

FROM THE INSIDE



From ICU doctor to ICU patient

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At the beginning of April 2020, I have been admitted to the emergency department with pneumonia. Everything started as a light dry cough and a certain degree of fatigue that, initially, did not bother me too much. After few days, the symptoms became unbearable. As I was already aware, I had already started the therapy with hydroxychloroquine and azithromycin, honestly, without a great improvement. Upon admission, my pneumonia was interstitial, bilateral, maybe more in the left lung. My arterial saturation in room air was 91%, and, interestingly, I was not dyspneic. At the blood gas analysis, I had a PaO₂ 61 mmHg, PaCO₂ 29 mmHg, pH 7.47. Thankfully, with the oxygen mask my PaO₂ improved to 91 mmHg. This did not help for long: the day after we decided for continuous positive airway pressure (CPAP) with 10 cmH₂O of positive end-expiratory pressure (PEEP). Nevertheless, I was still not feeling well, despite the PaO₂ further went up. Together with the staff, we decided to opt for the prone position after one day of CPAP. At the beginning, I was lying prone for 5 h in the morning, 3 h in the evening and 4 h at night. One hour after the change in prone position I was feeling immediately much better, my PaO₂ was going up to 270 mmHg! For the next three days, we alternated supine and prone position, to the point that I was able to manage myself rather well: I was simply asking the nurses if I could lay belly down, I was completely able to turn and change positions by myself. Slowly, but steadily I kept improving, and the pronation was starting to be less and less needed and the PEEP was lowered to 7 cmH₂O. Gradually, we abandoned CPAP after 9 days. During the last 4 days, I kept CPAP only in the night with 2 h of prone position. Slowly, we were able to lower also the FiO₂ to finally breathe room air, again. I did one last computed tomography scan and I was discharged home. I had a good recovery by physiotherapy because, initially, I was not completely fine and I had scarce tolerance to the

physical activity. Breathing still feels awkward: something happened down there, I can feel my lungs. After more than one month from the symptoms onset I came back home, happy. It was a really, tough experience. As an intensivist and a patient, during my hospital stay, I kept thinking about every notion and experience I learned at the bedside, on the books and from mentors: they really saved my life. Now, I'm back, to be useful again, at the front line.

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Conflict of interest

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