



Linda's Story

My name is Linda. I am 69 years old and live in the Northeast of England.

I had never been ill a day in my life when in March 2019 I felt unwell with palpitations and called 111, where the responder sent me to A&E, and following my admission and a scan of my heart it was discovered that I needed a replacement aortic valve. This process took some time, and I eventually saw a cardiologist in November 2019. Further delays meant that the promised date in December or January did not materialise and I called the cardiologist's secretary in January 2020, who said they had experienced a lot of emergencies but would get me in as soon as they could. At that time I was number 14 on the list so was not expecting this to happen quickly.

As I waited for a date, the COVID pandemic was starting to be an issue in hospitals and elsewhere but I spoke to my husband, who was himself vulnerable with progressive heart failure and Alzheimer's, and he was supportive of me having my replacement valve surgery during COVID. My husband unfortunately developed pneumonia then an infection on his pacemaker and was taken into hospital. He was stable but they expected to keep him in for six weeks, so when I was offered a surgery date on 1 May I accepted, as it would mean that my husband would not need to go into respite care. I felt that the safety in hospital would be high and people would be taking extra care. I was advised that the surgery might possibly be cancelled but my cardiologist's secretary made it very clear to people that it was important for it to go ahead on that day if at all possible, as it was the best time for me to have the surgery, as I knew my husband was being cared for in hospital.

My husband was on the ground floor next to a window, and as I couldn't see him due to COVID regulations, I used to phone him and stand outside the window so he could see me while we spoke. A friend's daughter worked on the ward so she took things in for him. Unfortunately I got a call from the ward sister one day to say that he was deteriorating. At 7pm in the evening I got a phone call to ask if I wanted to come in and see him. It was difficult as I was vulnerable too as I was waiting for my surgery. I felt I needed to leave. I could see he was tired and I said my goodbyes to him. One of the volunteers said to me that she understood I needed to go and he would not be alone if he passed. I went home and he died about half past 11. I was alone, and I had no one with me. It felt difficult to tell my story over the phone to everyone who needed to be told, and I couldn't see people because of the restrictions, so there are people I've never really talked about it with.

The hospital offered to put the surgery back two weeks but I thought about it and wanted to go ahead, push through it and have it done. I'm a Christian, and I told the cardiologist's secretary that I believed God would carry me through. My husband's funeral was 30 April, and I had to prepare for my surgery on Friday 1 May, so following the small ceremony I needed to have a COVID test that afternoon and then



the following day I went into hospital. The hospital was separated into two halves, a COVID side and a non COVID side. A friend dropped me off at the door, which was strange as normally at the hospital you can't get near the door. There was no one around when I entered and took the lift, not like the usual busy place it is. Ward staff and nurses were in masks, but not full PPE.

My surgery went well. The surgical team had pre-warned me not to be alarmed at what they were wearing when I came round as they looked like people from a space craft, in forensic style overalls with plastic foot covers. A person leaned over my bed and she had a mask on and then all the PPE on top of that. There were disembodied voices around me. Even so, they were able to convey their compassion and concern for me. I later saw one of the nurses out of PPE and I didn't recognise her, but she told me they had tried (and failed) to stop me being sick when I woke up. But the personal touch was appreciated by me.

I went from ICU to high dependency and then a normal ward. I was in hospital for five days. I wasn't able to have visitors. I agreed with one friend that she would be the contact point with the hospital, so the hospital kept her informed and she spoke to everyone else. I had my phone during the whole time but I could hardly hold a phone. Later on I did video calls. Everyone was very understanding about people calling their friends and families who couldn't visit. Part of me was quite relieved at the lack of visitors, as I don't know when I would have fitted in all the people who would have wanted to visit! I think limited visiting is quite a good thing.

I had to consider what I would do when I was discharged. I had an arrangement with a friend to come to stay with me but this fell through as her family were worried about her being exposed to COVID from the hospital, as she was vulnerable as a diabetic. I was facing the prospect of carers coming into my house at first, as I couldn't manage alone. Three different people, seven days a week, who had potentially been with ten people already. It was at this point that I thought, "Really, God?". Not long after that, I got a phone call from a girl at my church, and she told me she could stay with me for a week, and it was all arranged. She ended up staying for two, doing her work from home job from my house.

I asked if there was any physiotherapy and the hospital sent me exercise sheets through the post, so I made myself do these, but it was difficult to understand the tiny pictures! I had done leg exercises to strengthen my legs before I went into hospital to prepare for lack of mobility, as I knew I would have to be careful with my arms having just had my chest cut open. I knew getting up from standing or sitting would be difficult. I had to do all my own post-op monitoring, I haven't seen any doctor since the surgery apart from a scan a year after, and I knew I was at risk if I were to go into a doctor's surgery, so I stayed at home.

The worse part of everything was a condition I developed after taking codeine in hospital for post-surgery pain relief. The drug slowed down my digestive system which caused painful complications which I found even worse than the surgery. I



couldn't walk, lie down, sit or stand without being in pain. It brought me to my knees more than anything. I was asked if it was hindering my cardiac recovery and I said yes, because I couldn't be active. At that point I was put under general anaesthetic to have a camera examination, and something they did during that resolved the problem, which was such a relief. I wish I had been able to have a discussion about pain relief, and been informed of what I was being given. In general though I found their care compassionate, and I felt listened to. One of the first nights after my surgery a nurse came over to ask me if I was okay, because I was still awake in the dark. I asked her if I could tell her something and she took my hand. I told her that my husband had died. She said she was very sorry and asked when. "Two weeks ago" I replied. And she hooked her foot around a chair and asked me to tell her about it. Whatever else was going on, she stayed with me until I fell asleep. These are the things I will remember. The kindness she showed me. Everyone may have been rushed off their feet, and there was COVID, but I never ever felt that they didn't have time for me. And I also reflect that I believed God would carry me through, and He did. "

Linda would like to express her gratitude to the entire heart team at the James Cook University Hospital, Middlesbrough.