

A specialized machine kept Maria Young alive and fighting COVID-19 at Hopkins. Now she wants more resources for critically ill patients.



Maria Young, of Rockville, stands outside the Billings Administration Building at Johns Hopkins Hospital on Oct. 7, seven months after being treated for COVID-19. **KIM HAIRSTON/BALTIMORE SUN**

'Last-chance therapy'

By Hallie Miller

As Maria Young came to, she had visions of being held captive on a cruise ship. Trapped against her will, she cried out for help.

It was early February, more than three months since the health communications specialist from Rockville contracted COVID-19. She spent that time under a heavy blanket of sedation as a team of medical professionals at Johns Hopkins Hospital in Baltimore worked to save her life.

Young, 42, has no memory of those months. But the physical and emotional scars she carries from the near-death experience, and its aftermath, may never heal.

"They had multiple conversations with my parents about preparing for the end of my life," Young said in an interview. "The trauma they lived through during that time, I'll never understand." Young is one of some 540,000 Maryland-

ers to have been infected with the coronavirus since the state health department began tallying cases in March 2020. While more than 10,000 people have died statewide, thousands more have been hospitalized and brutalized by the disease that continues to perplex medical professionals, scientists and researchers, who say much about it remains unknown.

Countless families, communities and extended networks have been ravaged by the virus. Young, for example, said her extended critical care stay forever altered her family.

Turn to Therapy, Page 12

New unit takes on first cop cases

As part of state reform package, police no longer investigate themselves after deadly shootings

By Jessica Anderson

When a 26-year-old man pursued by police crashed his vehicle in Baltimore County and died, a detective from a new division in the Maryland attorney general's office, along with members of the state police crash team, was dispatched to the scene.

Two days later, on Oct. 11, investigators from the Independent Investigations Division again headed to Baltimore County, this time after a county officer shot and killed a man who police said was wanted in connection with an early morning robbery at a 7-Eleven.

The cases are the first test for the unit, which along with Maryland State Police, now investigates all deadly uses of force by officers across the state. The change took effect Oct. 1 and is part of a package of police reforms the General Assembly passed this year.

"The reception has generally been really positive," Dana Mulhauser, chief of the division, said in an interview Tuesday.

"The law enforcement agencies recognize the need for this legislation."

Several attorneys who have represented relatives of people killed by police said they are watching the unit's work closely, while the Harford County sheriff has raised concerns about whether the involvement of state investigators could hamper the duty of his office to investigate possible crimes.

Turn to Unit, Page 8

INSIDE FDA panel examines mixing, matching doses

Study shows that approach gives people who received J&J vaccine a stronger antibody response. **NATION & WORLD, PAGE 3**

Louisville to retire Lamar Jackson's No. 8 jersey

Jackson joins Johnny Unitas as the only players in school history to have had their numbers retired. **SPORTS**

'Short-lived' American dream

A Baltimore family's property taxes more than doubled, but delays in recording home purchases left them in the dark

By Jean Marbella



Travola Foster and her fiancé searched for months for their first home, a difficult enough task even without a pandemic and competitive housing market. They were outbid a couple of times and nearly gave up.

But then Foster got an alert about a home in Ashburton, close to where she works and spacious enough for her household of five. She quickly arranged to see it, and soon her real estate agent knew he had a sale on his hands.

"When everybody starts assigning rooms," Jack Mager said, "that's usually a good sign."

The couple bid \$425,000, about \$25,000 above the asking price, and settled on Jan. 19.

"Everything was perfect," said Foster, 38,

the office manager for an electrical contractor.

But as she, Brian Carlos Plattenburg, 39 and a construction foreman, and their three children settled in, little did they know that the financial ground was shifting beneath them.

A reassessment of their home's value shortly after they bought it more than doubled their property taxes, adding hundreds of dollars to their monthly mortgage payment. But due to pandemic-related delays in recording real estate transfers, they had no idea until about 1 1/2 months ago because the notification went to the previous owner.

Turn to Taxes, Page 2



Travola Foster looks over paperwork for her home in Ashburton, which has property taxes that have more than doubled after a reassessment. **KARL MERTON FERRON/BALTIMORE SUN**

amazon

+ SIGN-ON BONUSES UP TO \$3,000
Pay UP TO \$22/HR
amazon.com/apply

Amazon is proud to be an equal opportunity employer.

Learn more

FROM PAGE ONE

Maryland coronavirus cases by the numbers

Confirmed deaths in parentheses

Confirmed cases: 549,679
Positivity rate (7 day): 3.69%
 Female 287,856 (5,029)
 Male 261,823 (5,442)
Confirmed deaths: 10,471
Probable deaths: 232
Currently hospitalized: 691
Acute care: 514
Intensive care: 177
Ever hospitalized: 49,840
Released from isolation: 11,413
Fully vaccinated: 3,960,647
State population age 18 and over with at least one dose: 85.1%

CONFIRMED CASES BY COUNTY

Allegany	9,531	(240)	Harford	20,178	(341)
Anne Arundel	52,028	(739)	Howard	22,380	(267)
Baltimore	75,550	(1,772)	Kent	1,664	(52)
Baltimore City	60,710	(1,298)	Montgomery	81,407	(1,645)
Calvert	5,539	(100)	Prince George's	98,674	(1,665)
Caroline	3,071	(46)	Queen Anne's	3,782	(68)
Carroll	11,531	(279)	St. Mary's	9,505	(159)
Cecil	8,531	(171)	Somerset	3,274	(52)
Charles	14,221	(249)	Talbot	2,769	(51)
Dorchester	4,008	(76)	Washington	18,930	(375)
Frederick	23,742	(362)	Wicomico	10,768	(211)
Garrett	2,975	(76)	Worcester	4,911	(115)

BY AGE RANGE

0-9	37,573	(4)
10-19	60,603	(7)
20-29	98,945	(53)
30-39	94,212	(136)
40-49	80,108	(354)
50-59	78,786	(960)
60-69	52,786	(1,807)
70-79	29,021	(2,636)
80+	17,645	(4,512)
Data not available		(2)

BY RACE/ETHNICITY

African American (NH)	172,692	(3,741)
Asian (NH)	13,302	(341)
White (NH)	207,664	(5,352)
Hispanic	77,770	(868)
Other (NH)	25,380	(114)
Data not available	52,871	(55)

*Note: NH = Non-Hispanic
 Source: Maryland Health Department (updated Saturday morning)*

Therapy

from Page 1

"There's a ripple effect after ICU stays," she said. "The trauma isn't done when the person survives."

Young attributes her recovery to the dedicated team of health care workers who didn't give up, even as her lungs weakened past the typical point of return. She also credits the ECMO machine, a device that oxygenated her blood outside her body to lower the demand on the heart and lungs and gave her more time.

Now a revitalized Young hopes to offer others the same fighting chance.

'Mariacle'

Young and members of her care team describe her survival and near-full recovery as nothing short of miraculous.

Close friends dubbed it a "Mariacle." ECMO machines — short for extracorporeal membrane oxygenation — are costly and require trained operators and staff to monitor the patient and the machine at all hours of the day.

Data from ELSO, the Extracorporeal Life Support Organization, which keeps a registry of patient outcomes on ECMO machines, shows that the global mortality rate for COVID-19 patients treated on ECMO in the past 90 days stands at about 48%. Most of the ECMO cases are logged in North America, highlighting a likely discrepancy in worldwide resource allocation and care.

So expensive and resource-heavy is the equipment that many U.S. hospitals don't keep the machines on hand. And those that do have the equipment may not have the clinical expertise on staff, especially given the nationwide nursing shortage exacerbated by the public health crisis.

"The largest limiting factor right now in our center, our system and our nation is our shortage of nurses," said Dr. Ali Tabatabai, associate professor of medicine at the University of Maryland School of Medicine and medical director of the Lung Rescue Unit, Adult ECMO and the Biocontainment Unit at the institution's R Adams Cowley Shock Trauma Center.

"Larger centers of excellence who have more experience and application on a routine basis should have better [ECMO] outcomes than those who do it infrequently."

Andy Owen, a Maryland Department of Health spokesman, said the state's hospitals had 13 ECMO machines as of Oct. 6, but the number fluctuates. It has been as high as 22, he said.

There were 325 ECMO procedures performed in Maryland during 2020 and 162 during the first two quarters of 2021, according to data from the Maryland Health Care Commission.

Dr. Errol Bush, surgical director of lung transplants and severe lung disease at Hopkins' Comprehensive Transplant Center, oversaw Young's care. He said the institution could "reasonably" treat about 12 patients at a time, but even then it would be limiting the degree of care it could provide to other patients.

Hopkins has treated 40 COVID-19 patients with ECMO since the coronavirus pandemic reached Maryland, Bush said. He said the hospital saw 12 total ECMO patients in 2019.

Young arrived at Hopkins last fall just as coronavirus cases, hospitalizations and deaths began to skyrocket across the country. In Maryland, COVID-19 hospitalizations reached a pandemic peak in January of more than 1,900 people.

Bush said Hopkins uses strict criteria to determine which patients are eligible for ECMO treatment. Using this framework, the hospital has had to turn potential patients away, he said.

"We've had to say 'No' before, much more than 'Yes,'" Bush said. "We use ECMO as a last-chance therapy after we've tried everything else."

Eligibility typically depends on how long a person has been on a ventilator, another scarce medical resource, as well as how damaged a person's lungs are already.

Of the people who do recover after ECMO, Bush said they typically start to improve after the first month. Young spent 69 days on the machine and about 100 days intubated.

to stay safe from the coronavirus. She wore masks indoors, attended infrequent outdoor gatherings and worked from home, she said.

Had COVID-19 vaccines been available to her before getting sick, Young said, she would've been first in line to get a shot. She felt a jolt of optimism last summer and fall as businesses, shops and restaurants reopened, cases and hospitalizations fell, and clinical trials testing the vaccines in humans offered promise.

Young said she started feeling ill after a weekend spent with friends, mostly outside. On Sunday, Oct. 25, 2020, she canceled plans to visit another friend.

She spent the next few days in and out of doctors' offices and emergency rooms as her symptoms worsened. She tested negative for COVID-19 several times and wondered whether she had a severe case of the flu.

Young said she listened to her gut, though, which told her a different story than the COVID-19 tests.

"All I remember thinking is that most people can handle this at home," she said. "If this is the level that you can handle at home, then, holy cow, what is the level you need to go to the hospital?"

Finally, Young tested positive for COVID-19, an early case in what became last winter's wave. Chest X-rays revealed pneumonia in both lungs. Physicians at Suburban Hospital in Bethesda transferred her to Johns Hopkins Hospital by mid-November. Within hours, she was put on ECMO.

Alone in the hospital, Young's lungs collapsed multiple times as she slept. She endured transfusions, a blood clot and infections throughout the body, including in her eyes. Her sister wrote a eulogy.

Young wasn't eligible for a lung transplant, doctors said, because she was too weak to survive the surgery. If she did wake up somehow, they added, she could develop neurological damage.

Young not only woke up but also regained almost all of her bodily functions, she said while walking outside Hopkins hospital recently. It took time, though, and some days she felt like she would never get out of bed. Swallowing, breathing and speaking all had to be relearned.

When Young's team lowered the sedation, she hallucinated, unable to separate

from the darkness that had enveloped her for so long.

"It becomes this integration between the fantasy world and reality, and you have to work through it," she said. "You have to grab onto a thread you can follow."

Advocacy

Once Young got her cellphone back, she began reaching out to stunned friends and family members. She joked about the embarrassment of having an attractive male nurse help her use the restroom — proof, she said, that she not only lived but also kept her sense of humor.

But it wasn't an easy road: She was weak, sore and woke up with a head wound and matted hair. A kind nurse cut it all off.

Young said she didn't sleep for a stretch of six days, fearing she would never wake up. Some days she felt too tired to change the television channel.

After returning home in March, members of her inner circle and her employer reached out, asking whether they could contribute to her medical bills or support her financially as she recovered. Luckily, insurance covered the costs, she said, leaving her to wonder what those without health care coverage would do after an extended critical care stay.

Even as she made gains at home, Young's family continued to reel from the experience. And one week after Young's release from the hospital, a cousin, Martha, died of COVID-19 in Ecuador.

In August, Young launched "Maria's Miracle," a nonprofit organization that aims to bring more ECMO machines and training to hospitals and connect more critical care survivors and their families with resources and financial assistance. She also is back on her feet and returned to work part time.

Young said she ultimately wants to remedy the international disparities in ECMO treatment as well, but she will focus first on the U.S., a country that boasts top-notch medical care but often fails to meet all patients' needs.

"This flattened me, made me reevaluate my values and where I want to put my time and energy," she said. "I wasn't a selfish person before, but now I want to give. I want to help. I have a different motivation now."

Superior Tours Superior Service



Atlantic City: Sat, Sun & Holidays
Ocean City, MD: 9/11 and 10/2 (Sunfest)
9/26, 10/17 St. Michael's Maryland Crab Claw Restaurant
9/5 Orioles vs. Yankees At Yankee Stadium Lower Level Seats
10/4-10/6 Tropicana Hotel Atlantic City All inclusive 2 nights / 3 days
11/9 Harriet Tubman Tour "The Total Experience"
12/2 PA Christmas & Gift Show
12/8 Radio City - Christmas Show Orchestra Seats

Charters available for all occasions.
Call Today for Reservations
410-602-1704
www.superiortours.com

SECOND CHANCE
 Retrain • Reclaim • Renew
 a 501(c)(3) nonprofit corporation

Providing Second Chances for People, Products & the Planet

410-385-1700
www.secondchanceinc.org



A ZIP CODE SHOULD NOT DETERMINE A CHILD'S FUTURE.

Find out how at:
hud.gov/fairhousing

FAIR HOUSING. SHARED OPPORTUNITY IN EVERY COMMUNITY.

Ever want to say "I'm calling my lawyer!"



MCVRC
 Maryland Crime Victims' Resource Center, Inc.

If you've been the victim of the crime, we want to advocate for you--that includes FREE legal representation!

Se Habla Español!

www.mdcrimevictims.org
 1-877-VICTIM-1

MCVRC is a 501(c)(3) organization. The Governor's Office of Crime Control and Prevention funded this project under sub-award number VOCA 2019-0098.

THE DAILY MEAL



If you're looking to whip up a delish dish, try The Daily Meal today.

TheDailyMeal.com

NOV. 5 - JAN. 9 **JAN. 14 - MAR. 20**

Irving Berlin's WHITE CHRISTMAS The Musical

Toby's Dinner & Show

MONTY PYTHON'S SPAMALOT
 You'll Laugh-A-Lot!

ticketmaster **TOBYSINNERTHEATRE.COM** **SPECIAL RATE and FREE ADMISSION!**
410-730-8311 *for groups of 20 or more!*
CONTACT GROUP SALES TODAY!

Facebook, Twitter, Instagram, YouTube icons

DUE TO THE NATURE OF THEATRICAL BOOKINGS, ALL SHOWS AND DATES ARE SUBJECT TO CHANGE. * TOBY'S DINNER THEATRE, COLUMBIA, MD