

DAMAGE CONTROL RESUSCITATION (DCR) IN WAR AND CONFLICT WITH MILITARY MEDICAL PRINCIPLES IN THE CIVILIAN SETTING

John Quinn¹, Waad Badran², Omer Ameer², Asm Abd² and Allaf Haider²

¹Charles University, Prague Center for Global Health, Czech Republic

²Mosul Medical University, Iraq

Working Hypothesis: Damage control resuscitation (DCR) in war and conflict that applies military medical principles in the civilian setting of battlefield and war fighting injuries is still poorly described. Forward Resuscitative Care (FRC) and DCR concepts in the humanitarian space are lacking. This paper describes basic DCR principles applied to over 250 patients with description of clinical outcomes.

Background: The battle for Mosul posed major challenges for all humanitarian response to support health security for the civilian population caught in the middle of fighting. Applying best practice DCR measures with blood and blood products in the civilian space has not been quantified for this conflict and the outcomes may provide lessons learned for future response to crisis with asymmetric threats for humanitarian response.

Methodology: Retrospective analysis of mortality and morbidity of trauma patients that received blood, blood products and basic and advanced damage control resuscitation at three far forward field DCR centers supported by the WHO.

Expected Results: We anticipate that clinical outcomes of patients those who have received DCR to clinical standards fared far better than those patients who did not. In the discussion section, reviewing DCR measures and basic diagnostics in the civilian setting, applying military medical standards is a model that requires more overlap and more information sharing to save life and mitigate morbidity in future conflicts, wars and disasters.

Biography

John Quinn is a Lead Researcher at the Prague Center for Global Health (www.pcgh.lf1.cuni.cz), Staff Emergency medicine Registrar at Northwick Hospital in London and Medical Director and Consultant to Tangiers International. Most recently, he has consulted as Contractor to the WHO Mobile Field Hospital in Northern Iraq serving Damage Control Resuscitation (DCR). He works in conflict, disaster and emergency medicine. He holds his Masters' in Public Health (MPH), PhD in Hygiene and Epidemiology and is both a Paramedic and Emergency Medical Doctor with over 18 years' experience globally. He has performed emergency medical assessments in Ukraine, Israel and Palestine, Iraq, Kurdistan and Timor-Leste. He has established and operated remote medicine clinics in conflict zones and for remote communities and has consulted for NATO and NATO partner nations in the health and medical stability operations sectors. He worked as an Emergency Physician at a Level One Trauma Center in Ireland and has worked in Ukraine providing emergency medical consulting and training in Tactical Combat Casualty Care (TCCC), Prolonged Field Care (PFC) and Forward Resuscitative Care (FRC). Presently, he completes clinical time in the UK in emergency medicine and conducts global health research related to conflict and disaster. He is based in Prague with his family.

john.quinn@lf1.cuni.cz