Making a Difference When Disaster Strikes



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WOCN/ET, is the Senior Professional Skin Health for

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watched the news the other night only to find out there had been another major earthquake, this time in Indonesia. Thousands had died and many more were left homeless. When I turned on my computer, I had an e-mail message from the Canadian Relief Foundation (CRF) asking for paramedics, orthopedic surgeons, and ICU and emergency nurses to volunteer and help on a medical relief mission to Indonesia immediately.

This reminded me of how my trip to Pakistan in 2005 evolved following the earthquake in the Kashmir region. The Registered Nurses' Association of Ontario (RNAO) sent out a request in October of that year on behalf of the CRF asking for nurses to help on medical relief missions. I volunteered.

Initially, they had needed emergency nurses, but later when they specifically asked for nurses with woundcare experience I thought I could help.

I was a member of Team #6, which consisted of a physician, a primary nurse practitioner, a registered nurse and myself. We were based out of Muzzaffarabad in the Himalayan mountains, near the U.N. camp. We slept in summer tents and cooked on propane burners. The water was frozen in our kettle each morning.

Every day we drove to Ghari Dupata where the Canadian Forces' Disaster Assistance Response Team (DART) hospital was set up. It was like something from the television show MASH. We treated upwards of 60 patients per day. I saw pressure ulcers, cavity wounds that were gradually filling in, a hand that was almost degloved, skin grafts, burns, old amputation sites, dog bites, fractures, lice, scabies, and a multitude of infections. We could treat wounds and infections, set bones and suture as needed, provide health teaching and hydration, but the hardest to deal with by far was the post-traumatic stress syndrome.

Many of these victims were suffering from insomnia, lack of appetite and numerous aches and pains. We held them and cried with them as they shared the stories of their losses. How do you console someone who has lost every member of his or her family?

One 30-year-old gentleman came to the hospital complaining of chest pains. On examination he had an apical pulse of 150. We had no ECG equipment to monitor his heart. Through an interpreter, he explained that he had lost his two sons in the earthquake, as well as his entire classroom of students when their school collapsed. Each night in bed he would think about the children, his heart raced and the chest pains began. His wife was unable to leave her bed because she was so overcome with grief. We gave him medication to slow his heart rate and help him sleep at night. We encouraged him to bring his wife to the hospital for assessment and treatment as well.

These people lost everything-their homes, familiesand entire villages were wiped out. And yet they thanked us for our help. We were often humbled by their demonstrations of appreciation.

Since returning home, I often wonder about the people we treated. Did they survive the winter? Have they received the follow-up care they so desperately needed? How are they faring now? Have they rebuilt their homes or are they still living in tents? Are they still afraid to sleep indoors at night for fear of another earthquake striking?

These are some of my thoughts as I think of those I met in the Kashmir, as well as the earthquake victims in Indonesia. I can only imagine the deaths and devastation, and more families torn apart.

We are so blessed to live in Canada and to have the means to help those who are suffering. All that is needed is the desire to help those less fortunate. Each one of us can make a difference.

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