

Medics speak of role assisting in the typhoon-hit Philippines

February 10 2014, by Alison Barbuti

Manchester medics have spoken about their role treating the injured following the typhoon that hit the Philippines in what they believe was the UK's first joint civilian and military humanitarian response effort.

The model, which saw part of the team board HMS Daring, helped treat hundreds of people cut off on remote islands by the typhoon which struck last November.

Professor Redmond, Professor of International Emergency Medicine at The University of Manchester's Humanitarian Conflict Response Institute (HCRI), led a 12-strong British team of staff, including surgeons, doctors and A&E nurses who were mobilised to the region by the Department for International Development.

Half the team assisted at a hospital in Tacloban while the remainder - including Dr Amy Hughes, from the University, and nurse Karen Livingstone, from the University Hospital of South Manchester – both part of MAHSC joined the navy and travelled to remote islands by ship and helicopter.

Professor Redmond, speaking on the three month anniversary of the typhoon (8 February) said: "To our knowledge it is the first time there has been a joint civilian and military humanitarian response from the UK and it worked really well. The Navy could get us to the islands that nobody else could get to. We went to some of the smaller islands on the ship then accessed the even smaller islands by helicopter and speed

boats. Some of the islands had no jetties so we had to wade waist high in the water carrying all the medical kit above our heads."

Professor Redmond, who runs the UK's International Emergency Trauma Register (UKIETR) said the disaster led to a mixture of medical needs.

"There were high winds and damage from the [typhoon](#), storm surges, elements of which were similar to areas hit by tsunamis, and building collapses with elements similar to what you'd get in an earthquake. So we needed a very flexible team allocated drawn from a range of specialisms," he explained. "The surgical specialists went to work in the field hospital in Tacloban while the remaining team visited remote islands. It was very moving when we flew over the first island in the helicopter, they'd seen helicopters before but no one had landed. They had written help in the sand and everyone ran out of their homes waving towels to bring us in."

Once the medics arrived at each island they worked with community leadership groups, known as barangays, and their captains who let the team know what type of medical assistance was needed and the numbers of casualties. Clinics were then put in place which we ran from dawn to dusk.

The main injuries on the islands were wounds which had not been treated and had become infected, chest infections and diarrhoea which were all treated.

The islands had also suffered from collapsed buildings and many schools were damaged or destroyed. Fishing boats were washed far in land.

Professor Redmond, who is also MAHSC lead for Global Health and has been responding to humanitarian disasters for 25 years including

earthquakes, volcano eruptions, wars and epidemics, said: "What they need now is help with reconstruction, so many buildings were demolished. They are very capable people and know what to do and would normally manage these things very well themselves but this was so large and over such a wide area and so many islands they just needed some outside assistance as an emergency."

The UK team was provided as part of the British Government's £10 million relief efforts for the disaster which has claimed at least 5,600 lives.

Dr Hughes described the team that was put together and the support from NHS Trusts. "The team has a varied and diverse range of clinical skills, and had undergone specific training relevant to working in disasters. This enabled us to complement and help strengthen the healthcare already existing in country, and to work with the local and international teams to help meet the extensive medical and surgical needs resulting from Typhoon Haiyan - whether it be through the provision of medical skills and personnel, equipment or both.

"It is particularly important to note also that without the support of colleagues and NHS trusts or workplaces at home, this team would not have been able to deploy as quickly as it has. That support has been fantastic."

Nurse Livingstone added: "To be able to help in the Philippines at a time of such desperate need was a real privilege and our aid was well received by the communities that we visited. Working with the Royal Navy enabled us to extend our help beyond health care to address needs of shelter and to distribute high energy biscuits and clean drinking water. Despite that the deployment was hard work and challenging, it was highly rewarding to work as a member of such a professional team and we were proud to represent our country in the Philippines. We wish the

communities impacted by Typhoon Haiyan all the best in recovering from this disaster."

Provided by University of Manchester

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