

An International System of Organizing the Emergency Surgery, Intensive Care, and Acute Orthopaedic Aid to Children in Extreme Situations

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“As today’s children are the citizens of tomorrow’s world, their survival, protection and development is the prerequisite for the future development of humanity.” (United Nations’ World Declaration on the survival, protection and development of children.) Further: “Plan of action calls for concerted national action and international cooperation to strive for the achievement, in all countries, of the following major goals for the survival, protection and development of children by the year 2000,” including “Protection of children in especially difficult circumstances, particularly in situations of armed conflicts.”

As a pediatric surgeon who has organized and rendered surgical, traumatological, and reanimation assistance for children after earthquakes in Armenia and Iran, and more recently, Soviet Georgia; the train crash in Bashkiria (USSR); and the revolution in Rumania; and after visiting Israel as a volunteer during the Gulf War, I am convinced that the international medical community must make it a priority to create a specialized medical facility to provide help for children caught in extreme situations.

The war in the Persian Gulf underscores the fact that children are the most vulnerable part of society; innocent victims in any natural or political disaster. They also are the world’s future, a future of peace or of war.

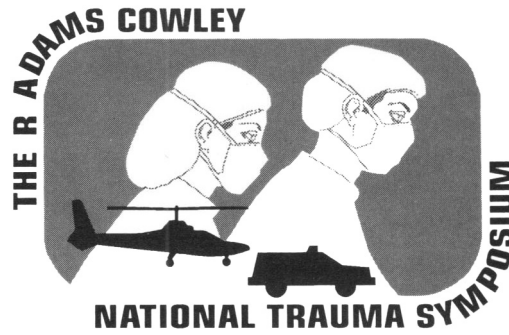
The treatment of children is a highly specialized field. Generally speaking, doctors who are not specialists in pediatrics or pediatric surgery are unable to cope with the problems of treating children, and, especially in non-standard situations, can make fatal errors. Medical assistance delivered to children by unqualified staff also may cause unsatisfactory cosmetic results or permanent disablement. My experience allows me to express the following concrete suggestions:

- 1) Pediatric specialists must be included in all medical groups giving first aid; these specialists must be provided with all equipment and supplies necessary for the treatment of children;
- 2) The afflicted children must be grouped together in a Children’s Hospital, or any hospital which can be adapted for children; it is important that a special department for children with purulent infection be established in this hospital; and
- 3) If it is impossible to isolate the children in a special hospital, there must be children’s rooms designated in adult hospitals, but with the services of pediatric specialists.

Currently we have no international system to coordinate the efforts of children’s surgeons, traumatologists, and intensive care specialists who are working in disaster

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zones. Additionally, there is a great need to carry out scientific investigations and to document the medical problems encountered in the field. These problems could be alleviated by an International Center for Children's Surgery and Disaster Medicine, which can be organized under the name of the International Red Cross in one of the neutral countries. The work of the Center could include:

- 1) Coordinating the efforts of medical teams in cases of natural or political disasters and directing specialized medical teams in the field;
- 2) Establishing specific medical programs for injured children, including methodology;
- 3) Moving teams of specialists to the affected zones, and providing them with necessary equipment, instruments, and medicine; and
- 4) Organizing transportation of children to the Center or another specialized facility if a child's condition requires more help than can be provided in the field.

The International Center for Children's Surgery and Disaster Medicine should include a hospital of 150 beds. During the period between natural disasters, wars, and social cataclysms, this Center can be operated as a private, non-profit hospital by enlisting the services of leading pediatric specialists from around the world, especially in rehabilitation, plastic and reconstructive surgery, neurosurgery, problems associated with wounds, and so forth. The Center also can function as an educational institution, sponsoring international congresses focusing on disaster medicine for children and providing practical training for specialists in this area.

At this time, I have received support in principle for this concept from representatives of international organizations: The United Nations Children's Fund (UNICEF), World Association for Emergency and Disaster Medicine; British Association for Pediatric Surgery; Society of Acute Care (SAC) in Accident and Emergency Medicine, United Kingdom; Israeli Association of Pediatric Surgery; Japanese Association of Pediatric Surgery; American Trauma Society; and the Rumanian Association of Pediatric Surgery.

The World Association for Emergency and Disaster Medicine (WAEDM) understands the problems of the well-intentioned but fragmented delivery of medical assistance in crisis situations. Therefore, I feel it is very important to hear this organization's opinions about this project and to seek your support and suggestions for its realization. Only by working together and coordinating our efforts can we provide a happier future for the children of the world.

Editor's note: In response to this proposal, the WAEDM appointed a Task Force charged with the development and implementation of plans to meet the special needs of children in disaster situations.