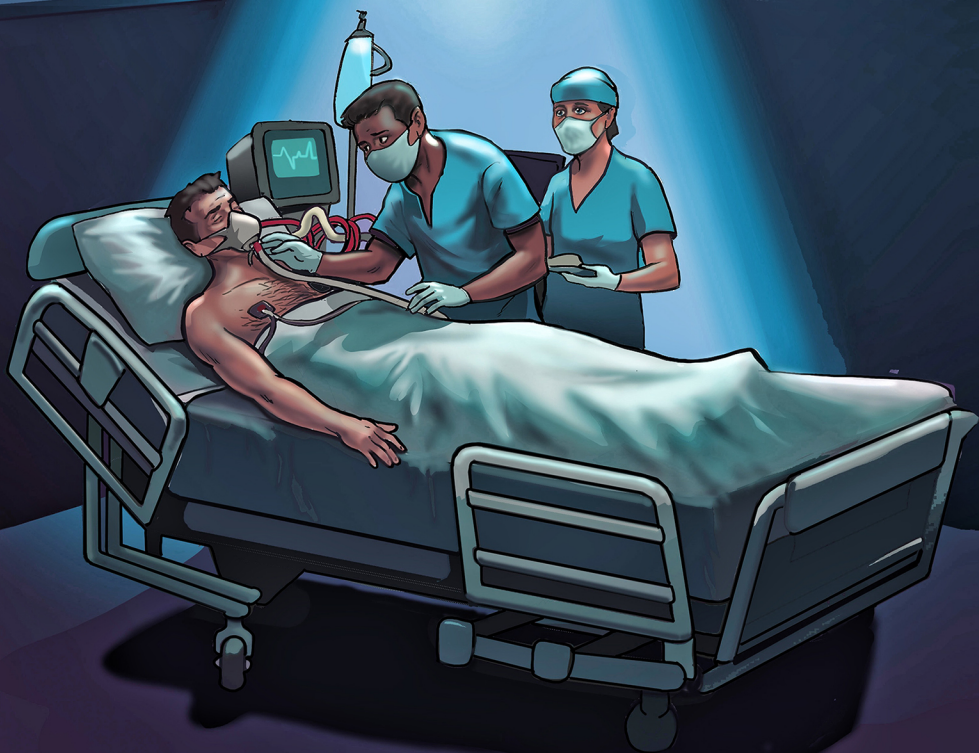


# A COVID STORY



David Paris

A  
COVID  
STORY

DAVID PARIS

*Illustrations by  
Joe Shepherd and Sergey Avdeev*

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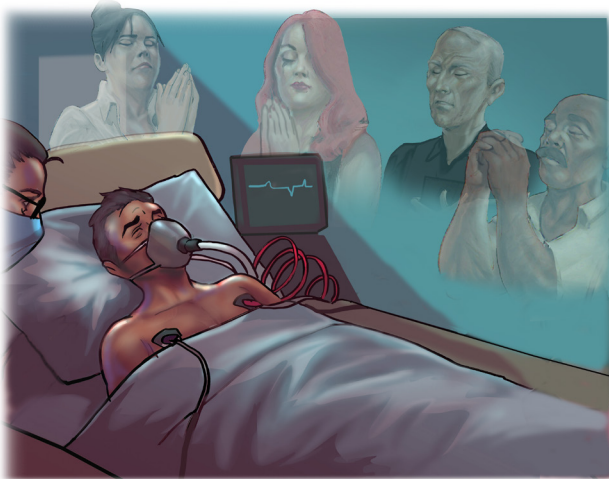
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# DEDICATION

This book is dedicated to all of the souls who have passed on due to COVID-19. It's dedicated to those who are living with a new normal. It's dedicated to the community that supports them. And it's dedicated to those who think the disease is a hoax. It isn't.





# ACKNOWLEDGEMENTS

I would not be alive without the incredible medical community at NYU Hospital. I would not be alive without New Yorkers flattening the curve in March of 2020. I would not be alive without my family and Michele Spirn demanding that I go to a hospital. I don't think I would be alive without the prayers of so many people who asked that I survive. I am so thankful for all of my caretakers who selflessly did so much for me. I am eternally grateful.

I am especially indebted to my sister who became my health proxy in my time of need. She made incredible decisions and was tireless in advocating for my life. She was the conduit to a large community, and she deserves a medal for her work in my behalf.

There were many who rallied people on my behalf: Zoë Klein, Ailene Mitchell, Angela Butch, Kyra Wolfe, Lynn Shon, Mike Dempsey, Marion Smith, and many more. Thank you to Steve and Michelle Spirn for your support and making magic happen behind the scenes. Thank you to my visitors, thank you to the wound care team (Alex Douglass, Anna Milat-Meyer, Jen Haines Perez, Laura Paris), and thank you everyone who contributed to the meal train. Thank you to everybody who wished me love. It saved me.

Thank you to my spiritual guides, Athena Malloy and Grey Wolf, who stayed with me astrally as I was negotiated between worlds. You were both integral to my recovery when I came home. Thank you E.G. Sebastian for your fabulous business coaching and friendship.

This book was written because many people thought my story was important to share. They believed in it when I struggled to do so. Jan Carla Santos facilitated extraordinary interviews with many members of my community. Josie Say worked with me for dozens of hours eliciting my story, giving me crucial feedback, and is responsible for documenting my time at the rehabilitation hospital. Zoë Klein directs so much of what I do behind the scenes: project managing, adding tremendous editing choices, pushing me beyond my comfort zone, never settling for formulaic writing, and formatting the book beautifully. Joshua Paris had the idea to include multiple voices and Ben Paris has always supported all of my writing and life projects.

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And thank you Joseph Shepard and for the amazing illustrations and Sergey Avdeev for the two oil paintings. You both added so much beauty to my story.

# INTRODUCTION

There are over 2,000,000 dead and many more people scarred for life due to COVID-19. I am not telling you their story because I can't. I am sharing my story, which was a difficult journey full of struggle, absurdity, and opportunity to reappraise my priorities in life.

I contracted COVID-19 in March of 2020. I was in the hospital for 88 days and in a medically induced coma for 32 days. Part of this was a good experience. For example, you lose a lot of weight without feeling hungry, your Amazon account goes months without any spending, and you get to hear your eulogy without ever dying. When you forget someone's name, you can blame it on your COVID brain. Finally, you can tell your enemies you're not done yet.

The tough parts of the experience were excruciating. The fear of death is terrorizing. The despair of loneliness is like being stranded on an empty planet without knowing how you got there. Losing your body functions as a dancer removes your purpose for living. It wasn't fun or easy.

However, deprivation did lead to reevaluations for me. I learned that people cared about me more than I ever realized. I understood that life was an extraordinary gift

that I was taking for granted. And I learned that if I write three cliché statements, no one will respect me as a writer.

I used an oral history format because it is a community story. The dialogue comes from interviews, my sister's daily email updates, an NYU Hospital newspaper article, and my recollections. Some names were changed for anonymity. Everything was edited for brevity and clarity, just like life.

# TALE OF TWO WOLVES

## A CHEROKEE LEGEND



*A Cherokee elder is teaching his grandson about life.*

*“A fight is going on inside of me,” he said to the boy. “It’s a terrible fight and it is between two wolves. One is evil — he feels angry, envy, sorrow, regret, greed, arrogance, self-pity, guilt, resentment, inferiority, superiority, lies, false pride, and ego.”*

*He continued, “The other one is good — he harbors joy, peace, love, hope, serenity, humility, kindness, benevolence, empathy, generosity, truth, compassion, and faith. The same fight is going on inside of you — and inside every other person, too.”*

*The grandson thought about it for a minute and then asked his grandfather, “Which wolf will win?”*

*The Cherokee elder simply replied, "The one you feed."*

*At first, I chose to feed the wolf that told me I was fortunate. I felt blessed by my community with a new opportunity to experience and appreciate life. However, one day, I had this thought that perhaps I was more unlucky than lucky. I fed this other wolf and I fell into a deep depression for a week. These thoughts didn't serve me in any way. It was clear that the way I thought about what happened shaped my experience about what happened. I made a permanent decision about which wolf I wanted to feed.*

# HOSPITALIZATION WITH COVID-19





FRIDAY 4/3/20 11:00AM



I fell asleep in front of the fridge. I felt tired while I was walking in the kitchen and I didn't have the energy to make it to my bed. I had been sick for a week, feeling worse than I ever had in my life. I thought I might have COVID, but there was no testing at the time for anyone who wasn't a millionaire. New Yorkers were told to avoid the hospital unless your symptoms were severe. I didn't have a fever. Well, I didn't have a thermometer, so I assumed I didn't have a fever. I also didn't fix the hot water handle in the bathroom sink for eight years. I was, after all, a middle-aged bachelor and not on track to change that status.

On the eighth day of feeling sick, my sister Laura called. She warned me that if I did have COVID, it was in the second week that people got worse. As many younger brothers do, I ignored her the same way I ignored everything she said for the last 49 years. I wasn't worried because I had a teleconsultation with a doctor the day before and I was cleared of COVID.

It was only when I got a call from a family friend, Michele Spirn, that I admitted that I might have a problem. I was too short of breath to say I didn't. That was a severe symptom. She made it clear that I should go to the hospital immediately. There was some debate about whether I should go to the makeshift outdoor hospital they made in Central Park or to go to the academic hospital at NYU. I always associated Central Park at night

with certain death, so I chose the academic hospital. That decision saved my life.

## FRIDAY 4/3/20 NOON



The moment I walked into the emergency room lobby I suddenly couldn't breathe. I was told later that my lungs looked like they were made of stone. I had always wanted abs of steel; instead, I got lungs of cement. The front desk personnel asked me for my information. As I gasped for air to answer, it was clear that I was going to need extra help. Within seconds, there was an oxygen tank by my side and a wheelchair to sit down on. That was the first time in a week that I had breathed with ease. Apparently, this was a common experience for the front desk, so they were prepared.

I was brought to a waiting room and got tested for COVID. I was surprisingly happy at getting a positive result. It confirmed that my sickness was real. I also thought I could use a few days off of work. Little did I know I was about to spend 87 more nights in the hospital. Had I known this, I would have packed more underwear.

I was quickly wheeled to another room where they started experimenting with supplementing my oxygen intake. I thought there were dozens of people in the room crowding my space. In reality, I was alone. As it turns out, I started hallucinating quite early in my hospital stay.

## SATURDAY 4/4/20



**Ben Paris (Older Brother) text to family:** David is in the hospital. He has COVID. He's on oxygen because his lungs weren't supplying him with enough.

This is bad but it's not the worst. I talked to an MD friend of mine about the significance of being on oxygen. "It's less than you would think because if he didn't need extra oxygen, they would probably send him home," my friend explained. Basically, it meant "being in the hospital" and "being in the hospital on oxygen" were the same thing.

## SUNDAY 4/5/20



**Laura Paris (Older Sister) Family/Friends Daily Report:**

The hospital just called to say David is still stable although he often doesn't know who he is.

**David Paris:** I've had this existential question a lot in my life, so I didn't think my family would be too worried. However, if you really need to find out who you are, there are better ways than getting the coronavirus. I hear Buddhist retreats in Tibet are nice.

**Laura Paris' Daily Report:** His blood is 70% oxygenated instead of the average 95% for a healthy person. The hospital had administered the antimalarial drug, and the doctor said that if it was going to work, it

probably already would have. She thought it might make sense to switch to the antiviral cocktail, Kaletra.

**David Paris:** The last time I took an antimalarial drug, I was hallucinating in India and almost jumped into an alligator pit because I heard the alligators inviting me to join them.

**Laura Paris' Daily Report:** There is reversible kidney damage, but they are not sure what his baseline was. The kidney damage is from the virus.

**David Paris:** A few years back, my doctor once told me to stop drinking and smoking. I told him that I didn't do either. He prescribed that I stop lying as well.

**Ailene Mitchell (M.S. 88 Principal):** When I heard that Dave was sick, I was angry and wanted to fight. One of my people was hurt. I was like, "Are you kidding me?!" You never want this happening to somebody you love.

**David Paris:** My principal was the second person I informed that I tested positive for Coronavirus. She is mother to a huge staff of teachers, school employees, and over 1,500 students.

**Ailene Mitchell:** It wasn't an easy time. I spoke to his brother every day. We spoke to the family every day. We spoke to the staff every day. We wanted to give Dave all the energy and send him all the love. We wanted to just go right through him and demand that he lives now. He was not finished!

## MONDAY 4/6/20



**Laura Paris' Daily Report:** Apparently, David is somewhat delirious. They think that could be from a combination of the illness and not getting enough oxygen. They had ordered a psychiatric evaluation for the delirium. Once again, they do not want to give him a sedative because that can depress breathing.

**David Paris:** I have no memory of this.

**Laura Paris' Daily Report:** I am sending a sanitized computer to him. David wants to write, probably about the meaning of life, which seems like a good sign.

**David Paris:** If I were laid up in bed, I thought the least I could do is finish up these books that I've been working on for the past three years. The only problem is that it is hard to type. However, that is the same excuse I have been using for the last three years. I was going to get around to it — right after I fixed the bathroom sink handle.

## TUESDAY 4/7/20



**Laura Paris' Daily Report:** David is getting worse. He is still on oxygen, but if he ends up needing more, he will be placed on a ventilator. He is being considered for the Sarilumab trial, which is intended to suppress the runaway immune response.

**David Paris:** Not the first time I've been on trial. However, ventilators seemed even scarier than lawyers.

**Laura Paris' Daily Report:** Just spoke to the doctor who is actually on the floor with David. He thinks the Sarilumab trial is the way to go. He says Interleukin-6 (IL-6) blocks messenger molecules leading to inflammation. He says if it brings down inflammation, the clinical improvements usually come a few days later. IL6 has been successful in other diseases. David apparently signed onto the trial.

**David Paris:** I have no memory of this either.

# INTUBATION / MEDICAL COMA WEEK 1

WEDNESDAY 4/8/20



**Laura Paris' Daily Report:** Out of an abundance of caution, David was moved to the ICU. The doctors want him in the ICU so they could put him on a ventilator in case he gets worse. This is because his breathing was so laboured that he would sweat from the sheer effort of it.

**David Paris:** I remember struggling listening to phone calls. My text messages appeared in a foreign language; I don't know any foreign languages! Is 'zsgdts' a word?

**Laura Paris' Daily Report:** I spoke to David right before the doctor decided to move him to the ICU. David asked me how much longer he would be in the hospital. I explained everything that was happening. I told him that if he needed even more oxygen, he could end up getting sedated and placed on a ventilator.

**David Paris:** I thought she was being overly worried. Honestly, I was only thinking about how much more I

would endure before this conversation ended. Sedation sounded like a great option.

**Laura Paris' Daily Report:** David was just intubated and put on a ventilator. His COVID pneumonia got worse, which was visible on his X-ray.

**David Paris:** Right before going into intubation, I finally learned that I could choose the content of my meals. I was so excited to order chicken sausage for breakfast. Unfortunately, intubation got in my way, but I couldn't wait to wake up and make my first order.

**Ben Paris:** At the time, according to reports I'd seen, the vast majority (80% or so) of patients in NYC who got on ventilators never came off them. Apparently, there are at least some intermediate bad things that can happen before the final call. It seems that COVID doesn't always kill people directly. Sometimes, it attacks other organs, causing infections that can kill you. The only hope was for David to stay alive and ride it out long enough to overcome the infection and give his lungs a chance to heal. That wasn't looking likely.

**David Paris:** I was certain I was going to be okay. That did not come from a belief in God, but a belief in statistics. Nobody my age died unless they had underlying conditions such as obesity. I didn't really think I was obese, but COVID disagreed with me. As did my last girlfriend.

THURSDAY 4/9/20



**Laura Paris' Daily Report:** David was moved to a higher level of care called ECMO (Extracorporeal Membrane Oxygenation) therapy. It directly oxygenates the blood through catheters. NYU has a great ECMO center. The doctors made this decision to be ahead of the curve in case David gets worse. He also had a slight kidney reaction, which is typical for patients on ventilators.

**Laura Paris:** I read that ECMO machines are the last line of defense — for the sickest of the sick. At the time, it seemed like the numbers weren't that good. So I was really concerned that they wanted to start him on this ECMO machine already. If you ended up on ECMO, you had maybe under 5% chance of living. I asked the doctor in charge of communication with the family, "Isn't ECMO for the worst?"

**Dr. Trachtman (Doctor Liaison with Family Connect):** Oh, no, we use it differently. It's because we realized that the ventilators stressed the lungs because they're so forceful. That could be part of the reason people don't fare as well on ventilators. In comparison, the ECMO machine bypasses the lungs. It's a way of keeping him oxygenated earlier in the process before he gets worse.

**Josh Paris (Younger Brother):** ECMO is the most advanced treatment possible. They were bypassing his lungs externally while still using the ventilator to keep his

lungs moving. If he didn't get placed on that ECMO machine, he would have died.

**David Paris:** Apparently, few hospitals in the world have ECMO machines. There were only 17 machines at NYU Hospital, and I was the 16th patient on ECMO at that time. If it wasn't for New Yorkers flattening the curve, I would have died.

## FRIDAY 4/10/20



**Dr. Trachtman:** Mr. Paris had a busy night. He got a secondary infection, and he was having riders, which is uncontrollable shaking. It didn't look good for the trajectory of Mr. Paris.

**David Paris:** It's never a good sign when doctors describe near death with nice words.

## SATURDAY 4/11/20



**Josh Paris:** April 11th was my birthday. That night was David's worst night. He had to get a blood transfusion; his heart stopped; and he had a cytokine storm. The next day was Easter Sunday, and then like from the book, "And he rose like Jesus!" Of course, that's where the comparison ends.

**David Paris:** He always complained that I gave him terrible birthday gifts.

**Josie Say (Roommate):** It was haunting to suddenly have no phone or text contact. I was imagining the worst.

**Rob Matzkin (Friend):** I thought he was ghosting me. In a way, he was.

## SUNDAY 4/12/20



**Laura Paris' Daily Report:** David is stable. There is still hope. It could have gone either way, but the PA (physician assistant) I just spoke with told me they would not keep anyone on ECMO if there was no hope. He also said that they were learning that ventilators are not the best solution for COVID pneumonia, thus the high mortality for people on ventilators. ECMO gives the lungs a rest so they can recover. The good news for David is that there was no other organ failure - only the lungs were severely compromised. The long-term effects are unknown. PTSD and kidney problems are possibilities. David has a risk of losing some fingers because of his low oxygen yesterday. In order to bring more blood flow to the fingers, they are putting leeches on his fingers.

**Ben Paris:** Leeches sucking blood? I can relate.

**Dr. Ayalon (Orthopedic Hand Surgeon):** The leeches are used for issues in the extremities, especially the fingers

and toes; sometimes when there is not good blood flow. The leeches work by latching onto the patient's skin. They have an enzyme in their saliva that thins the blood to allow it to flow better into the fingers and the extremities.

**Laura Paris' Daily Report:** David experienced surges in the early evening around 5:30 PM. So, send him love this evening.

**Zoë Klein (Dance Partner/Ex-Wife):** After hearing from the hospital that Dave showed significant medical struggles always at 5/5:30pm, I organized a WhatsApp daily meditation. We called it the "5:30pm EST Prayer Pause for Dave" whereby anyone who wanted to connect to Dave at that time could send him support through prayer of any kind. It was often a fun emoji love fest for Dave. We did this every day for weeks.

## MONDAY 4/13/20



**David Paris:** Many people ask me if I was conscious while I was in a coma. For me, there was no question that I was conscious. I woke up with a clear understanding that I had been dreaming for a long time. Most of the dreams were connected with similar themes and storylines.

**Dr. Chelsea (Psychologist):** There are opposing studies on whether the brain is alive or not during comatose. Some claim that it is and some claim that it is not. I believe that the brain is indeed alive and that it

processes things from our consciousness such as fears and aspirations, which could translate to dreams.

**David Paris:** My first dream was in the early stage of my coma. This dream stood out to me because it was at that moment that I realized that I could die.

## DREAM # 1

I appeared in an audience of a theater. There was a figure, a Japanese Buddha that I recognized as guarding the gateway towards life. He sat just off the side of the stage and in front of the exit sign.

“Am I going to live?” I asked the Buddha because I knew that he had the answer. With the deepest compassion on his face, he communicated that I was going to die. He answered not with words, but with a gesture. With his finger, he brushed a white streak of paint starting from the top of his head to the side of his face, down to the jawline. In that instant, I knew his gesture meant death, and the Buddha was saddened by this tragedy.

That was always my worst fear in life — a sudden death, not being able to say goodbye, and just having to face losing my consciousness into eternal nothingness.

Out of panic, I immediately begged the Buddha for any chance of living, but he said no. Of course, I begged and begged until he finally said yes, but he could give me only the smallest sliver of a chance. With that tiny chance at

living, the Buddha told me it would be a ridiculously long and difficult journey, but I still took it. With no assurance of making it, I told him, "I'll do whatever I can, I just don't want to die."

