

Trauma, loss, coping and resilience among critically ill patients and providers

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Critically ill patients face a genuine existential threat to life. In the immediate context, this threat is directly conveyed to their immediate family and to their immediate care providers. For the patient, survival from critical illness is characterized by increased prevalence of anxiety, depression, and post-traumatic stress disorder, compared with unaffected controls. This is increased risk of sequelae is also seen, although less strongly, among families of survivors and among care providers. Certain pharmacologic and environmental strategies may reduce the incidence of these phenomena among survivors, as is also the case for pharmacologic and non-pharmacologic strategies among families and care providers.

Biography

Michael Jacka is a critical care physician at the University of Alberta, having qualified as an M.D. at Queen's University in 1988. He also holds an M.Sc. in Community Health from the University of Toronto (1999) and an MBA from Cornell (2012).

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