COVID-19 Pandemic:

Editor's note:

We wish to express our gratitude to the doctors who have contributed to our series of COVID-19 snippets. We thank those who are in the front line soldiering on under intense circumstances. We welcome contributions from any doctor who wishes to share how this pandemic has personally impacted them.

EXPERIEN

It has been an interesting year for psychiatry residents like myself, as we continue our postings in Singapore General Hospital while fulfilling our roles as front-line fighters of COVID-19. As a small department, we worked together with our consultants and went through multiple manpower changes, cross-covering each other's work while segregated into separate small teams to continue providing the best possible care for our patients with minimal disruptions. This required a lot of effort in adjusting to new systems and it is heartening to see everyone's willingness to accommodate.

Mental health needs have insidiously crept up during COVID-19, and I have encountered patients with

.....

autistic spectrum disorder or anxiety disorder displaying a worrying trend of early relapses, psychiatric admissions and decompensations. Losing patients to suicide during this period has been particularly hard for clinicians to process, as we questioned if we had done enough with the changes in practice due to the restrictions COVID-19 has imposed.

However, COVID-19 has also reminded me of the importance of mental wellness for ourselves. With the social disconnection due to circuit breaker, I believe that many, including myself, feel lonely and isolated. Luckily, technology has helped to a certain extent, with video conferencing lunches or gatherings scheduled with each other from different hospitals via Zoom being the new norm. Even a simple "How are you?" message from a friend lights up my day. Although this seems like a long-drawn battle, I still hope for the day when I can have a small gathering with my closest friends and colleagues again.



Dr Cheryl Chang, Psychiatry Senior Resident, Singapore General Hospital

There is no good health without good mental health. During this COVID-19 pandemic, while the nation is concerned about the growing numbers of the infected, we also need to be aware of how the pandemic can take a toll on our mental health. During my stint in the Institute of Mental Health Emergency Room, we have seen an increase in people suffering from pandemic-related depressive and anxiety disorders coming through our doors. These are probably the unreported numbers of the damage

.....

COVID-19 can have on our population. The true psychological effects of the pandemic will only surface months to years after it is over. We are in this, together with our patients, for the long haul.

As medical professionals, it has been ingrained in us to put the well-being of others before self. However, we do need to realise that we can be susceptible to "mental health breakdowns" during this busy period, especially when we are hungry, angry, lonely and tired. Do remember that self-care is important.

.....

We need to help ourselves before we are able to give our best for others. Help is always around the corner! It has been especially heart-warming to hear stories of colleagues scrambling to cover shifts when one is on medical leave, as well as tales of sacrifices of family and personal time just to make sure patient care is not compromised. I am proud to be working with colleagues who stand in solidarity in the face of COVID-19. Together, stronger, the best is yet to be.

Dr Lucas Lim, Senior Resident, Institute of Mental Health

Two months^a into the outbreak in March, it struck me when a colleague and friend shared that it felt like Groundhog Day.^b My alarm would ring and every morning, since the eve of Chinese New Year, I would find myself meeting with the leadership of our hospital to review the latest outbreak situation and manage our response. We saw one another more hours a week than we saw our own families.

We deliberated on the hospital operations and policies daily with the situation fast evolving from green to yellow to orange (Disease Outbreak Response System Condition levels). We were ahead of our drawer plans by about a week then and needed to quickly adapt and communicate. It felt to me that we could do better every day to get our outbreak response right and safer for our staff and patients. In the afternoon, I would make my rounds on the ground at Tan Tock Seng Hospital (TTSH) and the National Centre for Infectious Diseases (NCID); engaging with colleagues and troubleshooting clinical, operational and workforce issues with our front line and support teams. For myself, there were the occasional summons to the Ministry for updates and thereafter, more changes in the evenings and weekends that were to be done with immediate effect. Later, these meetings were "Zoomed" to me and my colleagues. The alarm would ring again, and the next day felt like yesterday... with another chance for us to fight an old but new enemy.

It has been my privilege to work alongside our hospital's veterans from previous wars – SARS 2003, H1N1 2009 and Zika 2016. Working at TTSH



A Valentine's Day spent at TTSH & NCID!

feels familiarly like ground zero once again. We are now into the sixth month of our outbreak response and at the peak in May, we operated some 1,475 beds across our campus for COVID-19 patients and 496 chairs for COVID-19 screening. To date, we have screened more than 33,000 at our screening centre and admitted more than 10,000 for isolation and treatment. But today's ground zero also feels

different from when SARS occurred. We are better prepared against the known unknown, and we have better facilities with the NCID. Yet, it has been very challenging given the numbers and the need to sustain our efforts. From those at our front line to those who work tirelessly behind the scenes, I am incredibly proud of my colleagues and friends at TTSH. To win this fight at ground zero, we must keep one another safe and well. I am glad to continue to see smiles behind their masks.

> Healthcare is first into the outbreak, last out of the outbreak and always in-between outbreaks - Dr Eugene Soh

Notes

1. Screening for COVID-19 started at TTSH Emergency Department on 2 January 2020.

2. Groundhog Day is a 1993 American fantasy comedy film directed by Harold Ramis and written by Ramis and Danny Rubin. It stars Bill Murray as Phil Connors, a TV weatherman who, during an assignment covering the annual Groundhog Day event, is caught in a time loop, repeatedly reliving the same day [Wikipedia].

Dr Eugene Fidelis Soh, Chief Executive Officer, Tan Tock Seng Hospital & Central Health



This crisis has changed me.

For many years I was in denial regarding my allergies. I've admitted to having urticaria, angioneurotic oedema, and even urticaria with low blood pressure resulting in tunnel vision, but denied having anaphylaxis. This continued even when my wife made me attend continuing medical education talks on immunology, asthma and allergy. It was after one of those talks that I decided to read up about anaphylaxis.

What I learnt surprised me and forced me to face the fact that I have had many episodes of anaphylaxis. I just hadn't had a fatal one.

I was recently reminded of my neardeath experience during my National Service days. During camouflage training, I noticed that my forearm had swollen to twice the size. I did not feel sick but when we had fallen in, I raised my hand to report the fact. You should have seen the looks on the trainers' faces. I was immediately brought to the medical centre and given Phenergan. I don't have much memory after that except feeling severe loin pain even though I was only semi-conscious. I have fragments of memory over what was a long Hari Raya weekend. One was of the doctor asking if I had any urine. Another was struggling from such severe loin pain that I actually tore not only the bedsheets but the mattress apart. I woke and the medic told me I was lucky he frauded my BP as 75 systolic when it was not recordable. I almost assaulted him, except I was too weak. Also, I wondered why he did not send me to the hospital.

I realised that if I had died, my parents would have found out after the fact.

I did the doctor a favour by not dying, otherwise he would have been charged for his negligence and irresponsibility.

That incident left me with neurological sequelae. I could speed read with photographic memory, but I had trouble with my short-term memory. Thank God my visual memory was superior. I found when it came to the anatomy examination, where I could not write an essay, I managed to pass by drawing diagrams.

Despite my affected short-term memory, I remembered everything I read after a period of at least six months. And so, I changed the way I learned things.

Thank God for the plasticity of the nervous system as well – I became good at lateral thinking as the neurons wired around areas of damage.

After I graduated from university, I again had a hard time in Officer Cadet School. Even though I was graded unfit for field training, I was made to attend field camp and was expected to participate with camouflaging. I calculated that I would get a maximum response to my allergy in 15 minutes (based on personal experience), but the fastest that the ambulance would get me to the hospital was 45 minutes. I already had a young child and I was not ready to die, especially not during peace time. For that, I ended up at the very bottom of my class.

Forward to about eight years ago, I developed an allergy to airborne organic molecules. Thank God that in my chosen specialty, I am conversant with the technology that I am using today to avoid substances that can kill me: gas masks, respirators and powered air-purifying respirators (PAPR).

I learnt a lot about the PAPR. I use a hard helmet because I could lift up the visor to safely eat and drink. Of course, I became good at holding my breath when I did so. I learnt that the slightest thing I overlooked with my equipment caused me to have an allergic reaction. It's like a personal fit test every time I put on the R95 mask or if I failed to ensure full integrity of my PAPR system. If I did not assemble the various components of the helmet properly, it would leave a little gap that could cause entrainment of air containing allergens. This allowed me to be able to share wisdom gained from my experience.

Having this condition had also made me a recluse. I withdrew. I minded my own business; tried to enjoy the rest of my life because who knows how much more I would have. But with this crisis, I found that my bad experiences had a silver lining. I also had to throw off whatever conditioning I received to become bold in expressing my opinions, in order to champion a worthy cause.

To break out of my shell, to overlook my disability and share my expertise.

This is because the virus is novel – we all have not experienced it. I realised that I can make a difference.

l can. l am sure you can too. 🔶



Anonymous