

COVID Vignettes

Perle Feldman

It is my hands that seem most strange to me. Even four or five months into the pandemic, I catch sight of them, and they would look foreign and not my own. They are still the same broad, short “peasant hands” as my mother called them, but now they are naked. My left hand still bearing the faint imprint of my wedding ring embedded in the flesh after forty-four years of continuous wear, but the flash of gold and diamonds is gone. My jewelry, including my signature pearls, have been removed as dangerous, virus harbouring fomites. My fingernails and cuticles are ratty and irregular, the incessant washing and sanitizing exceeding my almost non-existent manicuring skills. My hands have also been uncharacteristically idle.

Fear-2 Sadness-4 Anger-1

Rating Scale: 0-5

April:

I have not had my own “womb to tomb” practice for a few years now, I was still delivering babies and teaching some procedural skills as a family medicine professor and clinical supervisor. Now in the pandemic's initial lockdown, my obstetrics group has banned me from the labour and delivery suite.

“Cedric doesn’t think you should go into the hospital,” says my partner Laura, quoting her Infectious disease specialist husband.

“We need you to be safe until this is over,” says Deb, our group organizer. “We can’t afford to lose you, the group is big now. We can cover you.”

Initially, I resist. Why would I run away from my life's work? Then I become insecure. Is this the group's way of gently easing me out of intrapartum care? Finally, I become rational. At my age, with my co-morbidities, with my family responsibilities, I should not be working in a high-risk environment at the highest risk hospital in Canada. I call Deb back and let her know that I will not be taking calls for a while. Then I lie on my bed and cry.

Fear-4 Sadness-4 Anger-2

May

Walking in the park with my husband, my eldest daughter and her children. I have not seen the children in real life for weeks. Staying masked and socially distant, we play hide and seek with my grandson. My 8-year-old granddaughter has been talking on her play cell phone the whole time. She is in deep discussion with Dumbledore, Harry Potter, and Professor McGonagall about her upcoming imaginary attendance at Hogwarts. She worries about how the school will deal with COVID and is very relieved that there will be spells at the castle to protect her. At one point, she runs to me and buries herself in my lap. "Sweetheart," I say, as I surreptitiously kiss her hair, "be careful, it is not safe for us to hug."

"But Bubbie," she replies, "I feel safest when I am hugging you!"

On the plus side of the lockdown, my husband, just starting his retirement, is now dedicated to cooking meals for our family. Building on our longstanding tradition of "conception: Perle Feldman, realization: David Glaser," we plan meals together. Our only outings are to the market, we visit our usual vendors. They worry about their survival and are grateful to see us. Dave produces exotic dishes and old favourites, which he delivers to the two daughters who live here. This helps the young couples with work and childcare under the lockdown. Now we never go

out, so we feel entitled to spend all our delicious and expensive ingredients. I think his cooking is better than takeout, even from some of the best restaurants in the city. We dine on Ottolenghi quails or Ma Po tofu.

I am curled up on my corner of the couch for hours a day. Listening in on a three-way call, or getting a telephone report on the case, I feel very uncertain. I know how much can be missed without direct observation. I worry about patients' care, the residents' learning and my responsibility to the university and the public to help train effective, empathic clinicians. Will we all be OK by the end of this?

Seeing prenatal patients is the only clinical work still partially done in person, though some encounters are on the phone. I do some visits on site and supervise the in-person visits of the residents. There is now a whole ritual of wearing scrubs, masks, gloves and visors, wiping down the room between patients, stripping and showering when I come home. I get home, and all I want to do is collapse on the couch and watch mindless TV, like cooking and home renovation shows because they are about creating order.

There is so much anxiety, so much fear and so much anger engendered by some of our hospital's policies, particularly the decision not to allow support people, even husbands, into Labour & Delivery. Patients have left my care because they do not want to deliver isolated and alone. Other hospitals have not followed suit. One of the women who moved to another hospital was one of the babies I helped bring into the world. I wanted to complete that circle. Now it is not to be.

Fear-3 Sadness-4 Anger-3

June

The nurse comes to me. “Can you please call Mahmoud? He does not sound well.” Mahmoud is the husband of one of the prenatal patients. A garrulous man in his sixties, he is married to his second wife, Shahida, who is less than half his age. Mahmoud has five sons from his first marriage. Left motherless when his first wife died of breast cancer, some were adults in university, but the youngest was seven when he remarried. He was seeking a mother for his children but has unexpectedly fallen in love. His wife speaks almost no English, but it is clear that she is no pushover, and she sometimes fondly teases him.

He is a very successful man, respected and connected in the community. He owns a small clothing factory. It may be the same space where my great uncle had his factory years ago. “I did not want another child,” he confides in me at a visit, “but how can I say no when she wants her own baby.” We find out that the baby will be a girl, Shahida’s warm, round dimpled face, framed by her hijab, breaks out into a huge smile. “You see,” I said to Mahmoud. “Now, you have a daughter to love you in your old age.”

“She will have all the best,” he says to me, tearing up. “She will go to university, be a doctor, a lawyer, a scientist, whatever she wants.”

Today, I call Mahmoud. I hear him struggling for breath. He is wheezing audibly. Marie-Louise told me he had a fever and body aches.

“I think you may have COVID,” I tell him. “We are going to send an ambulance to your house right now!”

“How can I leave?” he says to me. “My wife is pregnant, she needs me. I am staying in the basement to protect everyone.” He coughs, his voice rasping with the effort. I am terrified that he will die while I am on the phone.

“Listen to me carefully, if you don’t go to the hospital now, you may leave permanently!” Sometimes I can be blunt, but it works, and he agrees to get in the ambulance. My spies in the hospital tell me he arrived with dangerously low blood oxygen, was intubated and in the ICU within an hour of reaching the ER. Anxious days follow, but he survives, is extubated, and returns home, weak as a kitten but alive. While he was ill Shahida delivered her beautiful little girl, and we see the three of them in a follow-up visit. “I am the luckiest man in the world,” he says, cradling his baby daughter. Shahida pats his hand.

Fear-1 Sadness-3 Anger-1

July

Things ease up over the summer. We have some good times in our extended bubble. I am allowed back in L&D, and the protocols loosen a little. We even have a week by the lake with all the kids and grandchildren.

The first of July happens, and we welcome our new residents with the curiosity, hope and trepidation that accompany every new cohort. They seem like a strong group, interested, together and clever. This year my anxiety is higher. We try to keep everyone safe while making sure that we don’t sacrifice their learning. This is all new to me.

Fear-2 Sadness-2 Anger-0

August

August feels almost ordinary. We play in the park, walk along the river, and eat at outdoor cafés. We celebrate birthdays, anniversaries, and the beginning of my daughter-in-law's medical practice. I am getting to know the new residents and have even done a few deliveries.

Fear-1 Sadness-1 Anger-0

September

This week I saw the holes that COVID is poking in our health and social services system. With two residents doing virtual well-child visits, I hear story after story about our most vulnerable patients falling through the cracks. Speech pathology assessments and treatments are cancelled, autism evaluations delayed, elective surgeries postponed until they are no longer elective. My blood begins to boil. What will we lose? How are children being sacrificed on the altar of “the way things are now”?

I am upset with two of my pregnant patients, two of three sisters who are recent immigrants from Pakistan. All three of the sisters had babies a year and a half ago at almost the same time. With these new pregnancies, however, they are very remiss in their prenatal care. They do not show up to most of the visits, not answering their phones, missing ultrasounds and some blood tests. I worry about them, but I am also judging them. Finally, when one of the sisters has a very high TSH, with her thyroid hormone dropping close to the hypothyroid range, I complain to the nurses about how irresponsible the sisters are. We send them a letter, and Clara and Marie-

Louise, the nurse clinicians, give them a number to reach them directly. We threaten that if they don't show up to this visit, we will transfer them to the Obstetrician on the corner. I don't mean it, but I don't know how to get her to come for her appointments, and I am so worried about her.

When my truant patient appears, I remember the principles that I always teach. I ask her why. Why is she finding it so hard to go for prenatal visits, and why she is not answering her phone? She starts to weep. Their landlord is harassing them, trying to force them out of their flat. He calls every day, telling her that they have to get out and that he will take them to court. They are terrified that the whole family, including her, recently paralyzed father, will be forced out onto the streets. I also find out that they have not received the welfare subsidies and the food subsidies that pregnant women receive from the government because of technicalities. The young mums are eating practically nothing to feed their parents and children. I call the head of social services at the clinic and have a brief but useful discussion. He promises that they will get seen by the end of the day and that emergency food support will begin immediately, and they will get help in dealing with their landlord.

I leave the clinic, and see the line for COVID testing curls around the building.

I get home, and I cry again. I fall asleep at 8 pm, feeling as if I have walked 100 miles carrying a heavy pack of stress and sorrow. This pandemic is wearing me down.

Fear-4 Sadness-4 Anger-3

We are six months in, and there is no end in sight. I rub soothing lotion into my red, roughened hands.

In the Greek myth, when Pandora's hands released all the evils of illness, war and famine into the human world, all that is left, trapped in that fatal jar, is hope. I cling to this small feathery unsubstantial creature, with my red and roughened hands. Hoping to feel better, to do better, I want to ride this wave of fear, anger and sorrow. I hope to come out the other side, not only unscathed but having made my little world just a tiny bit better.