MEDICINE IN THE INFERNO: CREATING THE HUMAN ELEMENT AMIDST THE SPACESUITS, THE CHLORINE, AND THE DEATH IN AN EBOLA TREATMENT UNIT

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• Staff Physician, Bong County Ebola Treatment Unit
• International Medical Corps, Liberian Operations
Objectives

- Convey context of Liberia
- Explain ETU and my job as staff physician
- Think about the meaning of the interface between provider and patient
- Consider mistakes and misgivings
Special Thanks

International Medical Corps
- Sean Casey & Pranav Shetty
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Random Folks
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Martha Mauch, CDC
- Rupa Narra, CDC EIS
- LCDR Beth DeGrange, USPHS
- Emily Veltus, MSF
- CDR James Lawler, NMRC
- LCDR Ben Espinosa, US Navy

GHHS Society
- Jennifer Perez

Correspondents
- Dave Clive
- Nancy Skehan
- Sara Jacques

Chris Bielick
- Katey Walsh (soon to be Haiti Walsh)
- Tara Bouton
- Sunkaru “How Is the Suicide Mission Going?” Touray
- Suzanne Sprague
- Adam Hodes
- Justin Lui & Tony Ogunsa
- Emily Bouley “Bones” McCoy
- Shu Yang
- Vitaly Belyshev
- Anne Barnard
- Kim Cullen
- Gina Zarella
The Bong County ETU (October 2014)

Suspect Ward: ~22 beds (3 doubles)

Confirmed Ward: ~45 beds (nearly all triples)

~8-12 admissions/day: 50% negative
What are the rules of the road in a place like this?

In other words: how do we think about caring for patients at the end of the world?

(They think it is the end of the world.)

(They may be right.)
Rule #1:
Always meet patients at their eye level.
Rule #2:

Never forget the value of touch.
Alice’s masseuse
Rule #3:

See your patients before your gear up. (Literally, figuratively.)
Solomon and Saah (future PAs)
Rule #4: Have movie nights.
Each area in an ETU has different issues

- Fear
- Terror
- Depression
- Anxiety
- Despair
Rule #5:

Don’t take yourself too seriously.
Rule #6:
Smile!
Ciao!
Comfort Harris (center)
Only survivor of 7 RNs from Phebe Hospital; returned to work at ETU