

Patient and family critical care COVID-19 experience

Authors: Mike and Jill Higgins

This is the unedited version of the extract in the SICSAG annual report

Publication date: 6 September 2022













Translations

Easy read

Audio

Large print

Translations and other formats are available on request at:



phs.otherformats@phs.scot



0131 314 5300

Public Health Scotland is Scotland's national agency for improving and protecting the health and wellbeing of Scotland's people.

© Public Health Scotland



This publication is licensed for re-use under the Open Government Licence v3.0.

For more information, visit www.publichealthscotland.scot/ogl

www.publichealthscotland.scot

Version history

Version	Date	Summary of changes
0.1	21/07/2022	RH moved to PHS formatted document
2	12/7/2022	Edited by SC

Mike Higgins – patient

I came home from work on Friday 29 of October 2021 feeling a little under the weather but didn't think any more about it. As a secondary teacher, I did an LFT test on the Saturday morning, which came back positive immediately, with a strong line. I assumed the test was faulty so repeated it, with exactly the same result. I went for a PCR test to get confirmation for work, as I may be absent for 10 days, little did I know it was going to be nearly 5 months.

Over the next few days, my condition deteriorated, to the point that I was feeling extremely lethargic and as if I had a really bad hangover, my appetite disappeared, and movement became exhausting. A nursing friend brought along an O2% measurement device, and my oxygen levels had dropped to 85%. They continued to drop, so my wife contacted our doctor who conducted a house visit, and I was admitted to hospital on Thursday 4 of November. I remember walking out to the ambulance, and being wheeled into the Victoria Hospital in Kirkcaldy, but not much more until I began to recover.

I spent 2 days in ward 51 so they could monitor my progress, but unfortunately, I continued to deteriorate. On Saturday 6 November, I remember having a conversation with a consultant about the next steps, which were to either continue with the monitoring, or I could be placed into an induced coma and taken to ICU. I asked if the first option was likely to be successful, or if there really was only one real option, which was the case, so I decided to choose the ICU option.

I know during the days I was in hospital it was extremely difficult for my wife, Jill, as she had also tested positive for COVID, and was unable to be with me. They phoned Jill and asked if there was anything she would like to say to me before they placed me into the induced coma, but we knew no words were needed. Weirdly, all I could think about was how annoyed Jill would be if I died because the garage was a complete mess.

Initially my condition was still not improving, and it got to the point where I was on full oxygen, and it really had become a waiting game. There was one more roll of the

dice, and the specialists decided to place me on my front, and within 24 hours, I began to show slight signs of improvement.

During my time in ICU I remember nothing, apart from my hallucinations which I think were 'sprinkled' with elements of reality. The hallucinations were many and varied, and very different emotionally. They included my teenage son signing a professional football contract with Liverpool FC, being stuck in a video game, kidnapped by Russians and rescued by Royal Marines in a submarine, my wife helping out at the hospital triaging patients and watching my own funeral with family members past and present. However, the one I felt real guilt about as I began to come out of the induced coma was thinking that the nurses looking after me were trying to kill me, nothing could be further from the truth, they are all truly amazing.

As I began to come out of the coma, I had an awareness of my surroundings and was able to attempt to interact with the people around me. I can remember the difficulty I was having trying to communicate with a breathing tube and wearing a mask. We tried different ways to communicate, which included pointing at letters and trying to write, both of which never really worked, as I could not coordinate my hands properly due to the drugs in my system and muscle weakness. The highlight of the day was sucking on a damp sponge as I was not allowed to drink.

Eventually, on 21 November, the ventilator was removed, and on 24 November, I was strong enough to be moved from ICU back to ward 51, as I was still testing positive for COVID. It was here that I slowly began to realise what had happened, and how badly my body had deteriorated during my time in ICU. I had lost two and a half stones in weight, most of this was due to muscle wastage.

This began the next stage of my recovery and is probably the most difficult thing I have had to cope with both mentally and physically. My first physiotherapy session involved four team members, and all they asked me to do was sit up on the edge of my bed, 30 minutes later, after much pain and tears, I managed it, and it took me nearly 2 hours to recover. It was at this point that I began to doubt that my life would ever be the same again.

Over the next few weeks, I would take every opportunity to try and build up my strength and stamina, as I was desperate to get home and be with my family. The final hurdle to being allowed home was being able to climb the same number of stairs that were in my house. On Friday 10 December, I was wheeled to the physio room which had 4 stairs to practice on, after some words of advice and motivational music playing, I managed to get to the top and back down. Monday 13 December was the big day, I was taken to a set of stairs in the hospital and asked to walk up 14 steps. There was a lot of heavy breathing and sweating, but I managed, and I knew this was the moment I would be able to go home.

Tuesday 14 December was a very strange day. I was going home, and was very excited about this, but also scared of facing the reality of my situation.

Over the next 4 months I worked extremely hard on both my physical and mental strength. I received the most amazing support from my family, the physic team and a wide range of experts from the NHS on the InspireFife counselling sessions.

On 28 March I was able to return to work on a phased return, which was great, my life was returning to normal. I have now been back at work full time for the past few weeks, and it has been brilliant.

I made a promise to myself that I would try and turn this experience into a positive one, so I wanted to make sure that I lost weight and improved my overall fitness. This is still ongoing, but I have managed to lose nearly 6 stones in weight and cycle 70 miles a week. This is still a work in progress but has been made possible by the amazing care and support I received.

Thank you, I owe you my life.

Jill Higgins (Mike's wife)

Mike tested positive for COVID on Saturday 30 October and seemed to feel a bit under the weather but overall, just like a cold. By the Sunday I also began to feel unwell and had a positive PCR test. Mike could not get out of bed on the Sunday, and he said he felt very ill and lacking in energy. I checked on him regularly,

providing him with drinks, etc., and became increasingly concerned about his lack of energy and engagement.

I borrowed an oxygen meter from my friend and throughout the Monday and Tuesday Mike's oxygen levels dipped between 87% and 82%. He seemed very removed and not interested in eating or drinking. I called 999 and an ambulance came to the house. He was checked over and they decided to leave him at home and if he worsened, I was to call back. I felt very concerned about this worsening situation and I knew by Mike's behaviour how unwell he was.

The following morning (Thursday), I contacted my GP who was very proactive and sent a GP immediately to the house. She assessed Mike and to my relief arranged for his immediate admission to the Victoria Hospital. Ambulance transport was arranged and thankfully he managed to walk out the ambulance and that was the last time I saw him. The relief that someone had taken my concerns seriously and that he was going to get proper medical care took a lot of my worry away.

After Mike was admitted I barely heard from him. I phoned the ward and they said that as he was wearing an oxygen mask constantly, he was finding it difficult to have a conversation. They said he was on a high amount of oxygen and was not really improving. I thought at this point he may just require oxygen support for a few days and would be home soon. On the Saturday afternoon, I received a call from a doctor in ICU to say that Mike's condition had deteriorated and therefore they were going to move him to ICU, where they could monitor his condition more closely and give additional support. I was extremely shocked and so worried. My father had been ventilated in ICU and unfortunately passed away a number of years ago, so this brought back all these terrible memories. For the next 2 hours I had a very anxious wait hoping that they would ring to say he was more stable.

Unfortunately, at 6pm I received the phone call I was dreading to say that they were going to have to ventilate Mike as he was tiring, and it was his only chance. The doctor said that I could speak to him, but I just couldn't do it. I couldn't bear the thought of saying goodbye and did not want to cause him any unnecessary distress. I was numb with shock. He said the next few hours would be critical and I could phone whenever I wanted.

The next few hours were unbearable. I had to tell my two children (age 15 and 17) what was happening. I had to be honest with them but could hardly say the words and as I was still unwell with COVID I couldn't even comfort them properly. A truly horrendous situation. I barely slept and kept waking up with waves of anxiety. I knew that they would phone if he deteriorated.

I spoke to one of the nurses and she said that a nurse called Anne had stayed behind at the end of her shift to hold Mike's hand while he was ventilated. She felt that he had got to know her during her shift and didn't want him to be on his own without the comfort of a familiar face. I can never thank her enough for the kind gesture which made such a difference to me and my family.

The next morning Mike was still critical, but he was still with us and we spent the next few days focusing on oxygen levels and what percentage of oxygen he was managing to cope with. I didn't want to harass the staff as I realised, they were busy but felt so helpless at home and was clinging onto any slightly positive news.

He made it through the first 24 hours, and I kept telling myself he is strong and has so much to live for but inside I felt so horribly anxious and helpless which seemed to come in waves. The days went past in a bit of a blur, and I was due to be out of COVID isolation on the Tuesday, so it was agreed that I would be allowed to visit Mike in ICU on the Wednesday.

Unfortunately, overnight on the Tuesday he deteriorated, and they told me as a last resort they would attempt to prone him on his front. This had been successful in other covid cases, but they did say that the procedure carried a great deal of risk. They said it would take a team of eight people to do this, so they had to wait until everyone was ready and available. They told me this would be done at 3pm and it would take some time to know if the procedure would be successful.

The hours of waiting were genuinely agonising and after 3 hours I had heard nothing. I asked my sister to phone as I could not bring myself to do it and the thought of bad news was so unbearable. Immediately, however, the nurse was upbeat and said that the procedure had been a great success and in the meantime his oxygen levels had really improved. They did temper this with caution and said that it was early days,

and they would attempt to turn him back on his back the following day. Some patients require proning several times, so I had to be patient which was so very difficult.

The following days involved daily updates and visits. Things seemed to be slowly moving in the right direction. In the main the oxygen levels that he was coping on was being gradually reduced and the mode on the ventilator was changed with a view to removing the breathing tube in the coming week or so. I had to message so many family and friends every day as they were all so concerned about Mike's wellbeing.

It was very odd visiting Mike and not being able to speak with him or even have any form of communication. I just had to hope that me being there offered some comfort to him and that he was possibly aware of my presence. The consultant I spoke to was optimistic and said that he was progressing well which is words that you want to cling onto. The intensive care staff were amazing and so patient with my many phone calls and were always willing to give up their time to explain things and put my mind at rest.

As the week progressed, they began to talk about lessening the sedation and removing the breathing tube. I had no idea that it was possible to be conscious when intubated and I was concerned that Mike would not be able to tolerate the tube in his throat.

Things became more difficult as he was more aware, and his mood was irritable and irrational at times, which was understandable considering everything he was going through. The doctor told me on the Saturday morning that the plan was to remove the tube and when I phoned later that morning the tube had been successfully removed. They explained that he may decline so it was possible that he may have to be intubated again, but I had to be hopeful that he could breathe successfully on his own. I was so excited to see Mike and perhaps have the chance to speak with him.

Unfortunately, he could not speak well as his throat was so sore and raspy and the aftereffects of the sedation led to him being very disorientated and delirious. I found this very hard to cope with as he kept pleading with me to take him home. We can laugh now at some of the ridiculous things that he said. He was convinced that our

son had signed for Liverpool Football Club. He was quite paranoid and thought that the nurses were trying to kill him. It took quite a few days before I began to see Mike returning to a more normal mental state where he could converse normally and was aware of his situation.

After a few more days Mike got moved to ward 51 and for the first time I got to see him properly and talk to him and this was a special day that I will never forget. It was a shock for both of us to see how weak he was and that he did not even have the strength to sit up or turn over in bed.

In the coming days with the help of the physiotherapy team and the nursing staff he progressed from sitting up, to walking a few steps to eventually tackling some stairs. It was genuinely terrifying to see how difficult and demanding he found these simple physical tasks and a daunting thought about how we would all cope at home.

Since coming home he has made great progress and is determined to be fitter and healthier than he was before. I am so proud of his determination in facing this situation and he has lost nearly 6 stone, something I thought would never be possible. We have both started cycling together and we are determined to make the most of things.

I can't thank the NHS enough for saving my husband's life and the experience has allowed him to re-evaluate his health and make sure that he is in a much fitter situation to face anything else life may throw at him.