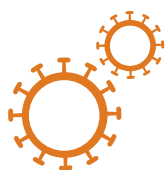


Serious COVID-19 Illness: Life-support treatments and complications

Information about the potential benefits and harms of the life-support treatments that may be offered in severe COVID-19 illness. This information can help each one of us to plan ahead for our care, if we become seriously ill from COVID-19.

After reading this information, use our resource '[Be prepared in the time of COVID-19](#)' to start planning for your care.

Visit [HealthLink BC website](#) or call 8-1-1 for general information about COVID-19, how to protect yourself and what to do if you suspect you have the virus.



What we know about people who get sick with COVID-19

- Most people with COVID-19 recover on their own while self-isolating at home.
- A small number of people become sick enough to need care in a hospital. A few of them become seriously ill and may be admitted to hospital intensive care (ICU).
- Older adults and people with existing medical conditions are more likely to become seriously ill with COVID-19 and have a higher risk of dying.

There is currently no cure for COVID-19.

The goal of treatment is to give your body the chance to fight the virus.



How does admission to an ICU help someone seriously ill with COVID-19?

Admission to ICU allows for care and treatments that are not available elsewhere in a hospital, including:

- Constant care and close supervision by specialized health-care providers.
- Treatments that may save a person's life

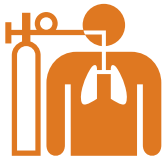
Life-support treatments that may be offered in the ICU

- A breathing tube connected to a breathing machine (a ventilator).
- Cardiopulmonary Resuscitation (CPR) if the person stops breathing or their heart stops beating.



Possible complications following discharge from ICU

- Memory problems, concentration problems, emotional changes.
- Trouble performing simple tasks such as cooking, cleaning, making phone calls.
- Infections.
- Permanent lung damage from being on a ventilator for a long period of time.



Why people seriously ill with COVID-19 are often treated with a ventilator

- People seriously ill with COVID-19 find it difficult to breathe on their own.
- A ventilator pushes air through a tube directly into a person's lungs.
- The ventilator may keep them alive long enough for their body to fight the disease.

How well does ventilation work?

- Most people seriously ill with COVID-19 who are put on a ventilator do not survive.
- Those who survive may never return to their previous health.
- The longer people are on a ventilator the more likely they are to have a poor outcome or die.



What is cardiopulmonary resuscitation (CPR)?

CPR is an emergency procedure used if you stop breathing or your heart stops beating. It can include:

- Pressing forcefully on your chest and possibly breathing into your mouth.
- Electrical shock and drugs to try and start your heart.

How well does cardiopulmonary resuscitation (CPR) work?

- Very few people of all ages survive CPR in hospital.
- CPR can cause injuries, such as broken ribs or bruised lungs.
- People who survive CPR often need a ventilator afterwards.
- About half of the people who survive CPR are left with brain damage and ongoing serious health issues.



Who is most likely to be helped by a ventilator or CPR?

- People who were mostly healthy before becoming seriously ill with COVID-19.
- Those who only need a ventilator for a short time (days or a week or two).

Who is less likely to be helped by a ventilator or CPR?

- Those who have heart, lung, liver, or kidney failure.
- Those who have a terminal illness, such as advanced cancer or advanced dementia.
- Those who are older or very frail.



Visit www.bc-cpc.ca/covid19 for more information and resources.

Disclaimer: This information is based on clinical studies and the experience of health-care providers, it does not replace professional medical advice.

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