Black Doctor Dies of Covid-19 Treatment

"He made me feel like a drug addict," Dr. Susa
downplaying her complaints of pain and sugg

By John Eligon

Published Dec. 23, 2020 Updated Dec. 25, 2020

[*To read more stories on race from The New York Times, sign up here for our Race/Related newsletter.*]

Lying in a hospital bed with an oxygen tube hugging her nostrils, the Black patient gazed into her smartphone and, with a strained voice, complained of an experience all too common among Black people in America.

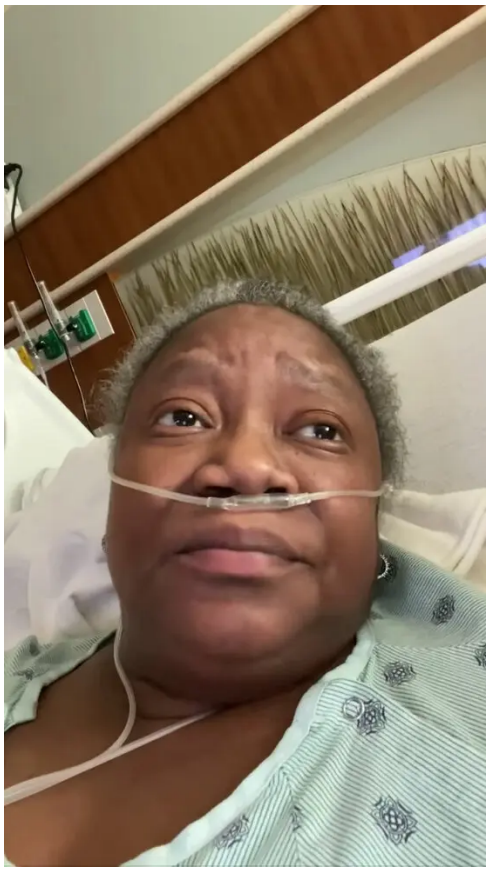
Susan Moore, the patient, said the white doctor at the hospital in suburban Indianapolis where she was being treated for Covid-19 had downplayed her complaints of pain. He told her that he felt uncomfortable giving her more narcotics, she said, and suggested that she would be discharged.

"I was crushed," she said in a video posted to Facebook. "He made me feel like I was a drug addict."

In her post, which has since circulated widely on social media, she showed a command of complicated medical terminology and an intricate knowledge of treatment protocols as she detailed the ways in which she had advocated for herself with the medical staff. She knew what to ask for because she, too, was a medical doctor.

But that was not enough to get her treatment and respect she said she deserved. "I put forth and I maintain if I was white," she said in the video, "I wouldn't have to go through that."

Dr. Susan Moore, in a screenshot from a video she took while hospitalized with Covid-19.



After Dr. Moore, 52, complained about her treatment, she received care that she said "adequately treated" her pain. She was eventually sent home, and on Sunday, just more than two weeks after posting the video, Dr. Moore died of complications from Covid-19, said her son, Henry Muhammed.

Dr. Moore's case has generated outrage and renewed calls to grapple with biased medical treatment of Black patients. Voluminous research suggests that Black patients often receive treatment inferior to their white counterparts, particularly when it comes to relieving pain.

"It's had a huge impact," said Dr. Christina Council, a primary care physician in Maryland who is Black, of Dr. Moore's experience. "Sometimes when we think about medical bias it seems so far removed. We can sit there and say, 'OK, it can happen to someone that may be poorer.' But when you actually see it happen to a colleague and you're seeing her in the hospital bed and literally pleading for her life, it just hits a different way and really hits home and says, 'Wow, we need to do something.'"

A spokesman for Indiana University Health, the hospital system where Dr. Moore complained of poor treatment, said in a statement that he could not comment on specific cases because of privacy laws.

“As an organization committed to equity and
take accusations of discrimination very serio
statement said. It added that “we stand by th
and the quality of care delivered to our patie

An intricate mix of socioeconomic and health
devastating for Black and Latino communitie
of white people, and Latinos at 2.5 times the
the Brookings Institution.

Dr. Moore tested positive for the coronavirus
according to her Facebook post, which she wrote on Dec. 4. She wrote that she had to beg the physician treating her to give her remdesivir, an antiviral drug some doctors use to treat Covid-19.

Dr. Moore said she received a scan of her neck and lungs after her doctor denied she was short of breath, despite her telling him she was, and after he told her he could not justify giving her more narcotic painkillers. The scan detected problems — pulmonary infiltrates and new lymphadenopathy, she said — and so she began receiving more opioid pain medication. But she said she was left in pain for hours before a nurse gave her the dose.

“This is how Black people get killed, when you send them home and they don’t know how to fight for themselves,” Dr. Moore said.

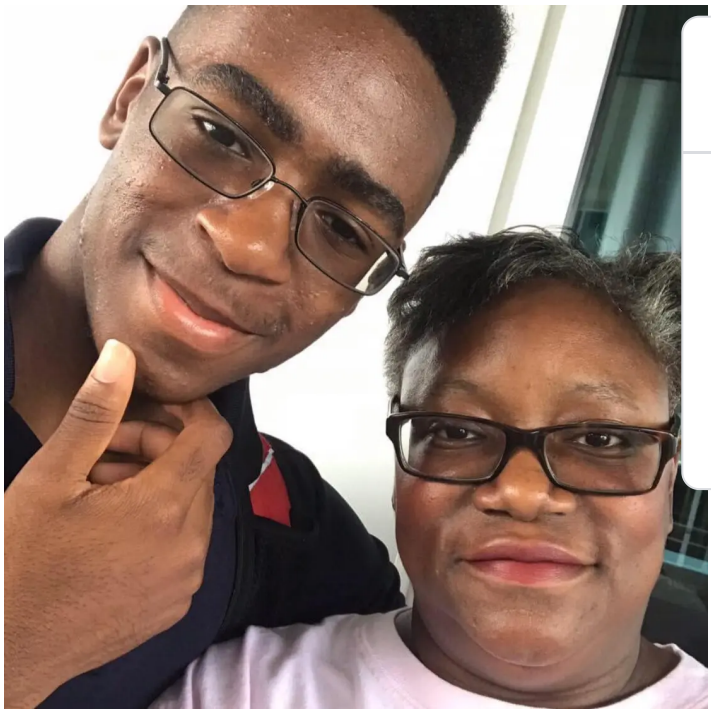
Dr. Moore’s experience highlighted what many Black professionals said they regularly encountered. Education cannot protect them from mistreatment, they say, whether in a hospital or other settings.

Born in Jamaica, Dr. Moore grew up in Michigan. She studied engineering at Kettering University in Flint, Mich., according to her family, and earned her medical degree from the University of Michigan Medical School.

She was no stranger to the challenges of getting proper medical care, said Mr. Muhammed, her 19-year-old son. She had sarcoidosis, an inflammatory disease that attacks the lungs, and was frequently treated at hospitals.

“Nearly every time she went to the hospital she had to advocate for herself, fight for something in some way, shape or form, just to get baseline, proper care,” he said.

In her struggle with the coronavirus at I.U. Health North Hospital in Carmel, Ind., Dr. Moore wrote in an update on Facebook that she eventually spoke with the hospital system’s chief medical officer, who assured her that she would get better care and that diversity training would be held. She got a new doctor, and her pain was being managed better, she wrote.



But even as things seemed to be improving at the hospital, Dr. Moore still felt that the care was lacking and that the medical staff became less responsive, according to Mr. Muhammed, who spoke to her daily. While she did not really feel like she was well enough to be discharged, she was eager to get home to take care of her parents, he said.

When she was battling Covid-19 in the hospital, she took time to order him new slippers because his had broken, Mr. Muhammed said. In his last conversation with her, she told him she was going to help him go to college.

“Even to the bitter end she was thinking of other people,” Mr. Muhammed said.

The hospital released her on Dec. 7, he said, and she was sluggish and tired when she got home. The hospital called several times to check up on her, he said, and when she did not respond, it sent an ambulance. His mother could barely walk and was breathing heavily when the ambulance arrived. She was taken to a different hospital 12 hours after being discharged from the previous one, she said on Facebook.

“Spiked a temperature of 103 and my blood pressure plummeted to 80/60 with a heart rate of 132,” she wrote.

Dr. Moore described her care at the new hospital as compassionate, and said she was being treated for a bacterial pneumonia in addition to Covid-19 pneumonia. Her condition would quickly deteriorate, however. The last time Mr. Muhammed spoke to her, just before she was put on a ventilator, she was coughing so badly she could barely speak, he said.

Doctors intubated her on Dec. 10, Mr. Muham
in her room, and more than a dozen relatives
though she appeared unconscious, he said.

By last Friday, Dr. Moore had become 100 per
said, and doctors told him she might not mak
told her that he loved her and to not worry ab

"If you want to fight, now is the time to fight,"
understand."

Two days later, Dr. Moore's heart stopped beating.