

AMA Journal of Ethics®

November 2023, Volume 25, Number 11: E843-845

ART OF MEDICINE

Isolation

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Abstract

This comic tells the true story of a hospitalist physician learning from a patient how to slow down. It is a commentary on the isolating experience of hospitalization—magnified for patients by infection control precautions and hospital restrictions and for clinicians by long hours away from family and friends, particularly during peaks of the COVID-19 pandemic.

Figure. Detail from *Isolation, Connection, and Learning to Slow Down*



[\(Click here to view the entire comic.\)](#)

Media

Adobe Photoshop.

Hospitalization is one of the most isolating experiences imaginable. Separated from home and disconnected from family, friends, and other social support, patients in the hospital are frequently lonely and, in many cases, outright alone. This experience can be further compounded by **infection control precautions**, which impair socialization and hinder meaningful connection with staff. These compounding effects were exemplified in the early stages of the COVID-19 pandemic, when patients were quarantined behind closed doors and staff minimized time spent in rooms. Many hospitals banned visitation altogether, a decision decried by some as unethical.¹

It is clinicians' duty to support patients suffering from isolation; however, to do so is time-consuming and adds to their stress, especially in the context of infection control precautions and other barriers to efficiency. Personal well-being and duty to family are frequently at odds with beneficence, or the desire to be universally present for patient needs. Ethically, physicians have the right to strike a balance between the duty to care and the duty to self and family²—arguably more than ever during a deadly pandemic³—but even the briefest moments of accompaniment⁴ can make all the difference in the lives of patients, particularly during times of isolation.

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Citation

AMA J Ethics. 2023;25(11):E843-845.

DOI

10.1001/amajethics.2023.843.

Conflict of Interest Disclosure

Author disclosed no conflicts of interest.

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