



Nature Heals

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BRIGHT GREEN LEAVES emerged from bare tree branches and frogs croaked in chorus as I walked through the early spring forest. Sensory immersion in nature's new life softened the graphic memory of having watched a young patient desquamate, lose her top layer of skin, and die due to devastating complications from a bone marrow transplant. During the formative years of pediatric residency training, I ran and walked in the woods to process the most challenging or upsetting cases. Unsurprisingly, as the COVID-19 pandemic took hold during my second year as a primary care pediatrician, a local nature reservation became my escape. Amidst so much uncertainty and danger, I returned to the woods in search of solace and healing.

On one particular day, nature did not heal in the way I had hoped it would. As my husband and I ascended a small hill, a kneeling woman came into view. Her positioning looked eerily familiar. She looked up and said, "My husband is not breathing." She had already called 911 and emergency responders were teaching her over speakerphone how to start CPR. Instinctively, I revealed I was a physician, shed my running pack and ran to her side. The pallor and lifelessness of the man induced an immediate sense of dread. A brief desire to run away came over me, but I laid my hands on his chest, and let the muscle memory of my training flow forth. I initiated chest compressions.

I looked up towards where my own husband, an engineer and ultramarathon runner, had been standing. He had already started dialing 911 as well. He began traversing the trails he knew so well to help direct first responders to our relatively remote site in the woods. In just a few short minutes, I started to physically fatigue. I would not be able to sustain quality chest compressions for much longer without help. As if I had made the request out loud, a runner passed by. He did not know how to perform CPR but was willing to learn. I taught quickly, made readjustments to ensure quality chest compressions and we continued to alternate while awaiting additional help.

In what seemed like hours, but was likely about ten minutes, firefighters arrived on foot with a defibrillator. Other first responders were on their way, they told us, as they moved in and set up to take over. As I took my hands

off the man's chest for the last time, I practically collapsed on a large rock from fatigue. I checked in with the man's wife. She maintained a calm demeanor but the look of fear and disbelief in her eyes was unmistakable. "Can you stay with me?" she asked. I nodded. It was the least I could do.

I explained to her what was happening and asked some basic questions about her husband. She answered my questions and then freely told me about her husband's cultural roots, profession, and passions. Naturally, we shared a mutual love of the outdoors. Minutes were passing and I felt increasingly hopeless, sensing impending tragedy that I could not control. Suddenly, the woman was startled by a shock being administered. I let out a pent up sigh of relief at the idea of a shockable rhythm and explained what was happening. The defibrillator had read some electrical activity in the heart after all.

Many more minutes passed without any further shockable rhythms. The second wave of first responders finally arrived and soon they were ready for transport to the hospital. I thanked the firefighters and instinctively gave the wife my phone number in case she needed anything.

Suddenly the woods were quiet and empty, soft sunbeams gracing the pine needle carpeted trails. Without really questioning the idea, my husband and I completed the full eleven-mile hike. Perhaps we knew that we needed to be in nature to process what just transpired. We walked mostly in silence, with interspersed conversations about mostly unanswerable questions. I suddenly feared I could have contracted COVID-19 during the resuscitation. I tried to keep my panic to myself to avoid worrying my husband, but he independently raised the concern as well. We passed tire marks along a trail that is practically impassable for motor vehicles, transient evidence of the paramedics' heroic effort.

The next day I awoke to a heartbreaking text message from the woman confirming her husband's passing. I initially felt lost in my ability to understand and accept what happened to this man. I grieved for his wife, a stranger with whom I now felt a deep connection. I selfishly felt betrayed by nature as my sanctuary

of healing. I worried that this event foreshadowed more suffering and death to come.

Now, almost 2 years later, COVID-19 remains just as much of a presence in our lives as it was during that tragic day in the woods. There has been undeniable forward progress; vaccines and treatments are now available and we no longer live in a restrictive lockdown. However, the past few weeks have led to an overwhelming surge of infections due to the Omicron variant. Hospitals are nearing capacity again, bringing back vivid memories and raw emotions from the early months of the pandemic. I still think about that day in the woods often. It did hint at what was to come, but not exclusively in the way that I originally imagined.

Unfortunately, suffering and death have been a routine part of these pandemic years. One of my young patients lost her mother to COVID-19 and had to say goodbye over an iPad. Our team, including a child life specialist, provided grief support and gifts addressed from her mother on her birthday, which occurred mere days after her mother's death. We have learned to do what we can, in the ways we know how.

I was naive to assume that the healthcare system would always be able to provide the services needed, with the appropriate urgency. The sensation of helplessness waiting for first responders to find us in the woods compares to the anxiety of watching hospitals, like the one where I work, desperately devise ways to increase capacity amidst a staggering surge in sick patients. I no longer take things like hospital beds and ambulances for granted. I have learned that flexibility is just as important as preparedness.

What strikes me most about that unforgettable day in nature is how much I learned about the dying man's

interests and hobbies during such an acute and chaotic medical crisis. I initially wondered if there was more time to talk with this family member because there were no other patients to attend to. Maybe I paid closer attention due to the absence of hospital sirens and alarms. I like to think it was not just the absence of hospital stimuli but also the presence of nature's unique sights and sounds subconsciously reminding me of our profound interconnectedness.

On a recent day in clinic, fatigue and apathy were creeping into my psyche amidst yet another crushing surge of COVID positive patients. I saw a young man for his routine physical exam. I had initially met him three years ago when he, his siblings and their mother emigrated from Uganda after political violence left their home destroyed and their father incarcerated. They had slept on the floor of a local church until a gracious host family took them in for several months. I paused a bit longer during his visit, silenced the COVID chaos swirling in my brain, and listened. He was thriving in his current job and he aspired to go to college to study engineering. His family was healthy. He then reversed roles and asked me how I was doing. As he stood up to leave, he wrapped his arms around me and gave me a big hug. Nature is ever unpredictable but always heals, sometimes by teaching us how to heal.

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