

Interviews

Earthquake Tragedy 2005: Rescue Efforts and the Lessons Learnt

Aftab Iqbal, Faheem Ahmed.

Affiliation: Final year Medical Students, Rawalpindi Medical College, Rawalpindi, Pakistan.

Address for correspondence: Final year Medical Students, Rawalpindi Medical College, Rawalpindi, Pakistan. E-mail: Aftab Iqbal aftabiqbal84@gmail.com; Faheem Ahmed pak_faheem@hotmail.com.

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Abbreviations:

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Summary:

As the earth shook at 8:50:38 Pakistan Standard Time, on the 8th of October 2005, not many realized the havoc that was soon to follow. By the 8th of November, the Pakistani government's official death toll was 73726. And the number injured in an excess of 100,000. A year and a half into this tectonic disaster, we talk to Professor Saleem Ahmed, Head of Orthopedic Department, Rawalpindi Medical College & Allied Hospitals, a man who was at the centre of the rescue, relief and rehabilitation process in Rawalpindi.



The Interview:.....

As the earth shook at 8:50:38 Pakistan Standard Time, on the 8th of October 2005, not many realized the havoc that was soon to follow. By the 8th of November, the Pakistani government's official death toll was 73726. And the number injured in an excess of 100,000. (1)

A year and a half into this tectonic disaster, we talk to Professor Saleem Ahmed, Head of Orthopedic Department, Rawalpindi Medical College & Allied Hospitals, a man who was at the centre of the rescue, relief and rehabilitation process in Rawalpindi.



How did your department respond? How many patients were treated?

Most of the emergencies received were Orthopedic. The flow of patients was tremendous. More than 5000 patients were received in the allied hospitals of Rawalpindi Medical College. We treated more than 2800 patients. All the hospital beds were utilized for Orthopedic and Spinal injury patients.

How was the response from rescue teams at home and abroad?

There was no dearth of resources and voluntary workers. We also received teams from different cities as well as from abroad to help us. The first team to reach us was from Denmark. We received very dedicated teams of Orthopedic surgeons, plastic surgeons, physiotherapists, and Orthodontists from UK, USA, Bangladesh, Denmark, France etc. The world response to this great National tragedy was superb. We never had a feeling of having been left alone.

In this regard, we are especially grateful to APPNA (Association of Physicians of Pakistani Descent of North America) for their help. (2)

Any unusual incident that you would like to share with our readers?

One earthquake victim, a 30 years old female, was rescued from the rubble 89 days after the disaster and survived despite odds. Her father was treated in our department for multiple fractures and right below knee amputation. He and his family got very attached to us and was eventually completely rehabilitated with fitting of an artificial limb.

Was any research work done during this period?

Yes, indeed. We have presented research work done on the mass management of Orthopaedic trauma at the International Orthopaedic Conference, Pakistan Orthocon 2006 & 2007, as well as the APPNA Disaster conference 2006, at Rawalpindi medical College. Our research paper on the newer technique of "*Balti Treatment in the management of*

open fractures in mass disasters" is in the final stages of publication.



How did the national and international community help in making of the APPNA Rehabilitation center in Rawalpindi General Hospital?

We received help from several individuals, NGO's, and institutions.

In particular we are deeply indebted to APPNA (Association of Physicians of Pakistani Descent of North America) for their tremendous support.

They not only sent us the emergency equipment, implants, medicines and surgical disposables but also they selected our department at Rawalpindi General Hospital for the establishment of a state of the art Orthopedic Rehabilitation Unit and Orthopedic Workshop & Artificial limb center. They sent a team of physicians and physical therapists who established the workshop within one week and started fitting the artificial limbs to poor earthquake amputees. They also helped us construct a modern Orthopedic Operation Theatre and Rehabilitation ward. More than 3000 earthquake victims were treated and rehabilitated in our department. More than 400

amputees were fitted with artificial limbs.



Do you think we are now better equipped to deal with such natural disasters?

We have prepared a Hospital Disaster plan as well as a hospital expansion program to meet these challenges in a better way. However, the road is long and still a lot needs to be done at the national level.

We need to reshape our training programs for the undergraduate and postgraduate training of doctors and allied medical sciences personnel. More than 95% of emergencies received were Orthopedic in nature. The more serious patients of severe head, chest and abdominal trauma probably died at the spot. The medical world should be well equipped to cope by enlarging the scope of Orthopedic surgery worldwide.

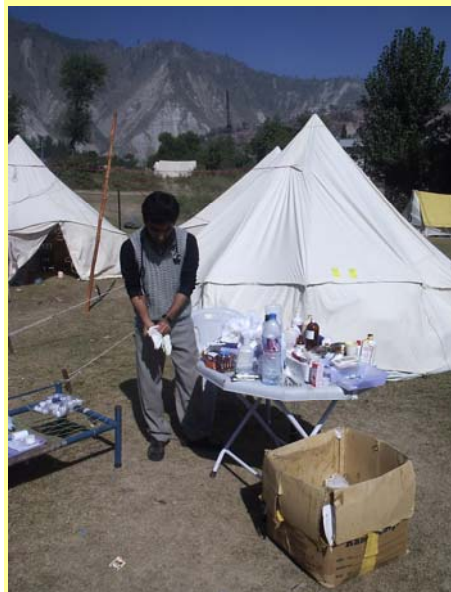


Editor's Note.....

With respect of natural disasters and their health related consequences, we would like to bring to note the importance of training medical students, nurses and other health care professionals in Disaster Management.

Experience shows that had proper expertise and teams trained in disaster management were available, much of the health related consequences could well have been prevented and treated timely.

As shown, with respect to floods or other disasters such as earthquakes, often deaths occur due to simple problems such as gastroenteritis and malaria.



Health care professionals, especially medical students and nurses could be trained in identifying simple things such as the degree of dehydration in gastroenteritis and how to administer and give Oral Rehydration Therapy.

With the lack of manpower and expert doctors during natural disasters, medical students and nurses could play a very vital role.

As rightly said by Ayaz and Colleagues in their article published in PLoS Student Forum, "Disaster management is an essential component of medical training, but unfortunately this component is largely missing from medical and nursing curricula.

Our experience shows how a lack of training in disaster management can have unfortunate consequences for both patients and health-care students.

We believe that in countries faced with the risk of natural disasters, a risk that is likely to increase due to global warming, the training of health professionals should be designed with an emphasis on regional disaster management." (3)

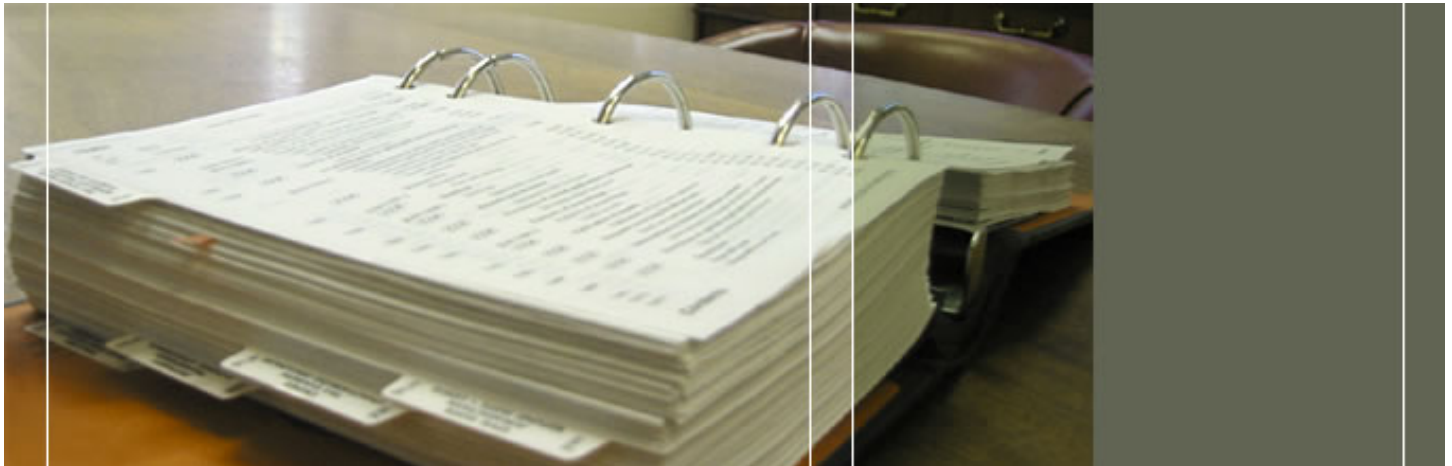
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