

A view from the front, but behind the lines

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It has been somewhat disorienting to be a pediatric hematologist/oncologist practicing in an academic medical center in Queens, NY, during the COVID-19 pandemic. The adult hospital next door overflowed with COVID-19 patients which resulted in two-and-a-half floors and half of the emergency department in the children's hospital being repurposed as adult COVID-19 units. Pediatricians from the intensive care unit, emergency medicine, hospitalist service, and general practice were re-assigned to battle the pandemic shoulder to shoulder with their internist colleagues. I even personally experienced a few weeks of terror when I contracted COVID-19.

I was never, however, on the front lines. I was not intubating patient after patient, nor was I experiencing the sense of futility as hundreds of patients died each day.

Now that the tsunami of sick adults has receded, the configuration of the hospital has returned to a semblance of normal, and my pediatric colleagues have returned to caring for children. I have been able to contemplate the experience, and begin to figure out why the onslaught left me feeling half-drowned.

Pediatric hematology/oncology is a high-stakes and intense specialty on the best of days. While we are generally a resilient group at baseline, the limits of that resilience are tested routinely. A critical competency of our specialty has always been the ability to establish therapeutic relationships with the families we care for during the worst moments they will likely ever experience.

This pandemic has led to a dramatic increase in stress and tension as families have to care for a child with a life threatening illness while also figuring out home schooling; worrying about job loss and financial instability; caring for loved ones with COVID-19; losing friends and family to COVID-19; or in some cases contracting COVID-19 themselves. My colleagues and I also struggled with the same worries for ourselves and our families.

The need to wear masks that hid our faces made clear communication and establishing trusting relationships

even more challenging. Workflows were drastically changed, such as needing to coordinate chemotherapy administration in the emergency department for COVID-19 positive patients, and making a year's worth of adaptation to telemedicine in three weeks.

The stressors added by the pandemic have left me emotionally and physically exhausted. The experience has me thinking honestly about my own well-being. This is no small admission. My first-person leadership project as an AQA Fellow in Leadership (2017 cohort) was to address well-being in medicine using a model of enhanced peer-support,¹ and I am the chair of the well-being special interest group for the American Society of Pediatric Hematology/Oncology. I have published a little and thought a lot about well-being, but it has always been about someone else's well-being, not necessarily mine. It has been difficult to now face an honest appraisal of my own state.

Burnout, the antithesis of well-being, was prevalent in medicine before the pandemic. The timely monograph on professionalism recently published by AQA provides an excellent series of essays on the topic.² The suicide of a prominent emergency medicine physician in New York made the news in March, but burnout, post-traumatic stress, depression, and suicides among physicians will swell as a result of the pandemic. It is incumbent on health care systems, political leaders, and professional societies to anticipate this impending epidemic, and provide the material and mental health support needed for physicians to weather it.

Individually, as we emerge from the deluge of COVID-19, whether we worked on the front line or behind it, we need to take a deep breath and use the experience as a pivot point to re-focus our commitment to our own well-being.

References:

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2. Byyny RL, Byyny R, Christensen S, Fish JD, editors. *Medical Professionalism Best Practices: Addressing Burnout and Resilience in Our Profession*. Alpha Omega Alpha Honor Medical Society. 2020. <https://www.alphaomegaalpha.org/medprof2015.html>.

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