

COVID-19 Update

March 23: Two NM Physicians Reflect on a Year That Changed the World

This month marks one year since COVID-19 arrived in Illinois. We honor this historic milestone by featuring the personal perspectives of Northwestern Medicine physicians from different regions of the health system and sharing their hopes and fears about how the pandemic and events of the past year have impacted them, NM and the world.

One of the first patients to be treated for COVID-19 at NM presented at Delnor Hospital. **Jay Liu, MD, PhD**, an infectious disease specialist who serves on the medical staff of Central DuPage Hospital and Delnor, and now-retired infectious disease specialist Steven Lewis, MD, were involved in the treatment of that first patient. Pulmonologist and Critical Care Specialist **Khalilah Gates, MD**, who serves on the medical staff of Northwestern Memorial Hospital, saw some of the health system's most critically ill patients, several of whom would go on to require lung transplants. Here, Dr. Liu and Dr. Gates reflect on the past year.

Infectious Disease Specialist Jay Liu, MD, PhD

Think back to the moment when you realized that you were treating your first — and the health system's first — patient with COVID-19. What was that moment like for you, both as an infectious disease specialist and as a human being?

The attraction of infectious diseases (ID) as a specialty has always been twofold: the diagnostic aspect and the fact that many antimicrobials actually work. Every ID physician knows pandemics are a possibility, so the first case of COVID-19 was not a surprise; COVID-19 is exactly what we train for as ID physicians. And for me, there was a sense of purpose fulfilled. COVID-19 was a clarion call back to a more pure focus on patient care and medicine.

However, for much of the pandemic, uncertainty hung over us like a cloud. For a while, we didn't even have diagnostics. At times, I felt like an intern again, reading primary literature every night, spending twice as long as usual interpreting labs and deciding what to order next. I clearly remember the first update Dr. Lewis and I gave the medical staff at Delnor. The sum total of our knowledge barely filled a 30-minute talk. I remember finishing the talk and thinking, "That's it? That's all we know as the supposed experts?"

Thinking back over the past year, what are some of the moments that stand out and of which you are most proud?

I am proud that despite the initial uncertainty, we eventually started to learn. I don't just speak of us at Delnor and CDH, but I mean medical providers and scientists all around the world. As we started to piece together a pattern to the illness, innovation and technology proceeded at ludicrous speed, and ultimately vaccines were developed. Along the way, we had to make critical patient care decisions based on developing data and sort the chaff from the wheat.

We were challenged ethically at times. One memory is of a patient's family pressuring me to give a medication that had no data behind it. But through all of this, we continued to go to work.

I am also proud to work with the five-person combined ID group at CDH and Delnor, comprised of **Luis Manrique, MD, Jennifer Delacruz, MD, Daniel Boyle, MD**, Dr. Lewis and then **Richard Pagua, MD**, when Dr. Lewis retired. At one point, there were 160 patients on the combined ID list for CDH and Delnor, most of them with COVID-19. All of us were tired and a little burned out at times, but my fellow team members continued to show up to work, willingly helping one another.

The Regional Medical Group pulmonologists based out of Delnor and CDH were — and continue to be — an invaluable resource for discussing cases and brainstorming ideas, and they have taken the lead in steroid treatment for COVID-19, one of the few therapeutic modalities that shows mortality benefit. I was proud just to be part of that joint effort.

Overall, how do you think this pandemic has impacted and shaped you as a physician and Northwestern Medicine as a health system?

Thinking back, I'm certainly more efficient than before. I assuredly feel tired but do not feel burned out. I have some real perspective on what our limits are as physicians. Having been through a true pandemic from front to back, I feel as if I'm finally vested as an ID physician. I have certainly sharpened skills that will serve well when the next one comes along.

Across the health system, the pandemic drove greater collaboration between NMH and the regional hospitals, and I hope this new dynamic will continue to bear fruit in terms of research and addressing systemwide issues. I also hope that NM, like all large organizations, has learned to move and adapt more rapidly despite its considerable size.

As for changes in health care, I hope that telehealth as an option is here to stay. The advent in technology serves both patients and physicians. I am happy to see enormous amounts of will and dollars poured into an infectious disease issue, something that has not always happened in the past.

Finally, my most naïve hope is that the improved focus on pure medicine and patient care will remain as a lasting positive impact of a worldwide scourge that has had too many negative ones to enumerate.

Pulmonologist and Critical Care Specialist Khalilah Gates, MD

Think back to the moment when you realized that you were treating your first patient with COVID-19. What was that moment like for you, both as a pulmonologist/critical care specialist and as a human being?

I don't remember her name. I vaguely remember her face. But everything else about that night I remember vividly. There was nervous energy as my Anesthesia colleagues and I stood outside the room planning how we would take care of her. They would intubate, and I would go right behind to do the bronchoscopy. The nervousness was palpable but was masked by what felt like a pep talk before a big game. Everything was on the line; we all knew it, and we knew we were in it together, a team. I remember smiling at the Anesthesia attending and fellow, and saying, "Let's go." It was game time. We were on the front lines, and it was time to do what we all trained to do.

There was no questioning what our responsibilities were to that patient, and we did them, selflessly. In that moment, nothing else mattered but taking care of the patient. All went smoothly, and we continued the rest of the night business as usual. I remember seeing the Anesthesia team a couple more times that night, so I suspect we intubated several more patients, but I can't remember, no matter how hard I try. But I will always remember the first.

I often replay that scene almost as an out-of-body experience, looking into the room as I performed the bronchoscopy. I remember saying a small prayer before entering the room, asking for protection, asking to live to see my child grow up. To enter the room, I had to put my faith in God, my colleagues, the CDC and myself. I chose pulmonary/critical care; there was no other choice than to rise to the challenge.

That was a Saturday night. My daughter did not go back to day care for three months; our lives changed forever after that night. I remember having a conversation with my husband about the risk I posed to the family, having discussions about what we would do if I was exposed or infected. I was prepared to do whatever it took to keep my family safe. My husband simply said, "We're in this together."

For you as a physician, what do you think has been the most significant change that will last beyond the healthcare crisis?

I hope that this pandemic has permanently unmasked persistent healthcare disparities. We as a community have worked very hard to address the disparities that COVID-19 forced us to deal with. Now that the conversation regarding disparities is national, I hope that as a healthcare community we will continue to work together to dismantle the systems in place that allow these disparities to persist.

Also, I hope that we have a better appreciation for public health policy and community health. I have not taken care of one case of flu this season. My daughter hasn't had one febrile illness. We need to evaluate some of our practices. I think I will always wear masks in the winter from here on out.

Again, thinking back over the past year, what are some of the moments that stand out as pivotal and of which you are most proud?

The most memorable moment from this past year is actually not related to COVID-19 but happened in the midst of the pandemic. As a Black woman and physician, not only was my life turned upside down by COVID-19, but in the midst of that fight, George Floyd was killed by police. That tragedy was a reminder of the struggle that continues to face Black communities. Not only were we dying at disparate rates from COVID-19, now, again, the spotlight was turned on another unarmed Black man killed by police. There had been a string of Black murders this summer that were in the national media so the weight of racism, inequities and disparity was heavy.

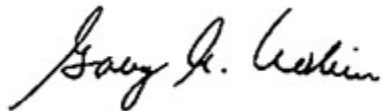
Physicians at NM organized a kneel-in to recognize the death of George Floyd. We gathered in front of Prentice, filled the sidewalks and knelt for 10 minutes. I cried the entire 10 minutes. The weight of COVID-19 and brutality and inequities was heavy. Seeing my NM colleagues in our white coats, kneeling, taking a stand, and in the moment forgetting about COVID-19, was momentous and emotional. My fellow was kneeling next to me. She heard my cries, placed a gentle hand on my knee to say I hear you and I see you, a moment that I will never forget.

Overall, how do you think this pandemic has impacted and shaped you as a physician and shaped Northwestern Medicine as a health system?

I think the pandemic has required all of us to dig deeper, and search for who we are and what we want to stand for. I am a better doctor and teacher because of COVID-19. The learning and execution that we had to do quickly and efficiently were phenomenal. I am proud to be a member of the NM community. When so many others could not find assurances in their healthcare systems, NM went above and beyond to make sure that we could care for our patients the best and safest way possible. As a front-line worker, the fear of running out of PPE, ventilators, beds and even colleagues was very real. NM did not allow that to happen, and for that, I am forever grateful. I firmly believe that we will continue to strive to be better — better colleagues, better doctors, better people, better community partners — because of the things that we have endured and learned, together.

*More moments from the past year that are important to remember, as well as those that will never be forgotten, can be viewed in a new infographic called **A Year That Changed the World** now on HealthBeat at nm.org/healthbeat. As you reflect on the past year, please share your learnings, thoughts and team shout outs by visiting the **Reflecting on the COVID-19 Pandemic** page on NM Interactive (login required).*

Thank you to all of the physicians and providers across NM for your continued commitment to our *Patients First* mission and for your heroic care of patients throughout the pandemic.



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