

## Room for a view

### Muhibullah

Few things on earth move faster than 4 stretcher bearers with a badly injured patient. First you hear the helicopter approaching, and then you feel the whirling and thumping in your chest. The Blackhawks whump down nimbly 180 metres from the back of the hospital, plywood walls resonate in time with the rotor blades. A minute or 2 later the doors of the emergency room burst apart as a blur of medics stream in carrying the wounded, slowing only at the last second to carefully set down their precious cargo in the resuscitation bays.

You can kind of tell how sick the patient might be by first looking at the face of the medic. Sergeant Lopez (a pseudonym) had sprinted in to deliver a 5-year-old boy lying half-naked and crying under a pile of woollen army

blankets. Lopez's face was smeared with dust, sweat and worry. He watched intently as the trauma team assumed the next phase of the child's care, knowing he had done everything possible and hoping it would be enough. Two hours ago, this corpulent straight-talking United States Army medic was riding south in a convoy through the Shahjoy district of Zabul province after many weeks "out in Taliban country huntin' for bad guys." He and his unit of 10 men were returning to Kandahar Airfield to resupply and were looking forward to a shower, a hot meal and a place to sleep softer than the floor of a Humvee.

As they entered a village, curious children approached the convoy thinking they might receive a piece of candy tossed from a vehicle's turret. Lopez emphatically denies that his

unit gives candy to children in this way. "The kids sometimes get way too close to the vehicles," he tells me, and a Canadian soldier overhearing our conversation adds that the Canadian Forces stopped distributing candy from moving convoys during the Balkan conflict because of the danger to the children.

Unfortunately, that morning one little boy ran into the path of a jingle truck, the driver of which had sped off without stopping. Jingle trucks are so named due to the sound made by the chain tassels that hang down noisily from the trucks' heavily reinforced front bumpers. The trucks are also typically decorated with garishly painted scenes or phrases. One of the trucks we see around camp displays a huge portrait of Benazir Bhutto along one side.

A huddle of villagers was gathering around the boy. Lopez, who resembles a more compact version of Rambo, halted the convoy and got out to examine the child lying crumpled at the roadside. After a year-long deployment in Iraq, Lopez has the experienced medic's ability to make critical triage decisions in the blink of an eye and knew immediately that he could help. He radioed for a Blackhawk helicopter to airlift the boy to medical attention.

As unusual as this may seem, the medics within the International Security Assistance Forces take something of a risk when they try to evacuate non-combat-injured civilians to military hospitals. The force maintains 4 multinational medical units to cover the southwest region of Afghanistan. Priority of admission to these well-equipped, well-staffed hospitals is given first to injured coalition soldiers, second to injured Afghan security forces and third to Afghan civilians. The medical air transport controllers are highly selective about which

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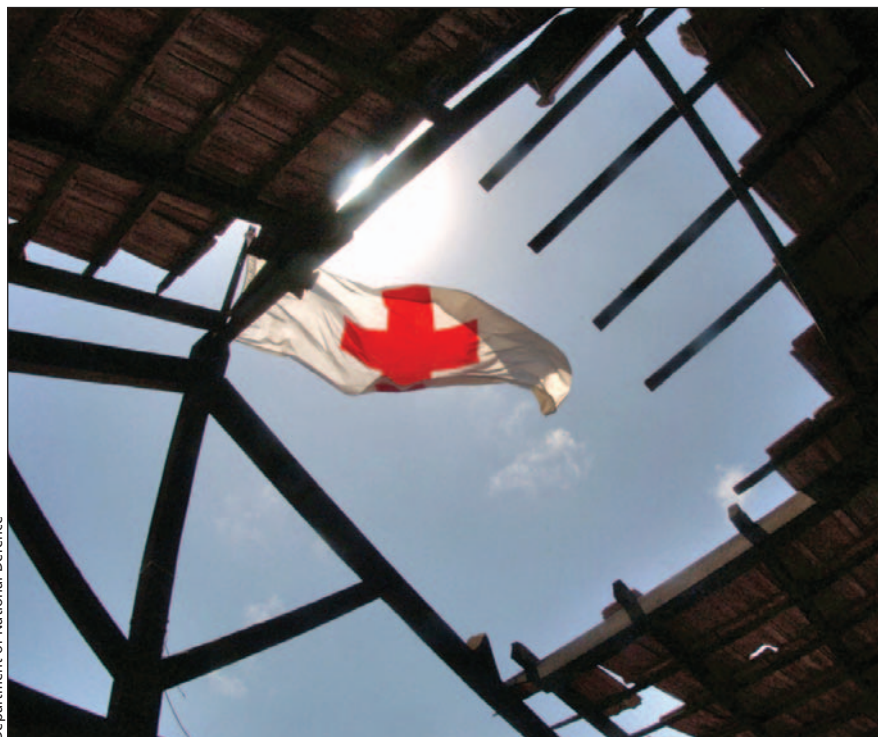


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Compassion in the midst of adversity. (Note: This photo does not depict the people mentioned in this narrative.)

civilians can be admitted, and it is nearly impossible for a civilian to gain admission without a strong advocate — in most cases a medic. A recent example, recounted to me by Dr. Jack Oliver, an orthopedic surgeon from Kelowna, British Columbia, involved an emaciated 12-year-old boy with tuberculous vertebral osteomyelitis whose family had tried and failed to have admitted at the Kandahar Airfield hospital. A medic finally intervened and saved his life. Surgeons stabilized his rotting spine and provided him with 6 months of antimycobacterial medication. Oliver sees him in follow-up and cheerfully reports that the child is now thriving.

While Major Will Patton, the trauma team leader, and civilian Paul MacInnes, the lead nurse, work with the other staff to stabilize the child, Lopez at last relaxes enough to remove his helmet and flak vest, then turns to the boy's silent father and gives him a gentle reassuring squeeze on the shoulder. The compassion evinced by Lopez in this small gesture does not go unnoticed by Dr. Bob Ellett, our vascular surgeon. He congratulates Lopez for the kindness he has shown. For only a brief moment,



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of his army life: he lives in constant fear of driving over an improvised explosive device. His 24th wedding anniversary passed yesterday and he was not able to call his wife back in the United States because he was out with his unit.

is needed. And what is more, by demonstrating compassion today, Lopez is winning one of the hardest battles a soldier can fight — the fight to preserve one's own humanity during war.

#### **Peter Sherk MD**

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Dr. Peter Sherk, a civilian physician in Victoria, British Columbia, voluntarily deployed to Kandahar Airfield, Afghanistan's Multinational Medical Unit in 2007 and 2008. This article originally appeared in *cmajblog* (<http://cmajblog.blogspot.com/>) on Apr. 16, 2008.

## The boy's name is Muhibullah, which means "God's grace."

this reservist medic, who is a youth worker in civilian life, allows himself to feel the pride he deserves to feel and closes his eyes to prevent several tears from falling.

The boy's name is Muhibullah, which means "God's grace." He has a large scalp hematoma overlying a long linear and comminuted skull fracture. He has a broken rib and a pulmonary contusion, but remarkably he has no immediately life-threatening injury and several hours later he is calling out to his father that he wants to go home. Lopez has not left Muhibullah's side since bringing him in. We chat as I write up the admission orders. He shares with me some of the hardships

Why does Sergeant Lopez from upstate New York care so much about this injured child from one of the most impoverished areas of Afghanistan? Why did he marshal the full resources of the International Security and Assistance Force to aid a boy he had never met?

I'm not sure.

Why are people compassionate? There are theologians, evolutionary biologists and clinical psychologists who could provide interesting answers to that question, but because of his actions there may be a few villagers in Zabul who will feel that the International Security and Assistance Force is here to offer real help to them when it

#### **Dr. Ursus lives on**

Fans of the intrepid Dr. Ursus, whose honest insights into the life and times of a Canadian physician comprised the Query section of *CMAJ* up until July 2007, will be interested to learn that the good bear now has a blog. See [www.drursus.blogspot.com/](http://www.drursus.blogspot.com/)