

Life in an underground Syrian field hospital  
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The United Nations has called the conflict in Syria “the greatest humanitarian tragedy of our times,” and UN officials have said that they are “running out of words” to describe the horrors inside Syria<sup>1</sup>. What started as a peaceful protest in March 2011 has led to 7 years of an escalating conflict in which hundreds of thousands of people have been killed.

The use of chemical weapons and napalm on civilians, the decimation and mass starvation of civilian populations through conventional warfare, the denial of medical care and humanitarian aid, the murder of medics, and the destruction of schools, bakeries, and hospitals—all of these actions have been systematic and deliberate by armed forces<sup>2</sup>.

A collapsed health-care system further complicates the situation. Public hospitals and ambulances have been damaged or out of service. Thousands of health-care personnel have fled the country for their safety, and hundreds have been arrested and tortured.

In some areas, sustained bombardments and intense fighting have transformed civilian and residential neighborhoods into a battlefield. As a result, medical work in these areas has been driven underground where doctors and nurses operate in secret, makeshift, provisional facilities such as caves, farms, and apartment buildings. Massacres and mass casualty events have unfortunately become a daily routine.

This presentation will give a glimpse into what life is like for Syrian medics operating in an underground field hospital under siege in Aleppo where snipers fire at the rooftop and barrel bombs land meters from its doorstep.

References:

1. World Food Programme. Aid principals call for action to increase humanitarian access and funding for Syria crisis. 2013 Dec 18. <http://www.wfp.org/news/news-release/aid-principals-calling-decisive-action-increase-humanitarian-access-and-funding-sy>.
2. Brundtland GH, Glinka E, zur Hausen H, d'Avila RL. Open letter: let us treat patients in Syria. *Lancet*. 2013 Sep 21;382(9897):1019-20.