

“I’m just so thankful for the experience that I had there, because it could have been a different conversation”

Every day patients receive news about their health. News that they have cancer. Confirmation that their illness has been cured. But in the middle of a global pandemic, the last thing Chet Haney wanted to hear was that he had tested positive for COVID-19. As the pastor of Highland Terrace Baptist Church in Greenville, Chet is a man of faith and a respected spiritual leader. A journey to the brink of death was about to test that faith.

Shattered glass

Chet Haney’s lungs looked like shattered glass. And not in the same beautiful way as the stained glass windows in his sanctuary. They were opaque and heavy, filled with fluid as a result of the COVID-19 virus which had ravaged his body. Only weeks before, he had stood before his congregation and proclaimed the goodness of God. Now, he was in the intensive care unit, calling his wife to make sure she knew where to find important documents, like life insurance, if the seemingly inevitable happened.

His fight against coronavirus had reached a turning point. Either he would begin to recover, or he would start to decline.

A simple check-up

In early November of 2020, Chet wasn’t feeling great.

But he also wasn’t feeling terrible. He was certain that he just had a sinus infection. With COVID-19 running rampant throughout Hunt County, he took a rapid test at his local dentist office to make sure he wasn’t putting others in danger. The test showed that he was negative for coronavirus.

Relieved, he returned to work. But he wasn’t getting better. Convinced that something more serious was wrong, his family and staff convinced him to visit Hunt Regional Medical Partners Urgent Care to be tested again.

Thinking he would be in and out, he arrived and waited as the practitioner examined him. Chet wouldn’t get the chance to find out the results of his test at Urgent Care. Instead, he was sent directly to the emergency room. As it turned out, he had silent hypoxia, a condition that occurs when blood oxygen saturation levels are low but the patient is not



Chet Haney

**Inpatient COVID-19 Unit
& Intensive Care Unit**

> BY CHELBIE BIRDWELL

exhibiting symptoms of breathlessness.

Hypoxia is dangerous because it means the lungs, tissues, and other organs are not receiving adequate amounts of oxygen. The organs most affected are the brain, the heart, and the liver. If the hypoxia is severe, irreversible damage can begin within minutes and cause coma, seizures, and death. An oxygen saturation of 95 to 100 percent is normal for healthy children and adults. Chet's levels were in the 80s with dips into the 70s. According to his oxygen levels, there is no way he should have been able to walk.

Chet wasn't out of breath. And he didn't feel that bad. So it came as quite a shock when he was admitted to the hospital. He had no way of knowing that his overnight observation would turn into a month-long stay.

History of immune disease

COVID-19 is known to affect immunocompromised patients more severely than those with no underlying conditions. Unfortunately for Chet, his medical history puts him in the first category.

In March of 2019, Chet fell and broke his elbow, resulting in strange swelling that wouldn't go down. As it turned out, the swelling was a result of inflamed lymphatic tissue. Chet went from having a broken bone to a lymphoma diagnosis.

"That was a blow, of course. You don't want to hear that you've got cancer. But, Dr. Shreedhara at Texas Oncology is wonderful. I cannot sing their praises enough," said Chet.

"I love her approach. And my lymphoma has been under control all this time with no treatment," he said.

For two years, Chet's lymphoma had remained stable. His bi-annual scans even showed signs of his tumors shrinking. But when he contracted COVID-19, his lymphoma had consumed all of his available immune system resources. He simply didn't have any antibodies to fight with.

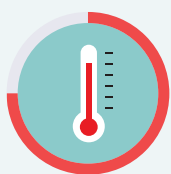
"One of the practitioners said, 'your antibodies are somewhere between the recruiting station and bootcamp. And they're just not ready to fight this battle,'" recalled Chet.

His antibodies may not have been ready to fight, but his medical team was. After a week of inpatient care, Chet was moved to the intensive care unit where his real battle would begin.

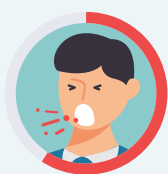
A series of setbacks

Being admitted to the hospital was tough. Then, a series of covid-related complications pushed Chet's health even deeper into crisis.

Symptoms of Covid-19



Fever
78%



Cough
57%



Fatigue
31%



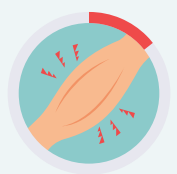
Loss of Smell
25%



Difficulty breathing
23%



Shivering
18%



Body aches
17%



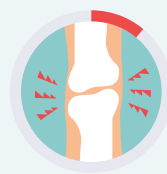
Wheezing
17%



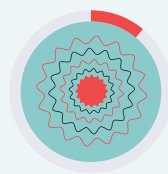
Headache
13%



Sore throat
12%



Joint pain
11%



Confusion
11%



Dizziness
11%



Diarrhea
10%

“The first few days, it's ‘Mr. Haney, you've got COVID. Mr. Haney, now you've got pneumonia. Mr. Haney, you've got ground- glass opacity, which means your lungs look like a shattered windshield on the scan and the x-ray. Mr. Haney, you have acute respiratory failure. Mr. Haney, you've got thrombocytopenia,’” recalls Chet.

Every day, his condition worsened. His wife, Terri, was at home alone, also fighting COVID. She had nobody to take care of her, and Chet's health was rapidly deteriorating.

“She's the one that really suffered, even though she wasn't as sick as I was. She had COVID pneumonia and she was by herself at home,” he said.

and pulmonologist Mohan Philip, MD, recommended he be put on a ventilator. But Chet wasn't prepared to take that step.

Instead, they settled on using the ventilator machine with a high-flow cannula and bilevel positive airway pressure (BPAP) instead of intubation. But even with the supplemental oxygen, Chet's oxygen saturation levels still weren't where they needed to be.

Along with Dr. Philip, Chet's physicians also included infectious disease specialist Mohanad Bakleh, MD, and critical care pulmonologist Badar Kanwar, MD.

“They were overloaded along with all the nursing staff. It's a tough environment and situation,” he said.

“They were just watching my condition deteriorate. And it was discouraging.”

Still, he was forced to make a heartbreaking call to her to talk about his final wishes and important information she should know if he didn't recover.

“That was practical because I didn't want her to have to try to figure that out and me not be there to help her,” said Chet.

“I honestly thought I might kick the bucket with the way things were going. It just wasn't looking good,” he said.

It was time for Chet to make some decisions of his own. His ICU team, including critical care specialist

“They were just watching my condition deteriorate. And it was discouraging,” he said.

Still in the early days of fighting COVID-19 and desperate to save his life, his care team tried every option available. That included multiple rounds of convalescent plasma, remdesivir, an anti-viral medication, steroids, antibiotics for his pneumonia, lovenox injections for blood clots, and even dapsone, a prescription used to treat leprosy.

“I was glad to get everything they wanted to give me. And they gave me the whole arsenal. I told them ‘bring it on. I'll take it,’” he said.

“I was getting world-class care right here in Hunt County.”

“I heard Dr. Kanwar was spending all of his time in the library, reading about COVID, trying to learn what he could,” he said.

Finally, Chet’s decline stopped.

“Dr. Bakleh comes in and says, ‘Mr. Haney, we can’t tell you you’re getting better. But I can tell you this, you’ve stopped getting worse.’” said Chet.

And just like that, his health began to turn around.

A turning point

Once Chet stopped getting worse, it was time to begin physical therapy. He quickly went from thinking he was about to die to doing five workouts a day. It was essential that his lungs regain strength.

“I was honestly typically still trying to finish my fifth workout at 11:30 at night. The big thing was the diaphragmatic breathing,” he said.

Slowly his oxygen numbers began improving, proof that he was starting to get better. As the days went on, he developed his own fan club rallying around his recovery.

“It was so cool to see a little crowd gather around the ICU window. These nurses, they weren’t really watching me so much, they were watching that oxygen number because it was staying up. Sometimes I was jogging in place and it would go up to 98, which was just unbelievable. We were just so happy about that,” he said.

When he was finally able to decrease his supplemental oxygen, he was able to leave the ICU

and move back down to a regular inpatient room. One of the things that gave Chet hope during his stay is a conversation with a COVID expert. Through a friend, Chet was introduced to Dr. Lawrence Smith, an authority on COVID treatment protocols and physician-in-chief for Northwell Health, New York’s largest healthcare provider.

“He actually called me and told me everything that can be done, in detail. Basically everything he told me, I was already getting from Dr. Kanwar, Dr. Phillip and Dr. Bakleh. And I can’t say that for my church members and friends who were treated elsewhere,” said Chet.

“I was getting world-class care right here in Hunt County. That sounds like hyperbole, but it’s really not,” he said.

Long-haul healing

Even after he was able to go home, Chet still had many miles to go before he was given a clean bill of health.

The first person to review his condition was his cardiologist. When your body is deprived of oxygen, it can cause heart problems. Chet was told that the most important thing he did was to survive.

“He said, ‘now we’ve got some things to work with since you didn’t die,’” recalled Chet humorously.

He also saw his primary care provider, Aspen Ingle, FNP-C with Hunt Regional Medical Partners Family Practice at Wesley Medical Plaza. It was during a visit with her that he learned that his lymph nodes had grown since his last scan.

"I thought I might have to pay the piper this time," said Chet who went back to the Lou and Jack Finney Cancer Center to check for tumor growth.

But when he went for a new scan, the lymph nodes were once again stable.

"We looked at every single node and all of them were stable. Which means, I'm doing fine," he said.

"I'm now two years post-diagnosis of lymphoma, which apparently is a big deal. And I survived COVID with lymphoma," he said.

Chet has been determined to be a "long-hauler"—a person who still exhibits symptoms months after recovery. He has found that exercise has had the

One will be taken

Now on the other side of COVID, Chet knows that he is fortunate to have had the outcome he did and has watched while others have not.

"I had so many people praying. I just thank God so much for every single prayer, because it's just really kind of overwhelming to think about. I have a good friend who is a pastor my age who died of COVID pneumonia," said Chet.

"I think about where the Bible says, 'one will be taken and the other left,' and you wonder how to understand the mysteries of life and God's will," he said.

"They are truly healthcare heroes, no doubt about it."

biggest effect on his remaining symptoms.

"I got discharged from physical therapy before I left the hospital, but I knew that was my ticket. I've stayed on sort of a self-imposed regimen of a little bit of weightlifting and then treadmill," he said.

Now, Chet says he feels healthier than he did before the virus.

"I'm in a better shape from the weightlifting and exercises I've been doing, but I'm not satisfied yet. I'm going to be awhile getting there, but that's my intention is to keep on this path and just see how far I can go getting fit, said Chet.

"I was determined and I still am. It feels good to feel good," he said.

With a deeper understanding of the loneliness and brutal nature of the disease, Chet says he appreciates those who work in healthcare more than ever. Now every time he passes by the hospital, he is overwhelmed with gratitude.

"They had their share of cases of people who didn't work out so well. I'm just so thankful for the experience that I had there, because it could have been a different conversation," said Chet.

"They are truly healthcare heroes, no doubt about it," he said.

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