Editorial

THE FALKLANDS

Two years on and time to reflect.

To reflect on those members of the RAMC who gave their lives and who were commemorated in the new Nutbeem Wing, and Curraw, Farrell and Preson Wards, in the Military Wing of the King Edward Memorial Hospital in Port Stanley. When the civilian portion of that hospital caught fire on 10 April 1984 there was a further tragic loss of civilian lives. The Military Wing, and thus, for the time being, the RAMC soldiers' memorial, was burned down with the hospital.

Time, too, to reflect on what may be learned from the conflict. Time allows a more mature view, a more complete picture than can be gained from initial impressions. The patient collection and analysis of information from contemporary records and subsequent follow-up, still not complete, alone allows valid conclusions to be drawn. As usual it is a case not of revolutionary discoveries but of old lessons relearned, new lessons reinforced and validated. This is the nature of progress in military medicine. In this issue we are reminded of the need for clothing to protect from burns, cold and noise; of the psychological aspects of amputation; of the importance of immediate antibiotic therapy where there is a risk of delay in reaching early surgery; and the possibility of alternative analgesia is aired.

All-in-all, it seems that the Medical Services did not do too badly. Perhaps the most heartening and handsome tribute comes from the pen of an informed outsider, an infantry staff college graduate Lieutenant Colonel, writing in Spanish in a fellow journal of military medicine. He writes:

"Argentinian Medical Services. The Argentinians used a classic pattern of medical organisation, namely one medical officer per battalion, company medical teams, first aid posts manned by personnel of each battalion and casualty collecting stations sited behind the lines of deployment. A field hospital was established in Port Stanley (or Puerto Argentino). In the early period of the conflict aero-medical evacuation by means of Hercules C-130 aircraft was organised to ferry the wounded to mainland hospital establishments at Rio Gallegos, Puerto Belgrano and Buenos Aires. In the later period, when the blockade of the Falklands was effectively complete, aero-medical evacuation to mainland hospitals became impossible; by agreement with the British Forces an Argentinian hospital ship put in at Port Stanley and transferred the wounded, as prisoners-of-war, to a British hospital ship. At the end of the fighting the casualties were treated by the British medical services. The Argentinians have nothing but praise for the courteous and efficient medical treatment they received at the hands of their opponents.

British Medical Services. The combatant personnel of the British Forces practiced the so-called 'buddy-buddy care'. All fighting men had a good basic knowledge and training in first aid methods, and they were thus able to give some measure of medical treatment to each other from the earliest moments of wounding, that is to say, immediately a fellow soldier became a casualty.

Moreover, the British stretcher-bearers and medical orderlies accompanied and advanced in line with the fighting men, collecting and caring for the wounded right up forward in the front lines. This was a great morale booster.

Similarly the British units' medical officers started the early initial treatment of the casualties right up in the front lines of the fighting. They then arranged for a quick air evacuation of the wounded by means of helicopters to a fully equipped field hospital which had been established at the time of landing at the San Carlos beach-head.

This medical organisation was backed up by the liner "Uganda" which had been converted very professionally to a splendidly equipped hospital ship, with excellent medical facilities. Patients who required evacuation from the fighting zones were taken to hospitals in Montevideo under international humanitarian agreement or to Ascension Island, as a stop-over point, before repatriation to the United Kingdom.

An important factor which contributed to very successful medical management and treatment was the great use made of helicopters to transfer casualties; this led to early expert surgery within a very short period of time. Another factor was no doubt the experience of the British medical service personnel who were familiar with bomb, blast, bullet and burns injuries from the handling and the management of casualties in Northern Ireland.

Conclusion. It is important to emphasize the necessary, indeed vital importance of an efficient Defence Forces Medical Service, for without its professional and expert support, no fighting force will be able to reach and maintain battle readiness and capability.

Some conventional methods deployed have become archaic. It seems that nothing new was put into practice on the Argentinian side as regards organization.

One would do well to study and copy the efficient British model.”

REFERENCE

1 Teniente Colonel de Infanteria Eduardo de Fuentes Gomez de Salazar. La Sanidad en la Guerra de las Malvinas. Medicine Militar 1983; 39: 75-78.