

Israel’s Medical Support to Victims of the Civil War in Syria

Salman Zarka MD MPH MA^{1,2}, Masad Barhoum MD MHA³, Tarif Bader MD MHA¹, Itay Zoaretz MD¹, Elon Glassberg MD MHA¹, Oscar Embon MD MPA⁴ and Yitshak Kreiss MD MHA MPA^{1,5}

¹Israel Defense Forces Medical Corps

²School of Public Health, University of Haifa, Israel

³General Director, Western Galilee Medical Center, Nahariya, Israel

⁴General Director, Ziv Medical Center, Safed, Israel

⁵Department of Military Medicine, Hebrew University-Hadassah Medical School, Jerusalem, Israel

KEY WORDS: Syrian civilians, civil war, Israel Defense Forces Medical Corps, field hospital, humanitarian operation, casualties

IMAJ 2014; 16: 71–72

On 16 February 2013, seven Syrian citizens, casualties of the bloody civil war, arrived at the Israeli border seeking help. Israeli soldiers, trained to protect the border from Syrian intrusions, found themselves in an unexpected situation. With compassion, they quickly provided medical care to those who until that moment were considered enemies. This incident marked the beginning of a humanitarian operation conducted by the Israel Defense Forces Medical Corps and the Israeli national health system to provide medical care to Syrian casualties of the civil war – men, women and children arriving at the border because of the unavailability of such care in war-torn Syria.

The Syrian Civil War, also known as the Syrian Uprising, which erupted in March 2011, has become a humanitarian and public health catastrophe. António Guterres [1], United Nations High Commissioner for Refugees (UNHCR), called it “the greatest humanitarian disaster of the past two decades, requiring the largest-ever humanitarian appeal.” The civilian victims are estimated by the UN to be more than 90,000 dead

with over 500,000 injured. The country’s health care and societal resources have deteriorated rapidly [2] with more than 70% of the medical community having fled and most health care facilities either damaged or destroyed [3].

As expressed in the IDF-MC oath, “To extend a helping hand to any who is injured or ill, be they lowly or venerable, friend or foe – to any fellow man,” the State of Israel, since its establishment in 1948, adopted a strategy to provide humanitarian aid to people in need all over the world. Indeed, such missions were previously launched by the IDF-MC in Armenia, Turkey, Macedonia, Haiti, Japan, the Philippines and others, following natural disasters [4-6]. Now, for the first time, such large-scale humanitarian aid is delivered not thousands of miles away, but right on our borders to citizens of a hostile country.

This complex humanitarian medical operation is based on three echelons of care and involves the medical and operational commands of the IDF and the civilian health system. Casualties arrive at the first echelon, which is based on the IDF Battalion Aid Stations manned with Advanced Life Support providers and two to three medics. Here, they are treated according to Israeli standards, adhering to clinical practice guidelines of the IDF-MC. After initial treatment and stabilization, the casualties, who in most cases have not received

IDF-MC = Israel Defense Forces Medical Corps





any treatment during the lengthy evacuation until arriving at the border, are triaged according to severity – some return to Syria and others requiring further treatment are evacuated to higher echelons of care in the form of a dedicated field hospital and to civilian medical centers in northern Israel. The military field hospital was deployed following the realization that the flow of casualties arriving at the Israeli border is unlikely to cease in the foreseeable future. Located in the Golan Heights, its main role is to treat emergencies that would not survive the evacuation to the civilian hospitals under constraints such as time, weather, proximity to the border, and evacuation capabilities. The field hospital is staffed with surgeons, anesthetists, intensive care nurses, orthopedists, imaging and laboratory technicians, logistics and medical equipment personnel, as well as both reservist and career army personnel. Every victim who requires care beyond the scope of the field hospital is evacuated by military ambulance, either directly from the initial point of care at the border or from the field hospital, to the medical centers in northern Israel. These facilities, particularly the Western Galilee Medical Center in Nahariya, Ziv Medical Center in Safed, Padeh Medical Center in Poriah, and Rambam Medical Center in Haifa, have provided the casualties with state-of-the-art medical treatment including neurosurgery, intensive care, orthopedics, pediatrics and gynecological care, as well as psychological support. Many of these combat-related severe trauma victims required complicated surgical procedures and multidisciplinary care during their hospitalization.

This joint operation of the health system in Israel requires coordination of patient evacuation and transfer at the local level as well as adjustments of hospitalization policies and regulations at the national level. The professionalism, commitment and partnership practiced by the hospitals and the Ministry of Health reflect the extensive civilian-military medical collaboration that characterizes the national health

system in Israel and is even more prominent in times of emergency and during humanitarian missions.

Caring for the wounded in this unique scenario also involves providing for the basic needs of patients who have arrived from a foreign country with no provisions and no possible support from family and friends. Security considerations are also taken into account due to the real concerns expressed by the Syrians about the risk they would face on their return to Syria should it be known they had crossed the border to Israel.

Encountering the Syrian patients and hearing their personal stories touched us on several levels – as medical professionals, as Israelis, and first and foremost as fellow human beings. We were dismayed to learn that prior to this encounter many of our Syrian patients considered us “evil” or “devils,” but we were encouraged that after meeting us in person and witnessing our hands outstretched in benevolence and goodwill many reconsidered their judgment. We also learned that word of the humanitarian and medical aid extended on the Israeli side of the border had spread widely among locals. We were especially moved to hear the story of a young mother whose two children were admitted to our field hospital. She told us that when her home was shelled and her children injured, villagers insisted that she “take them west” – to the Israeli border. “In the west the Israelis have set up a hospital to save us,” they told her. “They will take care of your children, and once they have recovered, you will be able to return home.”

Efforts to provide medical relief to victims of the Syrian civil war continue. As of today, more than 500 Syrians – men, women and children – were treated in Israel, proving once again that medicine has no borders and can plant the seeds for a better future.

Corresponding author:

Dr. S. Zarka

IDF Medical Corps

Phone: (972-3) 737-9552

Fax: (972-3) 737-7589

email: zarkas@netvision.net.il

References

1. <http://www.unhcr.org/524c1e4b9.html>
2. Brundtland GH, Glinka E, Hausein HZ, d'Avila RL. Open letter: let us treat patients in Syria. *Lancet* 2013; 382: 1019-20.
3. http://www.who.int/hac/donorinfo/syrian_arab_republic_donorupdate9april2013.pdf
4. Kreiss Y, Merin O, Peleg K, et al. Early disaster response in Haiti: the Israeli field hospital experience. *Ann Intern Med* 2010; 153 (1): 45-8.
5. Bar On E, Abargel A, Peleg K, Kreiss Y. Coping with the challenges of early disaster response: 24 years of field hospital experience after earthquakes. *Disas Med Pub Health Prep* 2013; 7 (5): 491-8.
6. Dagan D, Marom H, Kreiss Y. Extending a helping hand in disaster 6,000 miles away from home – the Israeli field hospital in the Philippines. *Harefuah* 2013; 152 (12): 696-7 (Hebrew).

“War is the unfolding of miscalculations”

Barbara Tuchman (1912-1989), American historian and author