

Emergence

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We stopped living in order not to die.

Esther Perel

Spring. A time of rebirth. A time of renewal.

A time to finally emerge from a yearlong bout of isolation due to the Covid-19 global pandemic. Therapist Esther Perel refers to psychiatrist Viktor Frankl's concept of "tragic optimism, of making meaning out of suffering."¹ Perel points out that at the beginning of the Covid-19 crisis, everyone's primary focus was on physical health, but she reminds us that uncertainty and anxiety accompanied these dire circumstances. No one knew what was to come. Adjusting one's mindset allowed people to cope; we couldn't control what was happening, but we could control how we responded to it. As we approach perhaps a turning point in the pandemic, Perel recommends investing in the "core facets of relational health: empathy, dialogue, commitment, responsibility, the sharing of power and resources."¹

Adjusting one's mindset may be easier if a crisis can be contained, if there is an end in sight. This spring, as vaccines are being administered and states begin to relax their mandates on wearing masks and on social isolation, allowing restaurants, bars, and theaters to fully reopen, many people rejoiced. Tired of having to stay home, to work from home, to help their children with virtual learning at home, folks flocked *en masse* to public spaces, re-emerging into "normal" life. Spring breakers, for example, crowded onto southern beaches in such numbers that cities resorted to curfews.

French painter Henri Matisse (1869–1954) captured this frenetic feeling of freedom in his 1910 painting *Dance*.² Five anonymous figures exhibit raw energy as they dance in a circle; nude, their features

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Henri Matisse. *Dance*. 1910. Hermitage Museum, St. Petersburg.

are obscured, so the emphasis is entirely on the rhythm of their vibrant movement. The red paint of the figures sharply contrasts with the dark blue and green background, further enhancing the feeling of vitality. The background itself has no reference points; the focus rests entirely on the exuberant figures lost in the dance.

But wait.

People may feel as though "normal" life is within reach, but the coronavirus is not through with us. Many people experience lingering effects of the infection itself or of the restrictive circumstances of a year of isolation. Writer Amanda Mull points out that "the physical consequences of extended disruption, isolation, and stress have begun to make themselves known in doctors' offices and telehealth video calls."³ Mull herself recognizes the effects of working from home—sitting hunched over a laptop with "low-grade headaches, sore shoulders, a stiff neck, dry skin."³ Physician Jaspal Singh of Weill Cornell Medicine

confirms these kinds of ailments, “I was seeing a lot more neck and upper back pain, also accompanied with headache.”³ Dr. Singh pointed out that prolonged isolation has been worse for the elderly, who “are not taking their walks and are getting weaker in their legs. They are losing confidence in their gait, which causes further weakness.”

Pediatric physical therapist Nancy Durban in Cincinnati suggests that increased anxiety from the pandemic affects children and teens. Online classes, a lack of recess and/or competitive sports, and not being with friends produces muscle tension that creates pain and interferes with their sleep. As schools reopen and physical activities resume, children and teens may injure themselves by not understanding their diminished physical capability.³ Ophthalmologist Sunir Garg notes that staring at screens all day causes less frequent blinking, which can contribute to dry eyes, “When the eyes feel kind of dry, scratchy, and prickly, it can make things blurry.”³ Athena Poppas, chief of cardiology at Brown University, maintains that depression and anxiety from months of isolation contribute to cardiovascular problems, “Loneliness and social isolation increase the risk of myocardial infarction and stroke by up to 30 percent.”³

Writing in *The Atlantic*, Ellen Cushing worries that we are forgetting how to be normal, “I first became aware that I was losing my mind in late December.”⁴ Brain fog settles in—forgetting your train of thought, how to do things you ordinarily did regularly, the name of your neighbor. Neuroscientist Mike Yassa says that everyone is experiencing mild cognitive impairment due to trauma, boredom, stress, and inactivity.⁴ What is worrisome is the long-term effect, so there is hope that emerging from pandemic isolation should provide the novelty and stimulation the brain needs to sharpen memory and learning.

Unfortunately, variants of the original virus are appearing across the globe, creating a fourth surge at least in the United States just as people are venturing forth. Fortunately, vaccines are available and they are effective. Fifty million people have already received the required number of doses and should be protected from the more serious effects of the coronavirus. Everyone who is eligible should be able

to be vaccinated by late spring.⁵ The Director of the Centers for Disease Control, Rochelle Walensky, is not as sanguine about the current situation as one would hope, talking of “the recurring feeling I have of impending doom” since the variant “is both more transmissible and more deadly for the unvaccinated.”⁵ She encourages people to “hold on a little longer” and to continue practicing modified social isolation while wearing masks.

University of North Carolina professor Zeynep Tufekci suggests employing “ring vaccination,” correlating vaccination surges with Covid variant surges.⁵ Setting up satellite clinics and providing vaccines to vulnerable areas could help control outbreaks. She also suggests delaying opening up for a month or so, until the 100th million person is vaccinated.⁵ Biologist and former Harvard Professor William Haseltine is concerned that although the current variants could cause milder infections, as the viruses continue to mutate, cases could become worse. Herd immunity is a “fantasy... The best we’ll get is seasonal herd immunity. We have 60 years of experience with coronaviruses, and they come back every year.”⁶

Consider the fresco found in the ruins of the Knossos Palace on Crete. It depicts bull-leaping, an activity apparently common in the Bronze age Minoan culture that flourished in Crete and the Aegean Islands. The bull is dangerous, as are the Covid variants. The leaper vaults over the bull’s back, thinking he is safe. But who is to say that the bull won’t double back and run him down?



Bull-leaping. Stucco fresco. 1450 BCE. Palace of Knossos. Crete.

Texas Tech University Professor of Internal Medicine Gilbert Berdine invites us to imagine a modern bull-leaper, in this case, the rodeo bull rider in George Strait's song "Amarillo by Morning."⁷

*I'll be looking for eight
When they pull that gate,
And I hope that judge ain't blind.*

The cowboy must stay on the bull's back for eight seconds for his ride to count. Dr. Berdine points out that bull riding is a perfect metaphor for treating chronic disease, e.g., lung cancer, interstitial lung disease, or COPD, since "The bull always wins. The bull never stops kicking. The bull never gets tired."⁸ A cowboy who is thrown is often trampled. Covid-19 and its variants never stop kicking and they never get tired. They'll be back in some form, and the risk is that recurring coronavirus infections will become the new "normal."

*And I, what fountain of fore am I among
This leaping combustion of spring? My spirit is tossed
About like a shadow buffeted in the throng
Of flames, a shadow that's gone astray, and is lost.*⁹

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