



Five Days at Memorial: Life and Death in a Storm-Ravaged Hospital by Sheri Fink

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I am sure we have all asked ourselves at some point how we might react if the worst struck. If faced with a disaster, would we show some semblance of courage or bravery? Would we make the 'right' call? The numerous stories of heroism to come out of any significant event, like the earthquakes and the recent tragedy in Christchurch, are examples of how the worst situations can bring out the best in people. Part of what differentiates medical professionals from the public is how we respond

to these life-threatening situations involving patients. This ability to work under pressure and make the right call is paramount. This is why resuscitation scenarios are practised regularly. But we are still fallible. We are all human and we are all capable of making mistakes, especially when we are under pressure.

The events to come out of Memorial Medical Center in New Orleans, Louisiana following Hurricane Katrina highlight this fallibility in the most tragic way. In 2005, Katrina hit New Orleans and led to significant flooding surrounding the medical center. For five days, the hospital was cut off from power, water, or any basic services. Windows were smashed to circulate air, and at night gunshots and looting could be heard echoing through the city. In the days following, staff and patients were left to survive while the hospital was slowly evacuated by air and boat. The evacuation process was flawed from the beginning. Rescue helicopters were turned away after daylight hours with over 100 patients still left inside. Priority was given to the healthiest patients, the ones deemed most likely to survive, and over 50 of the sickest patients lay in an Intensive Care Unit in the sweltering August heat and humidity. When supplies were almost gone, doctors and nurses were grappling with decisions about administering fatal doses

of morphine to patients that they felt were not going to make it out. Ultimately, 45 patients never made it out alive. A state investigation was launched and it was determined that 20 out of the 45 were victims of homicide, yet a grand jury refused to convict the doctors and nurses in question.

Sheri Fink, a former medical doctor and now investigative journalist for the New York Times, reported on the story as the truth of what happened in the hospital became public knowledge. *Five Days at Memorial* is the culmination of her six years of reporting, which led her to a Pulitzer Prize in 2009.¹ The story is told in two parts: how the five days played out inside the hospital, and the legal and political consequences of what followed the disaster. The book is well-paced, keeps you hooked, and I constantly found myself absorbed in a tale that seemed too outlandish to have actually occurred.

Despite the gravity of accusations toward some of the staff, you never get the sense that Fink is condemning them. The desperation of the staff caring for these critically-ill patients without power, running water, or basic medications is not lost on us and this provides a very balanced view of what really happened. Fink allows the reader to understand the staff's perspective of the palliative care they were providing, while also making it clear about her own position. 'Moral clarity was easier to maintain in concept than in execution.'² This clarity surrounding her own position while offering a balanced viewpoint is certainly one of the book's strongest points.

Five Days at Memorial is also Fink's condemnation of the lack of preparedness by Tenet Healthcare, the organisation that owned Memorial Medical Center. She writes, 'sometimes the ethical—the most important ethical question sometimes is the one you ask not at the moment of crisis, but the duty you have to anticipate certain kinds of crises and avoid them.'¹ You get a sense of not only what happened during the five days, but how Memorial Medical Center was so unprepared for the flooding. Fink addresses the numerous system failures of the privately-owned hospital. She shows us that post 9/11, disaster planning was focused on terror rather than natural disaster. She shows us that previous flooding in New Orleans had exposed how poorly prepared the city and the hospital were for a significant weather event. It is clear that Fink blames the company as much as the individuals for what took place over those five days, and you cannot help but agree.

There are books that we typically read as medical students. These often focus on medical professionals that exemplify the characteris-

tics of what makes a great doctor. We read them in awe, and often finish them aspiring to be the next Oliver Sachs or Atul Gawande. *Five Days at Memorial* does not have this allure. It certainly does not provide many glowing examples of doctors or nurses in their finest hour. However, I believe it is a necessary read for any medical professional who wants to understand medical ethics and medical systems in practice. There is no question in my mind that we all will face similar scenarios with extremely ill patients in front of us. The actions of the doctors and nurses who were administering lethal doses of morphine to patients who were critically ill, obviously seemed like best practice palliative care to them. Conversely, the idea of 'first, do no harm' comes to mind and had been forgotten. On reflection I can understand their reasoning, even though it is flawed. While I hope that I am never in the same situation, the same ethical decisions apply to how we treat particular patients on the ward. Decisions to halt treatment, decisions to make some patients not for resuscitation, and decisions to ease their passing with medication; all of these decisions need the ethical framework required to make the 'right call', something that the doctors at Memorial Medical Centre had forgotten. Having read *Five Days at Memorial*, I hope I make the 'right' call, but it also showed me that wrong decisions can still be made with the best intentions.

References

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