How to humanise the COVID-19 intensive care units

Veronica Rivi 1,2, Gabriele Melegari, Johanna M.C. Blom 1,3

The COVID-19 is altering the way patients and families endure illness and death. To mitigate the spread of the virus, patient isolation and visitor restrictions in hospitals have been implemented at a scale never seen before. This means that once hospitalised, patients are isolated from their families until discharge. There remains a sort of undefined mental space of wondering if this is a temporary separation or a step towards final departure. 1 2 At the same time, outside the hospitals, there are the relatives of patients waiting anxiously for updates. In some cases, because of the exposure to patients, they are quarantined and may live with the feelings of guilt and anxiety of having unwittingly contributed to the spread of the illness.

This traumatic separation could make both patients and relatives vulnerable to different degrees of stress disorders as well as depression and anxiety. 3 Because these symptoms will likely continue even after the pandemic has subsided, virtual and/or on-site psychological support should be proposed promptly to patients and their families during the hospitalisation and after discharge from the hospital. 3

Social isolation during the COVID-19 outbreak also means that patients often die without family and significant others by their side. The patient’s relatives, in turn, are forced to relinquish two important moments of human remembrance, to accompany the dying in their final moments and to bury them according to individual funeral rituals. 4 The coronavirus pandemic has revealed how unprepared we are, as a culture, as individuals and as healthcare workforce, to face suffering and death on such a large scale. In Western culture, suffering and death are rarely discussed and are often considered a taboo. However, in the last few months, since the pandemic exploded, they are consuming us and invading the mass media.

What to do? How to act?

In this hectic period of emergency care and human needs, the stretched and often overburdened healthcare workforce is called to respond to the COVID-19 outbreak both clinically and humanely. 5 6 That means not only providing patients with excellent medical care through the appropriate treatment and supportive measures but also taking care of their emotional well-being continuing to promote and ensure the humanisation of the intensive care unit (ICU). 7

Doctors and nurses cannot go into a patient’s room unless strictly necessary and only if they wear masks and are completely covered with protective equipment. Although that places protective equipment. Although that places
professionals to humanise the ICUs could be itself helpful with their work strain and satisfaction in care delivery.

**Contributors** The authors confirm their authorship according to the following criteria: have made substantial contributions to conception and design, or acquisition of data or analysis and interpretation of data; been involved in drafting the manuscript or revising it critically for important intellectual content; given final approval of the version to be published; each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content; and agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. VR confirm that all authors agree on the order in which their names will be listed in the manuscript.

**Funding** The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

**Competing interests** None declared.

**Patient consent for publication** Not required.

This article is made freely available for use in accordance with BMJ’s website terms and conditions for the duration of the covid-19 pandemic or until otherwise determined by BMJ. You may use, download and print the article for any lawful, non-commercial purpose (including text and data mining) provided that all copyright notices and trade marks are retained.

**References**