

# Shared Loneliness During COVID-19

Fatma Mohamed Mahmoud, MD

**T**hey always say that there are moments in life after which everything is changed forever. We usually use this phrase when grave diagnoses are made—it has become cliché. Yet, this was exactly how I felt when the radiologist reviewed the chest x-ray and told us that we had to rule out COVID-19.

Weeks into the pandemic, I couldn't count the number of times I had to read similar radiology reports as a resident on my hospital's COVID-19 service. At that moment, everything stopped, and my eyes filled with tears in front of my beloved father who had fallen ill just that morning. A list of questions bombarded my mind, questions to which I had no answer. Where did my father get this virus? He had not traveled in 4 months, worked in a home office, and followed all the stay-at-home precautions. Was I too dismissive of his early symptoms? Could I have infected my father? While my mind was already filled with my own concerns and uncertainties, I looked to my father and saw something in his eyes that I don't remember ever seeing before—fear.

Showing signs of pneumonia, he needed to be admitted to the hospital. I knew, as a physician, that his labs and chest x-ray were diagnostic of COVID-19, but as a daughter, I refused to believe them. I am not sure what happened to my medical knowledge and clinical reasoning during those moments. *Let's start IV fluids. No, we'll start antibiotics first. Wait, we need to collect blood cultures.* Everything lost its sense and order. I would startle if the monitor showed a saturation of 94% or a respiratory rate of 24, or when he required oxygen supplementation. I knew it was serious, and despite trying to hide it, he knew it too. Hardest of all was knowing that I could no longer touch him.

Being countries away from the rest of my family members, the next hurdle was telling my mother and sisters that our father was sick and in the hospital. Just that morning, we had a video call, and everything was fine. Now everything was not fine. I felt lonely, isolated, and afraid. All the tears and apprehension that I had kept back poured out.

The long wait for the test result ended with more fear and dread—my dad was infected with COVID-19.

The virus, an unknown ghost that was shutting down cities, killing thousands around the world with no proven treatment, had infected my father. I felt like the world had ended. I, the health care worker who lived with him, had infected him.

My own quarantine started after I got tested. I was partially relieved when my test was negative, but part of me believed that I was at fault. Then the quarantine began: 14 days after my last contact with Dad. We had to face this separately. Although I trusted God and the medical team, I wanted to stay with my father even if that meant I could get infected. Although I left him physically, my mind and part of my soul stayed with him. I couldn't bear that, after all the care and support my family provided me during medical school and residency, now I couldn't provide care to those closest to my heart. I knew that the only thing harder than illness was facing it alone.

Following my father's clinical condition kept me busy during this lonely time. Each day, I checked with his primary team about his labs, vitals, medications, and most importantly, his mental health. Shifts ended and on-call physicians changed, but my follow-up never ceased. I would panic if his respiratory rate increased. *Is he in respiratory distress, tired, or anxious? Should we consult the ICU for early intervention?* I knew from my experience on the COVID-19 service that patients usually deteriorate on the fifth to seventh day of illness, and this fear haunted me day and night: Will my father deteriorate? Days passed by in the toughest way, but then my father started to improve clinically. His fever became less frequent and finally disappeared. His oxygen requirements reduced gradually, and he was weaned off oxygen successfully. His cell counts and inflammatory markers improved. With every swab, we hoped that he would soon be cleared of the virus and safely back at home. This was the time when he needed psychological support the most, the time when my role as a daughter was more important than my role as a physician. After 10 long days and nights of waiting and worrying, my father cleared the virus. Despite feeling happiness and relief, I was also filled with rage against the virus that still prevented me from hugging my father.

This journey made me realize that this is not only a medical war against a novel pathogen; it is also a psychological war. I will never forget the care I

DOI: <http://dx.doi.org/10.4300/JGME-D-20-00320.1>

received from my attending physicians, co-residents, and friends. They followed up on my dad's clinical condition and my own well-being and offered me support, from food to Netflix accounts. They were my virtual shoulders to lean on.

We're always told to treat every patient like you would want your family member to be treated. This is especially true now, when families aren't allowed to be with their loved ones, leaving patients alone and scared. I hope that the extra time I now try to spend with my patients or on the phone with their families provides them with some comfort. I hope this delivers the message that they are not alone, that dark times

come, that dark times pass, and that we will move forward. These bittersweet lessons will always accompany me along my journey.



**Fatma Mohamed Mahmoud, MD**, is an Internal Medicine Resident, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates.

The author would like to thank Dr. Halah Ibrahim and Dr. Thana Harhara.

Corresponding author: Fatma Mohamed Mahmoud, MD, Sheikh Khalifa Medical City, Al Karamah Street, Abu Dhabi, UAE, famahmoud@seha.ae