AIR FORCE MEDICAL SPEECH

FOR

RODNEY LINDSEY

Hello everyone and thank you for being here to allow me a few moments to share with you the vital importance of the Air Force Medical Service. (**If there are any people you would like to acknowledge, you can do that here**). I would like to take a moment to acknowledge \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for making this event accessible to all that are here. I cannot understate the importance of medical care for all Americans and especially for those in the military, clearly preventative care, preparation, on site triage, and adaptation to create access to care is critical to the success of our missions and to the well being of our armed forces. Today we’ll explore a little of the history and vitality of this essential program and hopefully we’ll all leave here in one piece feeling inspired, energized, and eager to understand and really appreciate what goes into the care of our Armed Forces and how far we’ve come since the first far reaching medical programs were instituted almost one hundred years ago.

The late comedian Henny Youngman brought up a good point when he said, “I told the doctor I broke my leg in two places. He told me to quit going to those two places.” (**Wait for the laugh**). Unfortunately enlisted personnel usually cannot “pick their battles…” Sorry Henny!. What we CAN do in these modern times is provide the best possible health care and attention for the enlistees who so selflessly risk their lives every day to defend our country. To understand the progress we have made it’s vital to look back to the beginning… to the roots of the programs that laid the foundation for today’s Air Force Medical Service.

If any of you have had the chance to watch the recently aired PBS drama series, “Mercy Street,” you might have gotten a little glimpse of what life might have been like in a medical facility during the Civil War. The blood… the gore… the initial lack of effective sedation… and that was just for the non-Coms!! (**Wait for the laugh**). We may not realize it but in the early days preceding modern organized medicine, things weren’t so organized. Nursing didn’t begin to come to presence until the end of the nineteenth century. Methods of anesthetization were crude at best, operating tools appear to have been borrowed from the kitchen staff, and infections threatened to wipe out wards filled with wounded soldiers. Of course all of this was well before the advent of the Air Force as we know it, but from going back that far we can imagine the… pardon the pun… **pre-existing conditions** of medicine and medical care one hundred years ago. (**If you want to add a little humor you can mention this- if you think it’s too gruesome, skip it**) I do have to say though, that the only thing that was actually flying in the scenes in “Mercy Street” were the parts and remains of those “lost in battle”…. as they were literally tossed out and carted off to their final resting places. There was no mercy in those harsh scenes but they provide a perspective and show us how fortunate we are to be living in an age of considerable medical and technological advancement.

General Malcolm Grow was a doctor, military man, and a true visionary. He was chief flight surgeon of the Army Air Corps from 1934 to 1939 and along with Major General Harry G. Armstrong founded the Aero Medical Laboratory in Ohio. During his service he designed and developed life saving flight equipment. He received a Distinguished Service Medal for devices and body armor destined to protect airmen from windblast; he created electrically heated clothing, protective fire resistant face and neck protectors and special combat rations for those assigned to prolonged bombing missions. Thanks to General Grow’s ingenuity and dedication to his service, many lives were saved. Instances of frostbite were reduced, leading to greater efficiency of manpower and medical attention. He considered the well-being “whole soldier” and saw the need to implement rest homes for those suffering from exhaustion and emotional stress. His efforts were rewarded when he was named the very first Surgeon General of the Air Force in July of 1949. It is with much gratitude to General Grow that we have his foundation of service and implementation to guide us in our continuing quest to serve the people who serve us so selflessly.

Many people may turn to the legendary story of M\*A\*S\*H to get a glimpse of what it was like to endure life during the Korean War. Of course our troops didn’t have brilliant writers or fabulous sets and lighting because they were …at… war. But M\*A\*S\*H is another attempt for modern media to give us a picture of life during that war. While actual military enlistees gave their all to their own assigned mobile army hospital units, I don’t think they had as much witty and scripted dialogue but some of what was said really brought home a picture of the actual situation faced every day by the troops and the staff of the actual M\*A\*S\*H units… like when Hawkeye said, “Three hours ago, this man was in a battle. Two hours ago, we operated on him. He's got a fifty-fifty chance. We win some, we lose some. That's what it's all about. No promises. No guaranteed survival. No "saints in surgical garb." Our willingness, our experience, our technique are not enough. Guns and bombs and anti-personnel mines have more power to take life than we have to preserve it. Not a very happy ending to a movie. But then again, **no war is a movie**.”

Having said that, the Air Force did experience advances in medicine during the Korean War. Even though the number of medical personnel had seriously diminished from World War II … from over 100,000 to the Korean War… that had about 26,000 medical personnel that began only five years later, fatality rates for soldiers were reduced. It’s estimated that the fatality rate during WW II was around 4.5% while during the Korean War it dropped to around 2.5%... The advent of M\*A\*S\*H units and Medevac units made a drastic difference in saving lives. In an article called “Battlefield Medicine in the Korean War” we learn that “The Eighth Army Surgeon estimated that of the 750 critically wounded soldiers evacuated on Feb 20, 1951, half would have died if only ground transportation had been used.”

The coming of the Vietnam War proved the adage that “Necessity is the mother of invention.” Because of the painfully limited availability of hospital beds or buildings that might be converted into hospitals, the introduction of airlifted modular steel boxes that were ten feet by forty feet… probably similar to a shipping container… were connected and outfitted as medical units. By 1968, the USAF Hospital at Cam Ranh Bay Air Base had a capacity of 475 operating beds and a staging facility consisting of an additional 100 beds. The Vietnam War also was the time in which the AFMS saw the need to maintain a healthy and fit fighting force. New physical fitness programs were instituted that included running, swimming, bicycling, and aerobic exercise. We know today there are benefits both physical and emotional when an exercise regimen is introduced and this program was at the forefront of the popularity of fitness programs throughout the United States. Some guy named Barry may have a string of highly successful “boot camps” throughout the United States, but let’s remember where the concept of “fit for life” was established! War is awful but the AFMC is dedicated to preserving the humanity of our troops.

It can be frustrating to think of advances in medical innovation in terms of wars fought throughout the generations, but those are the times that really try a person’s … and a system’s… endurance. It is during the crisis of War that we are able to experience what works and what needs to be revamped. Crisis definitely inspires the creative responses to urgent medical and logistical needs.

Such was the case during Operation Desert Shield and Operation Desert Storm. The AFMS had always proved their substantial dedication to saving the lives of wounded military through rapid response, keen attention, and thorough knowledge of what is needed and wanted to address any crisis that would arise. That was not the case at the outset of these operations. The teams on the ground noticed that wounded patients weren’t being brought in as they should have been and it was observed that war causalities were going instead to the Army Combat Support Hospital in Muscat, Oman. When the situation was analyzed, it was realized that the army built facilities closer to the front. Something had to be done to increase the efficiency and response of the AFMC. It was then that more reliable mobile ventilator systems were devised and implemented. As Lt General Paul Carlton, former Air Force Surgeon General summarized, the CCATT or Critical Care Transport Teams have proven to be essential components in saving lives while in transport to medical facilities. Lt General Carlton is quoted as saying; “We have developed a modern transportation system to go along with the modern battlefield for the Army, Navy, and the Marines.” Today, CCATT is considered a vital component of AFMS, but it took a war to liberate Kuwait some 25 years ago for the military to realize how badly it was needed.”

Since then the AFMS is there to serve… from Operation Southern Watch to Enduring Freedom; from Iraqi Freedom to New Dawn, our teams give their hearts and minds and ingenuity to the cause of keeping our armed forces alive.

War really is hell… On everyone involved. With progress comes challenge. With innovation comes next generation issues that need to be addressed and solved and new procedures need to be designed and introduced to address the ever-evolving issues of response, treatment, and survival. We can see that each day brings new information about global threats to our survival. It takes the dedication of our armed forces and the incredible commitment of all of our teams at the Air Force Medical Services to envision and anticipate what will be needed while treating the issues at hand.

Saint Augustine said, “The greatest evil is physical pain.” Now imagine that physical pain intensified to battlefield proportions. Thanks to the AFMS’ unflappable focus on getting the job done… **WHATEVER** needs to be done… war will still be hell but there is comfort in knowing response, care, and technological innovation are ready and there as our troops need it. Hopefully sometime in the future, thanks to the efficiency and dedication of our AFMS, an announcement similar to this one from M\*A\*S\*H might be heard…. “ Attention all personnel. Due to today’s **lack of casualties**, tonight’s midnight movie will be shown at **9.00 in the morning**… Oh… One more thing… Midnight has been cancelled.” (**Wait for the laugh**). I know we all dream of a world without any war or casualties, but the truth is that as long as there are at least two people on earth, one is probably going to be an instigator and we have to be prepared. I am very, **VERY** proud of our Air Force Medical Services teams stationed throughout the world and I know you all agree that they … and **YOU** (**Are you speaking to AFMS teams?**) are all incredibly inspiring and are immensely responsible for lives saved in all theaters of combat. No lives should ever be lost in battle but with the dedication, intelligence, and resourcefulness of this service, we have the heritage and means to work and offset the horrors of war and to save lives. Thank you all!