“Intensive care has changed the total outlook of health services.”

Dr Subir Das - Head of Critical Care Services - Fortis Clinique Darné

Dr Subir Das joined Fortis Clinique Darné in Mauritius since 2010 and is in charge of the critical care services of the hospital. His journey in the medical sector started in 1990. He had the opportunity to study in multiple medical colleges in India and has worked for one of the oldest and largest private hospitals in Delhi, the St. Stephen’s Hospital. Later on, he has also worked for the All India Institute of Medical Sciences and other private groups before joining Fortis Clinique Darné. Dr Das tells us about his department and the services available to critically ill patients.

Dr Das, please tell us about the mission and the functions of the critical care services department at Fortis Clinic Darné (FCD).

When intensive care services were started at FCD many years ago, it was a great initiative to be the first private hospital to be doing it in Mauritius. As you can make it out by the term intensive care, the department provides intense care and very closely monitors functions of the vital organs of the patients. The mission is to give high-end care to the patients.

Intensive care is the next level of care after initial care given by general practitioners and clinicians. We are going to the next level, where the patient’s condition is much more critical and require multiple organ support, so that even the most critical patients have the chance to recover and survive.

There is a common belief among people, that when someone is transferred into the Intensive Care Unit (ICU) he is in the final stage of his life. What about it?

Intensive care has completely changed the total outlook of health services. Formerly, people would think that a certain medical condition is supposed to be the end of your life. Today, this has completely changed. Though we still lose patients in the ICU, a chance of surviving from a critical condition has considerably increased. With the help of state-of-the-art instruments, equipment, the use of new technologies, improved care systems, constant monitoring and quick available corrective actions.

What are the components of the critical care services at Fortis Clinic Darné?

We have a mixed intensive care system, where we give different levels of care to different types of patients. In the same care area, we take care of coronary care patients, post-operation patients, trauma patients and all critical patients. To resume, our critical care services cater for all patients in need of organ support.

We also have two isolation sections in the ICU, equipped with devoted equipment, machines and all the life support technology needed. Those rooms are used to isolate patients who are having severe infectious diseases or having low immunity. We can isolate them in order to prevent other patients and medical staff from getting infected and still give them the intensive care they need.

The isolation rooms are also used for patients who are very delicate and highly prone to be infected by others, because of a low immune system and the nature of their illness. For example, after chemotherapy some patients develop a very severe neutropenia. Neutrophils are the components in the blood, which defend the body from infections. Because of the chemotherapy, their count falls very quickly making the patients vulnerable to any kind of infection. So, we need to isolate them.

Tell us about the special equipment of the critical care services department at FCD.

FCD is a very well equipped medical centre. We have almost all of the equipment that you can find in ICUs around the world, namely state-of-the-art ventilators, circulatory support mechanisms, dialysis machines and imaging systems like MRI and Angiography suite, amongst others. So we can cover most of the needs and are still planning to acquire many other organ support systems.

What about long-term life support?

This is a big issue, because in a private hospital a long-term life support would cost quite a lot of money. The longest life support we have provided to one single patient has been for a maximum one month and 16 days. The patient has fully recovered.

For us at FCD, there is no issue to give life support as long as required, but we find that the patient cannot hold money.tarily. At some point, they don’t have the necessary funds and the insurance policy is also not sufficient. Some patients try to get help from the government – the country has a fantastic mechanism to support anybody who requires a life support. Till date, we are not able to give a hospice care and we do not have outreach system. This is because we are not yet so well equipped to be sending machines out of our hospital. This shall come with time.

How is the critical care services department linked to other services of the clinic?

It is the most essential unit of the whole hospital. The department caters for the critically ill patients. So, it will definitely be looking after all the patients who are requiring critical care form any department. We have almost every department interlinked with the critical care services. We also have an extremely coordinated code blue system. My team is always very alert and rushes to help whenever they are needed.

Dr Das, is FCD equipped for disaster management?

Yes, we have a very planned disaster management system. However, being a private hospital, we do not have a huge amount of cases to deal with. Still, we have all our clients on board and protocols have been laid down. So, if there is a mass casualty, we have a system by which we can immediately triage and determine who needs what kind of help and very quickly move forward.

On the other hand, we should not forget that no disaster system is fool proof. Things do not necessarily work exactly as planned. You always have to improve and you will not know how until you face a disaster. No ICU can survive without a team. I have a bunch of both national and international colleagues who are really a treasure to work with. Without them we cannot reach the level required. The team is always going on training sessions in order to further improve and maintain the level of our services.

In addition, I would like to say that we are always ready to come forward and help the country in any time of need. We will be more than happy to give our support to the state at any level if asked for. I also want to convey my regards to all my doctor colleagues without whom this endeavour cannot be possible.