Such was the dilemma of SARS. It struck so suddenly and lethally that it left one with insufficient time to make the necessary adjustments to the point that death could become a frightening, lonely and unimaginable process.

In the second half of March 2003, I was desperately trying to lay my hands on N95 masks. There was no stock at the suppliers nor at the Ministry of Health. By some stroke of divine intervention, I chanced upon just one box of N95 masks in the last week of March, from a small supplier who was my brother's friend. This one box was godsent: like a meal you have not had for days. We would don a mask and reuse it for a few days for fear of a lack of supply. Little did I know that fate was knocking on my door.

On 5 April 2003, I saw a Singapore General Hospital (SGH) healthcare worker who presented with fever and left maxillary sinus pain. She had a history of sinusitis. Clinically, her temperature was 38.7 degree Celsius and there was tenderness over the left maxillary sinus. She had no cough, no headaches and no history of recent travel. As she was allergic to penicillin and Bactrim, she was prescribed a course of erythromycin, advised to rest at home and keep me informed if she was not feeling better. Three days later, she returned and was seen by my colleague. She had no fever at home but developed diarrhoea instead. She was given symptomatic treatment and advised to inform the SGH staff clinic doctor if she still felt unwell. That same night, she was transferred to Tan Tock Seng Hospital (TTSH).

When it was confirmed that my patient was a probable SARS case, for I had been liaising with my good friend, Dr Lee from CDC daily, my first reaction was, "Oh my gosh! It is finally true!" I felt bad for the patient and felt crazy myself. I cried. I started to check my temperature 35 times a day. I felt feverish, I felt cold. I felt my heart beating ever so fast every now and then. It had been five days postexposure for me but I was not going to let my...

“Good afternoon and welcome to the 3 pm news update. A GP is now in the intensive care unit at the Communicable Disease Centre (CDC) after having contracted SARS from a patient he treated four days ago and his condition is critical…”

– from news update on Channel 6, 8 April 2003

Hundreds mourned the loss of a dedicated GP as friends, colleagues and patients gathered to say their final goodbyes to a doctor they have come to respect and love. Found among the doctor’s personal belongings in the hospital was a simple makeshift will stating his last wishes…

– from “Lost to Sars” by Angie Tam, published in Tomorrow newspaper, 9 April 2003

(Note: the above are completely fictitious media reports.)
fears overcome me. I told my God, “I am not ready to die. Please let it be some other time”, for I knew that dying from SARS would be a lonely and frightening experience. I plucked up my courage and went to work as usual every day. I had to be there for my patients who needed me. Imagine how much more frightened my patients, who were not protected by N95 masks, would be if I, who was already wearing one, was so terrified. I called all ten of my quarantined patients to reassure them and subsequently, they in turn called me several times for that reassurance.

One family, who was quarantined, called me because their child had developed diarrhoea. I drove over to their home and passed them soya milk powder for their baby. I felt an immense peace and satisfaction for my small contribution towards Singapore during this difficult SARS period.

My mother was terrified and worried upon learning of my contact with the SARS patient. She wanted me to close my clinic and quit Medicine immediately. All this for love. The love of a mother for her child cannot be exchanged for that $25,000 my family would get if I should die from SARS! My mother! She was one of my greatest pillars of strength during the whole epidemic, and still is!

My mother was not protected by N95 masks, would be if I, who was already wearing one, was so terrified. I called all ten of my GP friends across the island to remind them to acquire a second burst of energy. I started to call many of my GP friends across the island to remind them to wear their N95 masks at all times. I also wrote a long letter to our then Prime Minister Goh Chok Tong, making recommendations for primary care establishments to prevent transmission of SARS during the epidemic. In particular, I urged the Government to provide five surgical masks per household to encourage patients to mask themselves at home when they came down with a fever, before they travelled out to seek medical help.

SARS came and went like a bolt from the blue! Some time later, the authorities decided to give rewards and recognition to healthcare workers who had been exposed to SARS. My kind doctor colleague actually recommended me for a Star Medal from the Courage Awards, instead of just a normal Courage Medal. Despite a second appeal from him, the recommendation was rejected as the Courage Fund Working Committee felt that the courage I showed and the contributions I made were not unique. When my colleague subsequently told me about it, I was a tad disappointed – not because I wanted the medal or the $2,000 monetary reward, but rather because I felt that somehow the contributions of GPs during the SARS period were not fully appreciated and recognised. I simply felt that my life should not be worth any less than my hospital colleagues. In a hitherto unknown epidemic like SARS, any healthcare worker who attends to an infected patient is potentially at risk of dying, even if it is a single exposure. Hence, all healthcare workers should be treated with equal consideration, without distinction as to whose contribution is the greatest!

When I received my Courage Medal and monetary award, I called the family of my deceased SARS patient to inform them that I would like to give the money to them, for I remembered the patient telling me she needed to get well soon and get back to work so as to earn money to help her family financially. The sister of the deceased patient declined my offer; thanked me and told me that I deserved to keep the money. I was grateful for her generosity. I felt that God had already been kind to me and the money was not mine to keep, so I donated the whole sum to a charitable home.

SARS has changed my life and taught me a few things. Now, I know that I am living on borrowed time and it is essential to make the best out of every day. I have taken greater control of my life as I try to balance work, social, sports and family in my life daily. Previously, I could not even swim half a lap, so I engaged a swimming coach and subsequently trained hard enough to take part in triathlons. In December 2011, I successfully finished my first Ironman triathlon race in Busselton, Australia, which consisted of a 3.8-kilometre swim, followed by a 180-kilometre bike ride and then a 42-kilometre marathon run – at the age of 47 no less! Last year, I completed my first 6.5-kilometre one-way South China Sea swim from Kapas Island to mainland Malaysia, and this year, I ran my first winter marathon in Tokyo on 24 February! Nothing is impossible after SARS!

My dear colleagues and friends, I sincerely hope you benefit from my traumatic SARS experience and learn to live your lives to the fullest too. May we all be better doctors, better nurses, better brothers, better sisters, better husbands, better wives, better parents and better children, for we may not get to die another day.

Photos: Dr Anthony Thian

Dr Anthony Thian has been working as a GP for the last 21 years. He has a humble practice in Choa Chu Kang.