

My Sepsis Experience: March 2017 – April 2018

<p>Feb 27th - March 3rd</p>	<p>I was a fairly fit & healthy 61 year old and I'd never been in hospital in my life. I was a bit snuffly with a sore throat but thought it was just the normal symptoms of a cold.</p> <p>Things started to get worse through the week and developed into what my wife Alison and I thought was flu. On Thursday morning I collapsed in the shower and during the rest of the day had shivering fits & vomiting and by late evening my breathing had become faster and I'd developed diarrhoea. I was apparently also saying some strange things.</p> <p>Late on Thursday night, Alison rang 111 who were very busy but rang back during the night. After talking to both of us (although I don't remember the conversation), they suggested I had gastric flu. Although Alison was aware of the possibility of sepsis, having seen a note in our granddaughters school newsletter, unfortunately it appears that the symptoms mentioned above didn't register strongly enough on the 111 scripts.</p> <p>Early on Friday morning Alison was so concerned about my deterioration that she rang our GP. Thankfully, the GP changed her visiting pattern and came out to see me, checked me over and called an ambulance. I don't remember anything from that point on, including assessment at Royal Berks A&E or admission to ICU. I was diagnosed with Group A streptococcal sepsis, acute kidney infection, liver infection and with other organs affected. I was later told that I had been as close to dying as I could get.</p>
<p>March 4th - March 11th</p>	<p>Fortunately A&E started me on antibiotics and over the following week, ICU followed this up with other intravenous antibiotics, antibodies and kidney dialysis. A combination of sepsis and sedation meant that I remember very little of the first week. That included the physio's getting me out of bed for exercise and some bed based cycling – I only realised the timescales of those events during my subsequent 1:1 follow up visit.</p> <p>As well as the organ infections, I had a really swollen throat so couldn't swallow and was on a food tube.</p> <p>In common with many other ICU patients I experienced hallucinations which remain vivid even a year later. In my case, I was fortunate to have less of the bad and more of the funny and ludicrous ones; who knew that the Royal Berks ICU ceiling was designed to resemble a Concorde nose or that the night shift have photo booths with their parties every night?</p>
<p>March 12th - March 23rd</p>	<p>During the next couple of weeks there were some ups and downs amongst the continued treatment. I was beginning to recover during the second week but the inside of my mouth and tongue were still too swollen to allow me to swallow. I needed blood transfusions and at the end of the week my knee ballooned up with suspected septic infection which required an operating theatre visit for an arthroscopy.</p> <p>The good news was that it was my birthday during the week and someone on the staff arranged a cake. I even managed to taste a bit of the icing and had the privilege of the 'Doctors Round' choir singing Happy Birthday, an event not to be missed.</p> <p>Through the third week the infections were subsiding and I was able to do more physio and practice walking on crutches or a frame.</p>

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	<p>Later on, I realised that in many ways the time in ICU is far harder for the relatives than the patient. I'm lying there having every need attended to, but they are wondering with each phone call and visit what they will find, as well as the frequent enquiries and updates with wider family and friends. The superb pastoral care provided by all the ICU staff (both medical and non medical) made a huge difference and they never minded answering the phone, providing quiet spaces or time to chat whenever they could.</p>
March 24 th - April 4 th	<p>By the fourth week I was well enough to be moved from ICU to a general ward. I was very weak and had lost 12 kg (17% of my normal weight). I stayed on intravenous antibiotics right up until my discharge four and a bit weeks after admission. However, I'd developed anaemia so was put on iron tablets.</p>
April\May 2017	<p>Following my discharge I had a couple of UTI's in quick succession, fixed by antibiotics from my GP. I had an endoscopy to track down the reasons for the anaemia which turned out to be mild stomach inflammation so had short term Omezaprole in addition to continued iron tablets.</p>
June 2017 – April 2018	<p>In March 2018 I had a bout of iritis in both eyes which cleared following steroid drop treatment from Royal Berks Ophthalmology. I've not been advised of any definite cause but I note that arthritis and problems with the immune system are both possibles.</p> <p>I know I'm one of the very fortunate people who come through acute sepsis without any life changing effects. I've had follow up reviews and blood tests from my GP which have seen my various readings return to normal levels. I've also been lucky to have physio treatment provided through my GP surgery.</p> <p>I'm certainly back to doing plenty of walking and enjoying life in general but know I've still got a bit of a way to go before my knee is fully functional and my toes lose some remaining nerve sensitivity.</p>

Reading is very lucky to have two additional factors to aid recovery;

- The **Rehabilitation after Critical Illness** (RaCI) program run by Royal Berks ICU. In particular, the 1:1 event going through my history and the chance to visit the ward to put hard facts behind what happened was especially valuable for me and just as importantly, my wife.
- The ICU Support Group run by ICU staff and volunteers. This provides a forum and meeting place where former patients and relatives can exchange their experiences. Regardless of the medical reason for your ICU admission it helps to know that you are not the only one to have encountered some of the effects, and to be able to help others in similar situations.

Without the care provided by my GP, everyone at the Royal Berks and especially all the people in ICU, I suspect I wouldn't be here and being able to record my experiences for this conference gives me another chance to say thank you to you all.