Life & Times

A matter of life and death:

my life-changing experience

THINK LIKE A DOCTOR

A sunny May evening. My husband and I had wandered out for an al fresco dinner. The sun felt comforting, the birds were singing, and smells of cut grass were filling the senses. Life felt good. However, what was to happen next was going to change our lives forever.

Roll on to 5.00 am and my husband had got up to see to our son. Pretty standard non-eventful behaviour. But then ... thud. An almighty crash. The most alarming sound I had ever heard. Followed by the most alarming sight I'd ever seen. My husband — lying on the floor: pale, white, and unconscious.

I ran in. His body was cold and pulseless, and he was lying in a pool of blood where he had hit his head. We weren't at home: we were staying at my in-laws. Everything looked disoriented and fuzzy. It was the most devastating sight — one that I'm not sure I'll ever be able to forget. I was paralysed by shock. Motionless in disbelief. I can then remember hearing my fatherin-law shouting repeatedly, 'Think like a doctor! Think like a doctor!'

And there it was. The word 'doctor'. I had no choice but to adopt my role as a doctor. Not as a grief-stricken wife, not as a mother, nor a bystander. But a doctor. So I did. I delegated jobs and started CPR. 'Mum, call the ambulance.' 'Dad, start compressions.' 'I'll do rescue breaths.

Writing this now, it sounds so clinical and functional, but you can't so easily relay the emotional part. I have done CPR countless times, but never while screaming hysterically with tears rolling down my face. It felt like an out-of-body experience. I felt sick to the stomach and like I was being repeatedly stabbed. Yet, somehow, we managed to keep going. Compressions, breaths, checking for an output. I don't know how, but a force of both grief and desperation kept us forging on.

After a few minutes (which felt like



Aniali at work.

hours), I was becoming increasingly more hysterical. I could no longer cope. So while I continually shouted 'Keep going with the CPR' to my in-laws, I dragged myself and my ashen-faced son (who was still watching all of this) out of the room. Hyperventilating and shaking, but clutching onto my son for dear life, I took a second away from the horrid vision that was only a few steps away.

But then we heard a voice. The most amazing voice I had ever heard. 'Get off me, dad!' was the cry. It was my husband! He had regained consciousness! There he was. Sitting up. And talking. He was alive. Wow.

BUT HE'S SO HEALTHY!

A mixture of emotions rolled through our heads. Relief. Confusion. Delirium. As the paramedics loaded us into the ambulance, it felt like we were in an episode of Casualty. Or as if this was all a bad dream and we would soon wake up and forget the whole thing. But unfortunately this was not the case. There was no Charlie Fairhead to greet us at A&E, and no commencing the day with a nice hot brew in bed. It was real. And we were starting our day on a trolley in a corridor, having the worst busman's holiday imaginable. Dampening any hopes of being discharged, we were informed that my husband's ECGs were abnormal. Grossly so. Widespread ST changes; T-wave inversions. 'But he's so healthy', friends and family kept saying. 'He rides his bike everyday.' 'He's a doctor!' Well, I guess we can't explain everything can we?

DIAGNOSIS

After a 7-day stint on CCU, with only a monitor and a bedpan for company, much testing and investigation, second and third opinions, a diagnosis was finally made. Hypertrophic cardiomyopathy. He would need an ICD. And pronto. So while the rest of the country basked in heatwaves and royal weddings, we were mainly hospital based with only a centimetre-square of frosted window for daylight. I was just so grateful that things had turned out OK. The alternative outcome was unthinkable. This was definitely no time to wallow in self-pity and misery.

The last few months have been life changing and we have been shaken to our very core. A cardiac arrest is the thing you dread the most as a doctor. Add into the mix the fact that the patient was my healthy 35-year-old husband, and it really is something I hope to never witness again. Thankfully, aside from a wound infection, things seem to have returned to 'normality'. And, much to my husband's greatest relief, he is back on his bike.

But it does make you reflect — the whys, the whats, the what-nows. We've had ideas of how we can use this experience to empower others, such as setting up basic life support (BLS) tutorials in local venues; something we aim to do soon. And, fundamentally, this has made me much more appreciative of being a doctor. Our skills and privilege often get forgotten, especially when faced with the day-to-day drudgery and everincreasing workloads. But we must always take a step back and try to remain positive in our advantageous role. And the next time I ever wonder if there's something else I could be doing that's 'easier' or 'less stressful', I'll always remember that there is nothing comparable with the work we do. It's a matter of life and death. It truly is.

Anjali Vaidyanathan is a GP working in Salford, Greater Manchester, a tutor for Manchester Medical School, and a mother to a 4-year-old train enthusiast

Anjali Vaidyanathan,

GP, Medical Student Tutor and Clinical Debrief Tutor, University of Manchester; Widening Participation Champion, Manchester Medical School, Manchester.

Email: anjali.vaidyanathan@nhs.net **@DrAnjaliVaidy**

DOI: https://doi.org/10.3399/bjgp19X703841

"I can then remember hearing my father-in-law shouting repeatedly, 'Think like a doctor! Think like a doctor!'