CASE REPORT

Sixty Days of Coping with Hellish COVID

Semoon Chang

University of South Alabama, USA.

Received: 01 March 2024 Accepted: 25 March 2024 Published: 01 April 2024 Corresponding Author: Semoon Chang, University of South Alabama, USA.

Abstract

This is the real-life description of an individual who received all the available covid vaccines recommended by the U.S. CDC and still was felled by the virus. He travelled to Korea in late 2023 for a family visit. Five days after returning, covid symptom appeared (PCR test). We read gripping stories of Covid's effects, but rarely have an account of its effects on an elderly person. The author had never been so ill. In spite of this, he fended off his physician's advice to go to an emergency room. He desperately wanted to stay at home where he was most comfortable and could feel the peace his home offered. The author states he wrote this paper in the hopes of letting readers know a first-person account of Covid's effects. Hopefully it will be useful for those who are doing research on Covid or are interested in learning more about the effects of Covid.

1. Introduction

I entered the world early in 1941. I am a retired professor of economics. My special person is my lady Anne who is a retired FEMA executive. We both live in a quiet retirement community called the Leisure World of Maryland. We are avid ballroom dancers while I also belong to the Maryland Interclub Senior Golfers Association. For practice, I walk the 18-hole Leisure World course once a week. During season, I also play in one or two tournaments a week, riding a cart.

We both received the Moderna anti-covid vaccines three times in 2021 (Jan. 29, Feb. 26, and April 2); twice in 2022 (April 5 and Sep. 21); and once in 2023 on September 16. I thought both of us were well protected against covid. As I shall explain, apparently, that was a mistaken premise.

Late in November 2023, we took a family trip to Seoul, Korea, returning on November 27 (Monday). We landed at Washington Dulles International (IAD) Airport via Korean Air. Everything was normal for several days as we recovered from the almost fourteenhour flight from Seoul.

2. First Sign of Covid

December 2 (Saturday), 2023, dawned as a beautiful day for a golf outing. I made a tee time for noon and went to the course to walk and play. To my surprise, I felt tired as I began hole #1. This had never happened before. I completed holes #1 and #2. When I reached hole #3, I felt an uncontrollable diarrhea and rushed to a nearby building for relief. I had no headache, but felt an unusual fatigue with short breath. By the time I completed hole #9 with several stops for rest, I was so tired, accompanied by short breath, that I had to stop playing. I strongly suspected it was simply continued jet lag - but never even considered that it might be Covid because of the vaccines and booster shots I had received.

On the next day (Sunday, December 3), we attended a holiday party which featured a band for dancing. When we began to dance, I felt no discomfort, only joy at the familiar movements. Very quickly however, I had a short breath problem that forced me to stop and sit down in the middle of a song. I tried to dance three or four more times, but with the same problem. My shortness of breath was so bad and limiting

Citation: Semoon Chang. Sixty Days of Coping with Hellish COVID. Archives of Community and Family Medicine. 2024; 7(1): 9-12.

[©]The Author(s) 2024. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

that I simply gave up trying to dance for the entire evening.

The following day (Monday, December 4), Anne suggested that I take an antigen self-test for covid-19. To my surprise, the result was positive. She immediately made an appointment with our primary care doctor who was able to see me the next day.

3. The Holidays from Hell

At my doctor's office, they administered a test by immunoassay. The bad news quickly came back. The home test was correct. I was Covid positive. With the reasoning that molnupiravir (Lagevrio) would be easier for my somewhat weakened kidney function, I was prescribed Lagevrio 200 MG rather than Paxlovid. If I had known that Lagevrio had only emergency approval by the Food and Drug Administration, I might have suggested that my preference would be Paxlovid that may or may not have worked better. Nonetheless, I dutifully took 4 tablets twice a day for 5 days as prescribed. With full faith in science and medicine I had great anticipation of a quick and full recovery.

Six days later (Sunday December 10), I completed the course of Lagevrio treatment. A repeat Covid test indicated negative results which was good news; however, to my consternation, there were no improvements in the known Covid effects. In fact, my worst days were yet to come. The balance of the month would see decreasing health and emotional wellbeing.

My worst effect was shortness of breath with bloated abdomen, legs and ankles. Not only was the bloating uncomfortable, the abdominal bloating caused my stomach to feel full with only a few morsels of food. A walk of more than 5 yards would leave me gasping for breath. Often, I could not walk to the bathroom adjacent to my bedroom, about 10 feet from my bed. Short breath was accompanied frequently by the onset of fatigue with my knees feeling especially weak and tired. While sudden urges of diarrhea continued, a serious concern was that urination became less frequent with a smaller amount being released. Rather than eliminating it, my body retained fluid in my abdomen and legs.

On some nights, my body felt so restless and uncomfortable that I seriously considered calling an ambulance for admission to a hospital. I did not. My fear was that I would not be released when I may feel marginally better and well enough to leave. (see Martin and Chang 2022) I had no appetite. I had no sense of smell. I knew I had to take nutrition to give my body a fighting chance to repel the still present enemy - Covid. Every day, Anne brought a variety of foods that she thought I might eat. Fearing that I was becoming dehydrated even while retaining fluid throughout my body, she bought Pedialyte in both liquid and powder form. Pedialyte is a solution of electrolytes and glucose designed to rehydrate cells. I tried, I really tried to force myself to eat as much as I could, but it was not enough to maintain my normal weight. As an example, Anne brought home the freshly-grilled whole chicken which I normally relish. I could barely force myself to eat one leg. The rest stayed in the refrigerator for several days and eventually found its way to the trash can.

I still did my best to put something into my stomach, even a tiny amount. My favorite food during the tough days was fresh mini cucumber. Oddly enough, while there was no taste either of or for food, I was never nauseated or threw up.

During those early days of December, I developed a mucus problem. It was severe enough that I had to have a waste basket next to my bed. I felt so weak that I never even attempted to drive to neighborhood stores within a one-mile radius.

4. The Search for Answers and Treatment

Although I was unable to think of treatment, Anne was continually working. Upon consultation with our always reliable primary care physician, she made a number of appointments with specialists. Our main concern was to find out why I could not recover and to figure out what treatment may be needed.

On December 18, I had an ultra-sound (sonogram) and X-ray at the MedStar Community Radiology Imaging Center. On December 22, I was examined by my cardiologist who had taken care of my preventive open-heart surgery to remove a fibroelastoma. (Martin and Chang 2022) On December 26, I had a CT scan (computed tomography) also at the MedStar Community Radiology Imaging Center. Actually, visits to specialists continued into 2024.

An echocardiogram by my cardiologist was done on January 2 which was followed by visits to a Nephrologist on January 3 and a Hematologist on January 12. I am scheduled for a Pulmonologist appointment in March to determine the prognosis for the continuing short breath. In addition to the specialists, there were almost weekly visits to our primary care doctor, who candidly summed up the past month: I just cannot come up with a workable hypothesis that puts everything together (paraphrased).

These visits and tests led to the following conclusions: To my immense relief, there was no cancer. The continuing main problems are the fluid retention which impacts and slows down the kidney function resulting in the excess fluid retention and bloating. On December 22, our cardiologist prescribed Bumetanide 1MG (a strong diuretic) with instructions to take it twice a day. This medicine helped to ease the bloating pressure a little but also led to more frequent urination. This meant I was waking up two to three times during the night which, of course, led to fatigue during the following day and a sense of not being fully rested.

For those who might wonder whether I had any preexisting medical conditions that might have made my covid effects worse, I prepared a summary table of lab results in Table 1 (January 2023 to January 2024). The table excludes items that fell within the normal range, and includes only these items that fall outside the normal range.

| Table 1. Lab Reports |
|----------------------|
|----------------------|

| | | 2023 | | | | | - | | 2024 | |
|-----------------------|-----------|--------|--------|--------|--------|-------|--------|--------|-------|--------|
| Lab | Normal | Jan.27 | Mar.23 | Apr.28 | May.15 | Aug.9 | Sep.22 | Oct.16 | Jan.5 | Jan.12 |
| Iron binding capacity | 250-425 | 222.00 | | | | | | | | |
| Red blood cell count | 4.20-5.10 | 3.55 | 3.4 | 3.76 | 3.29 | 3.3 | 3.69 | 3.61 | 3.37 | 3.26 |
| Hemoglobin | 13.0-17.7 | 10.2 | 9.5 | 10.9 | 9.5 | 9.9 | 10.8 | 10.7 | 9.7 | 9.3 |
| Hematocrit | 37.5-51.0 | 30.5 | 29.2 | 32.3 | 27.9 | 29.9 | 32.0 | 31.9 | 29.6 | 29.2 |
| RDW | 11.6-15.4 | | | 16.5 | 16.7 | 14.5 | 15.0 | 14.7 | 13.5 | 14.5 |
| Platelets | 140-400 | | | 142 | 103 | 158 | | | 168 | 149 |
| Glucose | 65-99 | | | 124 | | 117 | | | 95 | |
| BUN | 8 to 27 | | | 30 | | 31 | | | 60 | |
| Urea Nitrogen | 7 to 25 | 29 | | | 43 | | | | 60 | |
| Creatinine | 0.76-1.27 | 1.72 | 2.01 | 1.74 | 1.95 | 1.72 | | | 2.93 | |
| eGER | >59 | 39 | 33 | 39 | | 39 | | | 21 | |
| Chloride | 96-106 | 111 | 109 | | | 109 | | | 108 | |
| Carbon Dioxide | 20-32 | | | | 15 | 22 | | | 25 | |
| Calcium | 8.6-10.2 | 8.4 | 8.3 | 8.4 | 7.8 | 8.1 | | | 8.6 | |
| Albumin | 3.7-4.7 | 3.3 | | | 3.2 | 3.4 | | | 3.4 | |
| A/G ratio | 1.2-2.2 | | 1.0 | | | 1.1 | | | | |
| Alb/Creat ratio | 0.29 | | | | | | | | | |
| Protein | neg/trace | 2+ | | | 3+ | | | | 7.4 | |

Derived by author based on lab reports.

While some of the values are slightly outside the normal range, they do not indicate any underlying conditions or disease that would interfere with daily life or activities.

4.1 January 2024

Note that December 2, 2023 marked the onset of Covid's major impact that I experienced. Early in January 2024, about one month after the onset of the major impact, subtle changes began to emerge. Although I still had no appetite, I began to eat more. Sudden urges of diarrhea were gone with more regular bowl movements returning. Morning mucus decreased noticeably and short breath became more tolerable. By the middle of January, more changes emerged. When I woke up in the morning, I felt improvement, although my hopes were dashed by afternoon when the unrelenting fatigue returned.

January 27 was our monthly ballroom dancing date at our community Ballroom Dance Club. On New Year's Eve, I could barely dance two slow waltz songs. On January 27, I felt as if I could dance more and better than I did New Year's Eve. Sure enough, Anne and I were able to dance many different songs with a rest in between, clearly a sign of continuing recovery. (Martin and Chang 2019)

By the end of January, which marks the 60th day of the Covid attack, I still had a short breath and daily fatigue with continued fluid retention in my legs and ankles. Fortunately, it is not severely limiting my daily activities and I feel strong enough to drive around the neighborhood. The excess mucus is slowly disappearing and my appetite is slowly returning.

Hopefully, the pulmonology consult will have an answer(s) for the continued very present shortness of breath. If we can find that answer and vanquish that lingering and concerning condition, I will feel like I have scaled the mountain and can continue life as before. I will feel as if I overcame another tough test on my life.

Unfortunately, the remaining question lingers: With the full recommended vaccinations and boosters not sufficient for protection from Covid – what can I, or should I, plan as a strategy for future protection. I have no idea how/where I contracted the virus. Anne and I took the same trip, sat together on the plane, ate at the same restaurant upon return to IAD, and rode in the same car home. If we were both exposed, fortunately, her protection held, but mine did not. Where do I look for the next answer.

5. Conclusion

Effects of Covid were much worse than I expected. It began with fatigue, uncontrollable diarrhea and, soon, short breath. Within two days, I was tested Covid positive, and was prescribed with Lagevrio. My worst effect was shortness of breath with severely bloated abdomen, legs and ankles. A walk of no more than 5 yards would leave me gasping for breath. I never had sharp pain anywhere in my body, but I had several nights in the month after testing positive when my body felt so agitated, restive and uncomfortable that I seriously considered calling an ambulance for admission to a hospital. After numerous tests and examinations by several specialist doctors and subsequent medications to address symptoms, my most serious symptoms disappeared in about 60 days, leaving me enough energy to drive and live somewhat normally, although short breath has restricted my precovid energy and activities continuing well beyond 60 days.

6. References

- 1. D Anne Martin and Semoon Chang, "Can Dance Be in Every Woman's Retirement Plan?" Acta Scientific Women's Health, Volume 1 Issue 7 December 2019.
- D Anne Martin and Semoon Chang, "A Journey through Open Heart Surgery," Journal of Cardiology Research Review and Reports, SRC/JCRRR-171 DOI: doi.org/10.47363/JCRRR/2022(3)163.
- 3. Semoon Chang, "Medical Aid in Dying: A Layperson's Perspective," Journal of Hospice and Palliative Medical Care, 2022, 4: 013.