

War in Iraq Influences Health Care Professional

Anita J. Catlin

This article discusses a sensitive issue that is complex and provocative, and will undoubtedly stimulate a lot of opinions. What do you think? Post your comments on the *Pediatric Nursing* Web site discussion site about this topic and read what others have to say as well. Visit our homepage at www.pediatricnursing.net and click on "Discussion."

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In October 1990, Dr. Brian Carter, then a neonatologist with the United States Army, was deployed to Saudi Arabia, Iraq, and Kuwait as part of Operations Desert Shield and Desert Storm. Carter's mission as a Medical Company Commander and Brigade Surgeon was to plan for and establish casualty treatment areas; ambulance (wheeled, track, and air-helicopter) evacuation routes; and to instruct others in chemical, biological, and nuclear detection, prevention, decontamination, and treatment as it pertained to casualty care. It was a great disappointment to Carter that despite requesting a humanitarian mission, he and the four other pediatricians in his army unit were not allowed to care for Iraqi children or civilians. That mission went to other units. He did supervise medical care for captured Iraqi troops after the ceasefire in Iraq.

Thirteen Years Later

In July 2003 Carter was finally allowed to help an Iraqi child as he had wished for in the past. This time it would be during the present war and occupation of Iraq, and from 10,000 miles away.

Neonatologist Carter, now practicing at Vanderbilt Children's Hospital, was first contacted by the Tennessee Department of Health on June 5, 2003. He was told that a local man with ties to Iraq had a family member in need. Baby Ahmed Mahmood was delivered in Iraq just days before Operation Iraqi Freedom began. The infant was born with a large myelomeningocele on his lower back. Dr. Carter agreed to try to help and to see how experts at Vanderbilt Hospital could assist.



Ronak Khan (mother) with baby Mahmood

Abdulqadir Khoshnaw, the child's uncle, was a data manager at the Tennessee Department of Health. Mr. Khoshnaw contacted Dr. Carter and related the family history of a prior infant girl with posterior encephalocele who died at 7 months following neurosurgery in Mosul. Mr. Khoshnaw told Dr. Carter that he had contacted the executive director of the Kurdistan Human Rights Watch, Dr. Pary Karadaghy. Dr. Carter also contacted Dr. Karadaghy and found that this physician had spoken directly to a local Iraqi obstetrician who had seen the baby. Carter asked for notes, pictures, x-rays, and studies of the child.

The initial photos were received on Sunday, June 22. The baby, born March 4, 2003, had a mass that had grown to the size of 7 cm by 16 cm, with a watery discharge from the mass for the last 10 days. A hydrocephalus had developed and required shunting, and the discharge left the child open to possible infection and sepsis. Mahmood's mother, Ronak Khan, had taken care to protect the large sac that protruded from the boy's spine, a difficult task in a country at war and without medical equipment after years of sanctions. The sac had begun to leak in recent weeks. Dr. Carter could see that surgery would be needed imminently to save the child's life. He began to think about travel, visas, family members, and the cooperation of the United States military airlift command or local military in Iraq.

An initial request to bring the child out of Iraq was made to Major Carey Blake, U.S. Army, Iraq. However, the American Iraqi war was now in full force. The initial transmission from Iraq was: Irbil, Iraq office of Kurdistan Human Rights Watch (KHRW) 6/22/03

"Dear Folks, Concerning little Ahmad's case, MAJ Cary Blake has told our physician, Dr. Shilan, that they cannot transfer the baby to U.S. neither any other country. The possibility is very weak. Every body here recommends sending him to Iran there are doctors who can do the operation."

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Dr. Karadaghy wrote an appeal to Major Blake.

During the week of June 23, with new evidence of the growing size and severity of the lesion obtained in a photo, Dr. Carter contacted the Vanderbilt Children's Hospital administration and asked if the child could be brought to Vanderbilt and operated on there. Carter received support and continued inquiries into military or other transport. He also considered asking physicians in other local Mediterranean countries to do the surgery. The Vanderbilt administration began discussions with Tennessee Senator Bill Frist's office. Mr. Khoshnaw continued to work diligently with the KHRW and wrote an appeal to Senator Frist for a visa and transport to the U.S. By June 30, however, all local flights had been cancelled in or out of Iraq.

As the war in Iraq progressed, many men, women, and children were being killed or injured. U.S. military officials now saw the opportunity to do something beneficial. Conditions in Erbil, Iraq, where the family lived, were grim at the time, and the family was living in a shelter. Through the joint efforts of several humanitarian organizations, Mr. Khoshnaw received word on June 30 that a humanitarian parole was granted for the infant and his mother and that the visa would follow later. Clearance was received through the Office of Homeland Security and the Immigration and Naturalization Service.

Local travel for the infant and his mother out of Iraq and into Amman, Jordan, was provided by military assistance. The two spent the night of July 1 housed at United States Embassy in Amman. From there, a flight to Chicago was obtained. The mother and baby arrived in Chicago at 5:00 pm on July 3, took the next flight to Nashville, and arrived at 11 p.m. They proceeded to Vanderbilt Children's Hospital



Dr. Brian Carter

emergency department for pediatric and neurosurgical assessment. At 1:00 am on the Fourth of July, Baby Mahmood was admitted. Neurosurgeon Dr. Paul Boone examined Mahmood soon after he and his mother arrived. Crews from local Nashville TV stations documented their arrival. Boone said repairing the defect could save the boy's life, preventing sepsis, further neurological damage, and possibly death.

While the rest of America was celebrating freedom, the 4-month-old, Iraqi-born boy underwent surgery. At 10 a.m. on July 4, Boone teamed up with chief neurosurgery resident Dr. Oran Aaronson to repair the lesion on baby Ahmed's spine. The myelomeningocele surgery involves removing the large cyst, separating out the nerves, and replacing them into the spinal area. This procedure is done routinely at Vanderbilt, either prenatally as a part of a National Institute of Health study, or at 12 hours of age. Surgery for spina bifida does not repair nerve damage or paralysis to the lower extremities, but does prevent infection and allow for a more normal appearance.

The infant did well in the initial surgery as well as in a subsequent surgery on July 8 to insert a ventriculoperitoneal shunt. The baby recovered on the 6-North Pediatric Surgical Unit, received postoperative care, antibiotics, and dressing changes, and began to eat without problems. The mother and extended family were taught how to care for the wound and how to perform in-and-out urethral catheterization. The family remains in Nashville and Mahmood receives outpatient care through Vanderbilt Children's Hospital's multidisciplinary spina bifida clinic. A return to Iraq is anticipated in the next 9 months.

The child's uncle, Abdul Khoshnaw, was very grateful. He knew that with the war going on this surgery would never have taken place in Iraq. Dr. Brian Carter, within 10 days of "seeing" the severity of Baby Mahmood's condition, was able to arrange transportation out of a country with which we were at war and bring a child to the United States for surgery. He is grateful to the Vanderbilt system for sponsoring the surgical care and allowing him to fulfill the mission he had wished for 13 years earlier.

For information on the war in Iraq, readers may wish to look at the Web site for Occupation Watch, which monitors the medical situation at www.occupationwatch.org. Those wishing to donate funds may want to purchase the CD "HOPE" made to raise funds for Iraqi children. The CD was produced in England by War Child Charity. Seventeen of the world's top music stars, among them Sir Paul McCartney, Avril Lavigne, David Bowie, New Order, Ronan Keating, Blue's Lee Ryan, Travis, and George Michael, contributed new sound tracks. All profits go to help children in Iraq. Sir Paul McCartney has stated, "Whatever the politics, whatever the rights and wrongs of war, children are always the innocent victims, so I am delighted to be able to make this small contribution to a magnificent project that I hope goes a long way to alleviating some of the pain and suffering." UNICEF in the United States is also collecting funds for Iraqi children and has several programs for communities, classrooms, and individuals. Information can be found at www.unicefusa.org/emergencies/iraq/.