



Medina County Auditor

HOMETOWN HERO

Refusing to stand on the sidelines

Medina County physician travels to COVID epicenter to bring knowledge of disease back to northeast Ohio

By Melissa Martin



BRUNSWICK HILLS – When he looks back on 9/11, Pravin George said he finds it ironic now that the one clear thought he had as he watched New York firefighters, police officers and other rescue personnel rushing into World Trade Center almost 19 years ago is that he didn't think he had the strength to run into a burning building – literally or figuratively.

“I remember telling myself, ‘I don't think I have it in me to do these kinds of things,’” the Brunswick Hills resident recalls.

But in recent weeks as he watched daily reports of devastation as a result of the COVID-19 pandemic in the heart of New York City – a place he called home for the first few years of his life - George said he caught himself thinking very differently in the midst of the nation's largest health crisis in more than 100 years.

“As a critical care doctor, I just couldn't bear to watch what was going on in New York from the sidelines anymore,” he said. “I knew what I was being called to do.”

George, who works as an attending physician in neurocritical care and stroke neurology for the Cleveland Clinic, said that within days of having this realization, he was offered an opportunity by the Clinic to put his skills to work at New York Presbyterian Hospital to assist medical personnel overwhelmed by the crisis. He was among 25 Cleveland Clinic physicians and critical care nurses who volunteered to make the trip to New York City's hardest-hit borough and the most active COVID medical center on April 17.

"The timing lined up perfectly," he said. "Our numbers in Cleveland were coming down, and it didn't seem like we were going to get the surge as highly as we anticipated. (But in New York,) they were experiencing numbers that were unprecedented by any measure imaginable."

For comparison's sake, George notes that Westchester County, where New York-Presbyterian is located, has recorded more than 46,000 confirmed COVID-19 cases, whereas Cuyahoga County currently has fewer than 2,000.

"There is complete panic mode by people in New York," George said. "If you were to tell me at some point even a month and a half ago that you'd be able to tell all New Yorkers that they have to stay at home, I would have laughed. But they're scared and no one is anywhere to be seen. Chinatown is deserted. I went to Times Square at 7 p.m. one day and I was the only one there along with five police officers."

Learning these realities of how just devastating COVID-19 can be – even in a booming metropolis such as New York – is one of the toughest lessons he learned while working in New York, George said.

“In working the front lines there, I can tell you that we lost a sense of a Neurological ICU, a Cardiac ICU, a Medical ICU a Surgical ICU. All of the intensive care units became COVID ICUs because all of the patients were COVID patients and they followed a similar trajectory in illness,” he said.

George, who is a married father of four, said that while he was in New York, he and his colleagues were able to garner a significant amount of knowledge about the disease and its many presentations just by going from one COVID patient to another.



“This virus isn’t what we initially thought it was - a severe respiratory disease,” he said. “It’s a systemic disease.”

George explains that in certain patients, and it’s not clear why the disease varies so widely from person to person, COVID-19 targets the blood and the immune system.

“This causes the body to shut down in so many ways,” he said. First it attacks the lungs and respiratory system, then it moves to the kidneys, then the heart and brain. One after the next, people that were severely affected by this virus were slowly deteriorating very similar ways.”

Outside of learning more about the virus itself and its effects on patients, George said it also became obvious that “there is only so much a health system can take.”

“Patients that would normally be in an ICU were triaged and helped on the medical floors,” he said, noting that medical personnel were at their ‘wits end’ by the time the Cleveland Clinic

team arrived. “Emergency rooms were filling more quickly than patients could be triaged. Wait times which are normally just hours were now days. At one point, New York Presbyterian even had to open its cafeteria and put beds in there for patients.”

The hardest reality of all to accept working in the epicenter of the virus, George said, was that when patients die of COVID-19 they die alone.

“You don’t get to say goodbye,” he said. “If you’re lucky, you’re sedated enough not to know. But the person holding your hand at the end is going to be your nurse, your doctor or your respiratory therapist.”

George said he and his colleagues at the Cleveland Clinic are now hoping to use what they learned by working with patients in New York to help patients in northeast Ohio.

“It was awesome to help the patients there,” he said, “especially when I saw a few of them get better as a result of something I did in their hospital. Before he left New York, he said hospital admissions were down and there weren’t any ICU admissions during the last two days he was there. As a result, the hospital was able to close several of its newly created ICU beds.

His hope, George says, is that northeast Ohio never has to endure what New Yorkers have. But if the area does experience a surge in the coming months, experiences such as this will ensure local medical personnel have the knowledge and tools they need to help as many patients recover as possible.

“I want to work with my teams to see if we can think of different management approaches,” he said. “We may not have a cure yet, but hopefully one is coming soon.”

