Dear Colleagues,

I hope this editorial finds you all well and safe during these extremely difficult times. Typically, this time of year is when many of us would be planning our favorite holiday, Thanksgiving Day – a day to enjoy building new family memories. Well, these are not typical times. This year will be remembered by the entire world as the most painful time in our recent history – marked by loss of life and an adverse impact on global health.

“The year of COVID-19” has challenged us personally and professionally in ways we could not have imagined. Certainly, the sacrifices and heroism of our front-line clinicians and responders will deservedly become a legend in our retrospective of 2020. Standing alongside these first-responder heroes, and deserving no less recognition, are those in the life science industry who have contributed their genius and commitment to researching interventions to address this monstrous virus. In an unprecedented show of collaboration, scientists, often from competing organizations, shared their thinking and advances - accelerating the development of cures. I have never been prouder to stand, as a clinician, with the scientists and those who support them, in the mission of protecting human health from this scourge. History will remember this moment as one of the finest examples of what dedicated professionals in our country from academia, armed forces, federal agencies, and industry can accomplish as servants to mankind.

I am primarily a clinician who explores surgical therapies for malignancy and end-organ-function. By understanding cancer through biology behaviors at the bench, I hope to translate therapy to the bedside for impact on outcomes at the individual and collective levels. In my spare time, I have the compelling honor of serving my country. I donate part of my time to the service of sailors and marines as a Sr. Officer of the 4th Logistic Battalion Surgical Company Alpha (SCoA).

On the early morning hours of the first Saturday of April, I received a call from my Commanding Officer: “CDR, are you and your detachment ready to be mobilized?”. Within 24 hours 40,000 healthcare workers, including providers, nurses, and physician assistants from all over the country were deployed to New York City to help with the worst epidemic the
city has seen in centuries. Operation Gotham was planned as a flash mission with the largest number of Navy operatives to be active on “Conus” ever. At our arrival to the city, I experienced clear skies, full roof views, and a complete paucity of engines. That memory sharply contrasted with the one of a polluted sky and bellicose streets that my wife and I lived in months before during a getaway weekend. We were told that we would be serving at the ‘Comfort’, one of the flag-hospital ships of the Navy. Nonetheless, by the time of our arrival, the Comfort was in quarantine since nineteen marines had tested positive for the virus. While SCoA members were getting mustered at the Jarvis Center, leadership asked where the city needed us the most. The answer that came from the Governor and FEMA was New York City hospitals.

Local hospitals were challenged by the sudden organizational chaos resulting from the necessity to convert most of the admitting beds into ICU beds, due to patient needs for ventilatory and hemodynamic support. On our arrival at Woodhull and Elsmere Medical Centers and Bellevue Hospital, the situation was critical. 80% of the facilities were converted to ICU beds, there was no proper staffing for patient care, healthcare workers were burned out and the rate of COVID-19 infection among providers and nurses was in the range of 28-43%. We were at the epicenter of the COVID-19 pandemic with 20 to 40 deaths a day in each facility. There were long nights clouded by great concerns from creating teams, protocols for patient care, schedules for different levels/expertise of providers to training every member in the skills of prevention. Our priority was to excel in patient care while assuring that we all returned home well. There were many obstacles at the personal, collective, and commanding levels. Proper channels of communication and the exercise of Navy values were the pillars to overcoming most of these difficulties. By the second week of May, the death rate had dropped significantly. The ICU beds were half-empty, and the rate of newly infected patients was trending down. We were ordered to move to the Norfolk Navy base to quarantine. We were going home. Each one of the 852 members of our Battalion/EMF Bethesda was healthy with no COVID-19 infections to report.

Back to my civilian activities, I still dive into my experiences from Operation Gotham. The COVID-19 virus should not be underestimated. Significant advances have been made in the management of the infection, bringing down mortality rates and convalescence times with a clear trend. The second wave of the infection has plagued the southern and western states with grief, and the financial toxicity of such a burden is undetermined. Our global estimates project over fifty million people will be infected with 1.5 million deaths by 2021, and our country carries the largest burden. While I do not know what the future will hold for us - nor can I offer a certain view of the “new normal” - I do know that we will continue to do the important work of advancing human health together. I hope you join us in our prayers for the ones we have lost, for the ones that are still in the fight to live, and for the wish to stop this infection soon.

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