millions upon millions of pieces of protective clothes unceremoniously dumped every day, for the last two years.

You don't see much through a small window located high up on the wall, only if it is day or night, sunshine or not. There was Wi-Fi. Could have brought a laptop to do work. So the best we can do is to respond to people calling and asking business questions or sending texts. You are really out of the circle of life, detached and partially disconnected; inside the ICU unit or a regular room for two. The worst part is? You are suddenly seized by the thoughts that you may never walk out of there alive. And no, the thoughts of death are not scary. What is scary is how many people who depend on you would suddenly be left to make do having no clue what to do next if you are gone. You have unfinished business that would never be finished. You have left no instructions for next of kin and friends; what to do next if you are gone. The logins and keys that they would have to discover on their own to gain access to accounts and places, to dispose of what you left, and sudden unwanted complexity of what to do with your life's material attributes you leave behind. It's not only about "the last will and testament". More like "turn on laptop, look up directory and click on the file named. Walk over to the desk, open up the bottom drawer and find – whatever" to read exactly what you want them to do and how. So the ensuing chaos can be untangled and pacified by the caring words you leave behind; they will put it all in order. I never thought about it before, but now I do. If you have never given a hoot, now is the time. Not when you are sick. Now.

Late evening IVs run out after midnight, with ensuing nasty loud beep signals emitted by the monitor, interrupting your sleep much like hourly-activated self-inflating cuff of the blood pressure monitor. You wind up catching only 4-5 hours of sleep. Interestingly, they bring you little water and you must ask for it to keep the thirst at bay. IV liquids subtly demand exit from your body; you constantly walk over to the bathroom to relieve yourself. The food is surprisingly tasty, but with low salt contents. When I left the hospital slightly short of a two week long stay, I lost almost 40 lbs, much of which was apparently water.

Covid leaves you with skewed sense of smell and taste (if you are lucky not to lose them altogether). Foods don't taste the same. The virus plays nasty tricks with your mind – you can become quite angry, without realizing what you are doing. Insulting someone on the phone and not remembering how it happened is easy, it happened to me also. Watching ordinary TV programs would be frustrating. Your friends call you and want “health and welfare” reports. You describe what took place this day, who said what to you and what you understood and what you did not. Doctors just do their duty during one or two-minute visit; they are not there to lecture you on the intricacies of your illness. They will answer your questions if you know what to ask, and often you don't – feeling dumb afterwards, on the phone. In the Covid ward you are allowed no visitors, no one can come to see you. You wouldn't want them here anyway, exposed to the danger.

Good friends and their friends prayed for me and for that I'm grateful.

My lungs were over 50% affected. This meant that from the moment I was admitted, I had an oxygen mask on my face, around the clock. Just oxygen I'm on and not an “artificial lung” which would have been devastating if not deadly. They tried several different masks on me, until they settled with the one that had two short tubes going directly into my nostrils. In the beginning they kept oxygen at high levels and only later, gradually, seeing that my lungs are working, reduced it down to 40%. They had administered Remdesivir as IV into my arm, but also Nebulizer – a vial with medicine – that was attached to a mask – and hissing with cold “fog” while I was breathing it in for 20-30 minutes, until the vapors ran out. I had daily shots administered in my stomach of medicine that prevented blood clotting. I received anti-cough syrup daily. The “lung” doctor brought in a simple medical device (Trifoil II) that had three clear plastic cylinders with balls in them. The cylinders were inter-connected and you had to suck the air through attached tube to raise the balls into the air inside. It was a good exercise for my lungs that needed action, to breathe freely again. I had to do the exercise few times a day, for several minutes. I know it helped.

There must have been other IV medicines, but I don't know what exactly. Nurses would just show up, hang the pouches with liquids and plug them into my arm; and the drips would last from 20 minutes to an hour. At one time a medical technician with a "portable" X-ray machine walked in. It was a size of a copier on wheels. He placed an X-ray negative in a flat box under my back and took a picture, pointing the unit at my chest. Another set of chest x-rays was taken prior to my release from the hospital. I was taken to the full-size X-ray machine and stood up while they took pictures.

There was television in every room I stayed at, with limited number of channels. Tokyo Olympics with empty stadiums were on but totally unwatchable. I generally don't watch TV, but this was an interesting "cultural experience". The most watchable was quasi-reality show where younger guys, in their 20 and 30, commanded by an equally young fellow with a black bushy beard growing right from under his eyes, rebuilt seriously vintage cars – from rusty old junk to shiny polished fast vehicles – worthy big bucks at Texas auctions. It later occurred to me how much of it must be staged and not real. Where do 20-year olds gather so much experience that they can ID correct replacement parts for cars that are over 40-50 years old and no documentation exists (at least none was shown)? On the screen everything fell into place as if by magic. The other show was about some poor wretched souls, stuck in the middle of nowhere in some God-forsaken places in mid-America. They were all fighting the forces of Nature, to make a buck, to grow food or raise chicken on their hilly plots and not doing it correctly. Then an expert, a burly man and his equally physically fit daughter come to the rescue. Then with the help of few other men and earth-moving equipment the hills get rearranged; homes and fences re-built, rainwater or brooks re-routed away from the property. Quick thinking saves the day. When you watch it, with nothing else to do, eventually it drives you mad, angry. I found regular TV makes you feel very hollow and stupid. What can you possibly learn from the show about several trouble-filled lives of modern moonshine bootleggers in West Virginia? After awhile, you just feel angry. Even though none of the above has anything to do with the treatment you receive, it adds another dimension to the hospital stay and your own state of mind while there.

A lady doctor who popped up towards the end of my stay (I never saw her) instantly wanted me to remain at the hospital 2-3 days longer. I was breathing on my own with little external oxygen, the fever was long gone, my oxygen lung dispersion was good and I felt that I could do just as well at home. She never spoke to me before, but just came in and told me that I must remain where I was, and walked away. I decided that her reasons had more to do with hospital finances as opposed to my health issues. The next time I saw her was two days later when I announced to the nurses that I was promised a discharge and today

is the day I would be released. I refused all medicines that day, no nebulizer and no IV. I also demanded to see a treating physician. She came to see me few hours later, heard my reasoning and ask assistant to verify my lung dispersion rate. It was fine and she gave orders to have me released. It took another 3 or 4 hours. At the end, I took the bull by the horns, asked to be walked to the exit and called a taxicab from a cell phone.

Twenty minutes later I was on the way home, sweet home – and my life. The complete recovery took at least another month – between breathing exercises, getting rid of anger (Covid leaves you with this psychological strain that eventually goes away). You know you have things to do, but you would just sit there and look at the same spot, unable to move. In time, the brain prevails and forces you to get up and do things, but you must push yourself constantly. In time it, too, goes away and pushing is no longer required. Food began to taste more like it should. Felt happy to shave off the two-week old beard and sort of liked what I saw in the mirror. The short-term virus consequences are gone, but one never knows what other booby-traps are left in your body and what would trigger them. But we live one day at a time. At least we don't have to think about vaccination – anyone who survived the virus has stronger immunity than the vaccinated crowd. We'll leave this explosive subject for another time and place.

To sum it all up: the whole ordeal lasted almost 2 weeks; hospital stay was FORTUNATELY covered by medical insurance and probably cost upward of \$200K (we never saw a bill, so this is our own guess)

Hey, stay safe out there and stay alive!