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Extreme Medicine

In a hospital northeast of Kabul, surgeon Gino Strada is redefining what it means to provide quality medical care in a combat zone

By Marco Cattaneo and Sergio Pisto



COURTESY OF EMERGENCY
GINO STRADA: WAR M.D.

In late OCTOBER three Katyusha rockets, launched by the Taliban in retaliation for U.S. air strikes, hit the market of the small city of Charikar in territory controlled by the opposition Northern Alliance. Two people die in the attack, and another 25 are injured. The injured, all civilians, among them many women and children, are rushed along a bumpy road to Anabah, in the deep gorge of the Panjshir Valley. There, 60 kilometers from Kabul, is the only hospital in all of northern Afghanistan equipped with the accoutrements of modern medicine: an emergency room, a radiology suite, two fully outfitted operating theaters with a supply of oxygen, a clinical laboratory, sterilizers, a blood bank, an intensive care unit, and four surgical wards and beds for 70 patients.

- Born in 1948 near Milan; married, with a daughter. His wife, Teresa, coordinates Emergency activities from the group's headquarters in Milan.
- Publication in 1999 of Pappagalli Verdi (Green Parrots), a nickname for a type of land mine. The account of Strada's experience as a war surgeon became a best-seller in Italy, with 110,000 copies sold.
- "If you set up a hospital in a Third World country, you have to build a place where you wouldn't mind having your children treated."

In a country with scant electricity, phone service and running water, the hospital's neat, one-story white building appears almost as a mirage against the impressive backdrop of the Hindu Kush mountain range. On the side of the hospital are painted the three red stripes that represent the logo of the international aid organization Emergency, a nongovernmental agency headquartered in Milan, Italy.

The little hospital in Anabah does not go ignored by the rest of the world. A few hours later the figure of a rugged, slightly disheveled hulk of a man appears

on Italian television. Gino Strada, the gray-bearded, 53-year-old chief surgeon at the Anabah hospital and the co-founder of Emergency, sorts the injured in preparation for their entry into the operating room. Strada has gained celebrity both in Afghanistan and in his native Italy, where he has been described as a *leggenda vivente* by the Turin daily newspaper *La Stampa*.

A onetime heart and lung transplant surgeon, Strada was groomed for the good life, with stints as a visiting surgeon at Stanford University and the University of Pittsburgh. That life was transformed forever in 1988, when Strada decided that he wanted to experience firsthand how medical care in the developing world is provided. A five-year assignment with the International Committee of the Red Cross (ICRC) took him to Afghanistan, Pakistan, Peru, Bosnia, Ethiopia, Djibouti and Somalia, as well as to Cambodian refugee camps in Thailand. Unimpressed with the quality of care furnished by the ICRC, Strada set off on his own. With help from his wife, Teresa, and a group of friends, Strada founded Emergency. The group is dedicated to providing medical help in world flash points that is comparable to the care Strada encountered in Milan and Palo Alto. Emergency's motto: "Life support for civilian war victims."

The Italian television spot about the Charikar rocket attacks--as with countless other broadcast and print stories throughout the years--is important to publicizing Emergency's mission. To date, the group has garnered about \$16 million in six and a half years from private donors (including an Italian professional soccer team), the Italian Foreign Affairs Department and the European Commission Humanitarian Aid Office. Emergency's three red stripes can now be found on hospitals the organization runs in northern Iraq, Cambodia, Sierra Leone and elsewhere in Afghanistan.

Setting up hospitals in societies decimated by years of war requires skills that go beyond the intricacies of tying a suture. Emergency's work in Afghanistan illustrates the difficulties it encounters everywhere it goes. In 1999 Strada and his colleagues flew in a beat-up Soviet helicopter from Dushanbe in Tajikistan to northern Afghanistan and then traveled by truck to meet ousted Afghan president Burhanuddin Rabbani and the head of the opposition military forces, Ahmed Shah Massoud (who was assassinated September 9, 2001, by suicide bombers). The Northern Alliance leaders assented to the proposal to build the Anabah hospital. The need for such a facility was undeniable. An estimated 1.5 million troops and noncombatants have died in the more than two decades of Afghan strife, and in excess of two million soldiers and civilians have been maimed.



MARCO CATTANEO AND JASMINA TRIFONI

LIKE A MIRAGE, the Emergency hospital nestles below the Hindu Kush mountain range.

Strada and his Emergency co-workers rebuilt an abandoned police college--using wood from old Soviet ammunition boxes in the ceiling and pipes from military tanks for plumbing. Hospital equipment arrived after a 22-day trek by truck from Tajikistan. As constructed, the hospital is completely autonomous, housing its own electrical generators and even a playroom for children, who represent more than one third of the patients. It also staffed six first-aid posts along the Northern Alliance frontline and deployed six converted four-wheel-drives that provided ambulance service.

The hospital, since it opened in December 1999, has already treated upward of 8,400 people, mostly civilian victims of land mines and bombs. Patient mortality stands at an enviable 3.5 percent. Since the beginning of the Anglo-American air strikes this past fall, Emergency has been one of the few international aid groups to have remained continuously in Afghanistan. And despite the conflict, Strada has not scrapped plans for expansion. "We are setting up new departments of obstetrics, pediatrics and eye surgery," he says.

Although Strada spearheaded the creation of Emergency, he has not sought to create a cult of personality. Other Emergency staffers in Afghanistan have shown every bit as much drive as Strada. In May, Kate Rowlands, the 45-year-old chain-smoking Welsh nurse who serves as the group's medical coordinator in Afghanistan, faced down officials from the Taliban's Ministry for Promotion of Virtue and Prevention who were brandishing Kalashnikov machine guns and leather whips. Nevertheless, the Taliban invaded Emergency's newly opened Kabul hospital and beat staffers with the whips because of alleged "promiscuity": the government charged that men and women were allowed to eat together. Later the Pashto-language government station, Radio Voice of Shari'ah, reported that the hospital "had appointed serving personnel in a self-willed manner without the understanding of the Ministry of Public Health and had violated all laws and regulations by having a joint dining room."

The Kabul hospital was closed for months, although a few of the Afghan staff members there stayed to compile a list of civilian casualties from the bombings--a number that had reached more than 100 by early November. Strada is adamantly opposed to what he calls the U.S.'s cowboy-style intervention, which he believes will only hurt innocents. The hospital in Anabah, he says, has already treated three adults and four children, victims of an errant bomb dropped by U.S. forces. The current conflict, Strada declares, originates from previous neglect by the U.S. of its relations with Afghanistan, and the recent U.S. offensive will stoke the flames of fundamentalism, the repercussions of which will ultimately be felt by the West.

The Kabul hospital's doors remained shut, not because of the American bombings but rather because of the Taliban's refusal to guarantee the safety of the international staff. "The problem," Strada says, "was the threat by non-Afghan fighters from at least 20 different countries, including Al Qaeda people who were in the capital, who clearly vowed to kill all foreigners and infidels, both of which I definitely am." Even before Taliban rule in the capital crumbled in November, Strada had traveled to Kabul to make preparations to reopen the hospital. One of the goals of Emergency in Afghanistan--and in every other country where it maintains hospitals--is to put people like Strada and Rowlands out of a job. Strada and his colleagues teach local physicians, health care workers and administrators the skills needed to run a modern facility and in the end

depart. The group's hospital and first-aid posts now provide jobs to more than 200 Afghans. (In fact, some of the doctors and nurses were Kurds who came to Anabah after having been trained in similar programs in northern Iraq.)

Emergency's rules are strict. The Kalashnikovs that many adult males carry are forbidden inside the hospital. Even the late military commander Massoud left his firearm at the door when he became one of the first visitors to the new facility. Female workers are not allowed to wear the head-to-toe covering called a burqa, and those involved in medical care receive daily lessons in English, medicine and hygiene.



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SURGICAL TEAM of
Strada (*left*) and a Kurdish
surgeon tends to a patient in
the Anabah hospital.

People staffing the kitchens and maintenance jobs are often former patients who were seriously injured by land mines or shrapnel. "Employing them in the hospital is the only way to ensure their survival in Afghan society," Strada says. Using local employees and materials helps to keep costs down. "In Afghanistan, we do everything with less than \$1 million, including international staff salaries and drug supplies," he notes.

Medical care cannot be separated from social aid programs in a country whose infrastructure has totally collapsed after 22 years of uninterrupted war. So the hospital has initiated social programs for widows and families and has constructed a small hydroelectric plant in the Panjshir Valley, bringing electricity to this area for the first time. "If the war turns out the lights, a simple lightbulb may be a little sign of peace," writes Strada in Italian in one of the frequent letters from Anabah that he posts regularly on Emergency's Web site (www.emergency.it).

The work of a wartime emergency physician always threatens to overwhelm. In 1996 Strada was managing Emergency's hospital in northern Iraq when Saddam Hussein's troops began attacking the Kurds. Working 18-hour days proved too much. He suffered a heart attack and had to undergo a quadruple bypass in Italy--after traveling 400 kilometers to the Turkish border and then being ferried out by an airplane furnished by the Italian foreign ministry.

A veteran of virtually every turn-of-the-new-century conflict, Strada has begun to harbor a dream of creating a curriculum specifically focused on the medicine of war. Today medical students are trained in emergency surgery, but they are ill prepared to operate with the limited resources at the frontlines. There is a need to teach, for instance, the nuances of the triage process in which doctors have to choose which patients to operate on based on their chances of survival. "In war, you can't spend three hours operating on someone with little hope of survival, while at the same time other people with more of a chance of making it are dying," Strada says. He believes that before embarking on a relief effort, western medical workers should have training in a broad range of skills, including how to manage the physical construction of a new clinic. "We should teach war surgery but also logistics, communications and informatics, the capacity to work long hours under stress, teamwork, discipline and security issues," but most important, he notes, is an intensive course in common sense.

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