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POINT OF VIEW

Emotions: a propellant motion in COVID-19 times

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Abstract

Objectives: To describe the experience of a pediatric resident in the COVID-19 pandemic. **Methods:** Experience report. **Results:** Recognize emotions and the grieving process during the pandemic. **Conclusion:** Know how to use emotions as a propelling movement in personal and professional training.

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In 2020, starting the pediatric residency in the week following the disclosure of the first case of COVID-19 in Brazil, brought with it an unexpected and contradictory feeling: the joy of the so desired admission to the program started to be associated with questions about the maintenance of individual health and as well as whether the medical residency program would be restructured or even interrupted.

At first, there was a need for creating and implementing a new infection control protocols, and re-management of wards and sectors due to a greater number of patients with respiratory conditions. At this stage, I was able to use the numerous institutional flowcharts for patient care with suspected or confirmed COVID-19, which underwent weekly reviews, in an attempt to follow the natural evolution of the disease and its epidemiology. Training followed, such as dressing and orotracheal intubation, and the mandatory use of personal protective equipment (PPE) was instituted in all cases, in addition to continuous reinforcement regarding hand and environment hygiene.

Being in a state-of-the-art hospital in Brazil, a national reference in several technologies and health research, made it possible to experience the change in local medical care and its repercussions at the national level. Even so, adaptations were necessary to guarantee the quality of teaching to the resident, such as the transformation of theoretical classes and meetings, which should be in person, and became virtual, and the relocation of some activities in an outpatient clinic, for example.

There was also a decline in the number of pediatric patients who accessed medical services. Infection by SARS-Cov-2 was not only less severe in children, but also, social isolation, with the closing of schools and public environments, made them less ill.

In the residency activities, however, there was little damage in terms of specialized knowledge, since the preceptorship and the clinical staff went to great lengths to keep residents up to date (through discussion of scientific articles on COVID-19, resource allocation, bioethics and virtual presentation of pandemic data), in addition to meeting the schedule of topics to be studied during the first months of residency.

Medical Residency in this global context brought even greater and unthinkable challenges, which go beyond the technical field[1]. The adaptation process was accompanied by a great emotional burden, and the attempt to maintain mental health in the midst of the pandemic.

Experiencing the fear and uncertainties of this new disease and how it would affect me, my family, friends and patients, added to my family's concern for being at the forefront of the pandemic, generated anguish and caused a feeling of incapacity and vulnerability.

In the midst of these feelings, I came across an interview by David Kessler[2], the world's leading grieving expert and co-writer with Elisabeth Kübler-Ross of the book *On Grief and Grieving: Finding the Meaning of Grief through the Five Stages of Loss*, which reported that we are experiencing a moment of mourning at a personal and population level. When asked about more than one type of mourning, he replied that anticipated mourning would be the feeling we have about what the future holds when it is uncertain.

Understanding that the stages of mourning may not be linear, sometimes happening in a different order from that described by Kübler-Ross, I did a free translation of the interview, contextualizing it for the medical residency: denial, usually the initial stage of mourning, could make you think "this virus will not affect me or affect my residency program". Anger: "Social isolation is forcing me to go home from work, and vice versa, in addition to damaging my home and leisure activities." The bargain: "ok, if we establish social distance for a few weeks and use PPE correctly, everything will improve, right?". The sadness: "I don't know when this will end and if I will finish my residency at the right time". And finally, acceptance: "this is happening; I figured out how to deal with it during the residency ".

I understood, then, that I was experiencing mourning. The mourning for the lives that were not saved. The mourning for healthcare professionals around the world who had to exercise the profession with little safety and scarce resources. The mourning for not being close to the family and for not having special powers that would not let them get sick.

However, as Kessler said in the interview, acceptance is our power; we have some control over it. It is necessary to recognize and accept the emotions felt during this pandemic and try to channel them in order to experience the present, without fear of the future, taking advantage of the medical residency program as an opportunity not only for professional growth, but also for personal growth. The gains in all areas are enormous.

My wish is that we, pediatrics residents, can use our emotions as a propelling movement to become better humans and doctors and thereby offer our little patients our best, with love, science and hope.

REFERENCES

1. Sant'Anna MFBP. Coronavírus: a pandemia da dor e do despertar da Medicina!. Resid Pediatr. 2020;10(2):1. DOI: https://doi.org/10.25060/residpediatr-2020.v10n2-01
2. Berinato S. That discomfort you're feeling is grief. Harvard Business Review [Internet]. 2020 Mar; [acesso em 2020 Mar 30]. Disponível em: https://hbr.org/2020/03/that-discomfort-youre-feeling-is-grief