



NATIONAL CITIZENS INQUIRY

Ottawa, ON

Day 3

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EVIDENCE

Witness 2: Melanie Alexander

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[00:00:00]

Wayne Lenhardt

Could you give us your first and last names and spell them for us, please? And then I'll do an oath with you.

Melanie Alexander

My name is Melanie Alexander and it's spelled M-E-L-A-N-I-E A-L-E-X-A-N-D-E-R.

Wayne Lenhardt

And do you promise that the evidence you give today will be the truth, the whole truth, and nothing but the truth?

Melanie Alexander

I do.

Wayne Lenhardt

I think as you've just heard, we have some fairly strict timelines today. So I think what I'd like to do is do a timeline on your husband, and then we can come back and discuss it.

I'll lead you a bit here if I might. In March of 2020, your husband was diagnosed with cancer, correct?

Melanie Alexander

Yes.

Wayne Lenhardt

And he received treatment. And by November of 2020, he had gone into remission.

Melanie Alexander

That's correct.

Wayne Lenhardt

In June of 2021, he got the first dose of the Pfizer vaccine, correct?

Melanie Alexander

Yes.

Wayne Lenhardt

And this was in the Ottawa General Hospital?

Melanie Alexander

Yes.

Wayne Lenhardt

There was no reaction at that point to the vaccine.

Melanie Alexander

None at all.

Wayne Lenhardt

Then in November of 2021, you both came down with the Delta variant, correct?

Melanie Alexander

Yes.

Wayne Lenhardt

Okay. And you're both sick. Your husband ended up in the hospital for three months at that point.

At that point, you weren't able to see him because of the restrictions because you weren't so-called "vaccinated."

Melanie Alexander

That's right.

Wayne Lenhardt

That was in 2021. In February of 2022, your husband was discharged from the hospital. Then in March—11th to the 30th—he was back in the hospital. Then on, perhaps you can help me with the timeline here, April the 16th, he was back into the hospital.

Melanie Alexander

Yes.

Wayne Lenhardt

April the 18th. And that would have been 2022. Correct?

Melanie Alexander

Yes.

Wayne Lenhardt

April the 18th, your husband was back in the hospital. But they wanted him to test for COVID, which finally happened. After that, they moved him to a COVID ward where another patient that was ill was put into his room.

April the 20th, he got very ill. And he passed away shortly after that, correct?

Melanie Alexander

Correct.

Wayne Alexander

Okay. So perhaps you could tell me, then, what type of treatment and how it went during that journey?

Melanie Alexander

Greg— When he went back on the 16th of April, they wanted to do a COVID test right away. And he declined that. On the Sunday, the next day, he also declined a COVID test. But on the Monday, he received a COVID test. And when I asked him about it, I said, “How did that happen?” And he said, “I’d rather not talk about it.” That test came back at midnight on that same day. Positive.

They woke him up in the middle of the night. He was a sick man. He had chronically damaged lungs and his body had been very dependent on prednisone. So every time they tried to reduce his prednisone, he had a setback and his breathing would get worse. But anyway, they woke him up in the middle of the night after midnight and said, “You have COVID, and we’re taking you to the COVID ward.” And he tried to advocate. He said, “No.” He says, “I don’t have COVID. I’ve had COVID before and I know what it’s like and I don’t have COVID. You’re doing this against my wishes.” But they took him to the COVID ward anyway. And it was a double room. And they put him in the room by himself, which was fine; he was okay with that.

But early the next morning, they wheeled in a lady who had been at home and had broken her hip. She was an elderly lady. And she explained to him that she and her whole family had been quarantining because of Omicron and they were quite sick with Omicron. So this caused Greg great distress because he knew that he could never survive a reinfection. He asked his nurse more than once. And it’s actually recorded in his medical records that he wants to be discharged because he doesn’t feel safe in the hospital.

When he told me about it, I said, "Call me when the doctor comes in and I'll try and talk to the doctor."

[00:05:00]

So he did that. It was before lunch. The doctor came in and I asked the doctor, I said, "What are you doing bringing a symptomatic patient into my husband's room? He's immunocompromised because of his cancer, but he also has chronic damage to his lungs. He's very vulnerable." I said to the doctor, "You're standing here with your N95, your face shield, your gown, and your gloves. And yet you're leaving my husband unprotected." I said, "Please get my husband out of this room with this sick patient."

He said to me, "You make a good point, and I'll see what I can do." That doctor didn't do anything. My husband stayed in that room for 24 hours.

There was a very marked change in Greg's health condition on Wednesday morning. Instead of a temperature of 36 degrees, his temperature was above 39. Greg had been on four litres of oxygen. They tried giving him 10 litres of oxygen through the nasal prongs and it wasn't sufficient; they were trying to do damage control. They had to put him on the next level of humidified oxygen at 92 per cent plus a rebreather on top of 100 per cent. Greg had almost 200 per cent oxygen to try and be stabilized. They did put him in a private room on this Wednesday and they were doing damage control all day long.

On Thursday morning, they took him to the ICU [Intensive Care Unit]. Greg spent seven days in the ICU and then he died.

Wayne Lenhardt

I take it the questions that arise are first of all, he was immunocompromised because of all of his cancer treatment, so by putting him in with someone with an active case of Delta or whatever it was, that really is a serious issue, in that if he gets it, being immunocompromised—

Melanie Alexander

Correct and if I could just say something. Greg had Delta in November, and we are talking about April of 2022 when Omicron is the variant of the day in our society. Everyone had Omicron. And so when Greg tested positive on that late Monday night, Greg and I asked the doctors— We asked the hospital to analyse his COVID test to find out what variant he tested positive for.

Well, the result came back that he tested positive for Delta, which suggests that he did not have Omicron at the time. So he didn't have COVID when they took him to the COVID ward. He didn't have Omicron, and yet they brought a sick person who was symptomatic into his room.

Wayne Lenhardt

And I assume you were not able to even visit him because you were not classified as quote "fully vaccinated" at the time.

Melanie Alexander

That's correct. Do you mind if I explain a little bit about that? Is that okay?

Wayne Lenhardt

Sure.

Melanie Alexander

So we had started our ordeal with the hospital and with COVID— It was COVID that was really hard on us. It had been five months by the time Greg died. I found out in January that patient advocacy and the ombudsman have no authority. They totally defer any decision to be made to the nurse manager on each floor. So I had found that out in January already. So when Greg went to the ICU, I left. I called his nurse every single day, numerous times a day saying, “Please let me see my husband. I need to be with him, he's very sick. Please leave a message for your nurse manager telling her that I want to come in and be with Greg.” They assured me they'd leave a message for the nurse manager. I asked the ICU doctor as well, “Please advocate for me, please ask the nurse manager for permission for me to come in and be with my husband.”

We had been married 34 years and we'd done life together. And now he was dying slowly and painfully, and they were not allowing me to be in because I only had one shot. I also left messages on the nurse manager's voicemail pleading in tears saying, “Please let me be with him.”

As the week progressed, Greg got worse. They had to put a feeding tube in his nose and he couldn't Facetime me anymore; he wasn't strong enough to hold the phone.

I remember, one day I messaged him. I said, “I just need to hear from you to know that you're doing okay. Please let me know.” And I got two words back from him in a text; he said, “Call nurse.” He couldn't call me; he couldn't speak to me. So eventually I got a phone call back on Wednesday morning, the 27th of April, from the nurse manager. She said to me “I'm not allowing you into the hospital for two reasons. Firstly, because you're not vaccinated and that is the hospital policy and I'm upholding the policy.

[00:10:00]

Secondly,” she said, “I've gone to and spoken to your husband's nurse. I've looked at his chart and I've looked into his case. And he's not palliative at this moment, so we're not allowing you to come in.”

How can that possibly be that he was not palliative? It was barely 12 hours later I was called by the doctor on duty in the night, at about three in the morning. So just the same day, I was called by the doctor on duty saying, “Your husband is asking for comfort measures because he cannot take it anymore. He's suffering, he's gasping for breath, and he's exhausted. And he wants comfort measures. We explained to him that if we give him comfort measures, he's going to die. And he's okay with that because he's so exhausted, he can't keep battling to breathe. But he's very concerned about you and he wanted me to call you and tell you that this is his choice, that he's choosing this.” And I must be okay with this.

The doctor called to Greg and said, “Greg, is this your choice, to have comfort measures?” And I heard Greg shout out, “Yes, it is my choice.”

I resent enormously that I wasn't allowed to be there with my husband these last seven days in the hospital as he's suffering and dying. And he was definitely palliative, on a feeding tube, not able to even hold a telephone. I resent that I wasn't able to be with him.

But I have a bigger question for the hospital. I have a bigger question. My question is, how can they explain to me what protocol or what policy justifies them bringing a symptomatic patient, someone who's already so compromised, into his room? Even if they believed that he had COVID because of that test, even if they actually believed he had COVID—which he didn't; we found out afterwards that he didn't have COVID; he didn't have Omicron—how do they justify bringing a symptomatic patient into his room and not protecting him?

I believe—this was Greg's third admission to the hospital—that he was seen as a drain on the system. He was costing too much. I actually found a text from a friend yesterday. She was a friend. She wrote a text to me on January the 31st last year. And she said to me, “Melanie, love you to bits, but you really have your head in the sand. Thousands of dollars have been spent keeping Greg alive. I work in healthcare and have seen firsthand the effect of non-vaccinated people. People can't come to church out of fear of getting sick because of the unvaccinated.”

To be in the hospital in 2021 and 2022 was a horrendous situation for an unvaccinated person. The hatred, the animosity, the anger was very real. Greg never felt safe in the hospital. In January he was receiving terrible care. And I was getting very upset about it. I said “Greg, I need to complain. I need to ask for better care.” He said, “No, Mel,” he said, “Don't complain. I do not want to raise the ire of the medical staff any more than they already feel toward me.” He didn't want me to complain because he felt at their mercy.

It was a terrible time to be in the hospital as an unvaccinated person. And I do question the hospital, how they justify putting a sick person in my husband's room.

Wayne Lenhardt

I'm being reminded of the time. But let me perhaps fill in a couple more facts and then we'll ask the commissioners if they have any questions.

It was back in November of 2021 where both you and your husband, you think, came down with the Delta variant. And you recovered from it in November 2021. When your husband went back into the hospital in April of the following year it related to, apparently, the prednisone that he was taking, which was part of the cancer therapy. And you had been told to reduce that over time. And his oxygen level had gone down to 88 at that point, which is why you had him in the hospital. It wasn't because he had COVID.

Melanie Alexander

That's correct. During his COVID illness, it wasn't a cancer treatment. Greg was totally in remission. He had been declared in remission in November of 2020. But to treat his COVID, he was given a high dose of prednisone and his body had become quite dependent on it. And the goal of the medical staff was to reduce the prednisone, so I had been told to reduce it at home.

And with the reduction, each day his oxygen levels got lower and lower. And that is why he went to the hospital. He didn't have a fever. He didn't have a cold. He didn't have a sore throat, no cough, no symptoms. And that's why he declined the COVID test.

Wayne Lenhardt

Okay. I'm going to ask the commissioners if they have any questions.

No questions? I think our time is essentially up.

On behalf of the National Citizens Inquiry, I want to thank you very much for coming and giving your testimony.

Melanie Alexander

Thank you for having me.

[00:15:36]



Final Review and Approval: Jodi Bruhn, September 6, 2023.

The evidence offered in this transcript is a true and faithful record of witness testimony given during the National Citizens Inquiry (NCI) hearings. The transcript was prepared by members of a team of volunteers using an “intelligent verbatim” transcription method.

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