

A medical crisis in Syria

As large parts of the world focused on the second week of the London 2012 Olympics, government troops in Syria were preparing to step up their assault on the country's largest city, Aleppo. Civilians as well as armed rebels have consistently been targeted in the fighting, and at least 10 000 people are estimated to have died since the start of the conflict 17 months ago. An all-out attack on Aleppo will no doubt swell this number.

A new report by Amnesty International documents the human rights abuses already occurring in the city. *All-out repression, purging dissent in Aleppo* finds that attacks on peaceful demonstrators in the city as well as the obstacles to their medical care are commonplace. On May 25 alone, at least 10 young people and children were killed and dozens injured when security forces and plain-clothes militia fired Kalashnikov rifles and shotguns at demonstrators. Furthermore, security surveillance inside Aleppo's hospitals makes treatment of injured people difficult. The report notes that some critically ill protesters have been evacuated from hospitals to locations outside the city, but often in long perilous journeys to avoid army checkpoints.

Secret field hospitals have been set up in Syria because of the military presence at state medical facilities. However, the report also highlights how doctors working in these makeshift hospitals have been detained, tortured, and even murdered by government forces. On June 24, the charred and mutilated bodies of three young doctors who were part of an underground network treating injured protesters were found in a car in Aleppo a week after their arrest. "Being caught with medical supplies or treating injured protesters is worse than being caught with weapons", one doctor told Amnesty. Such horrific attacks on doctors as well as civilians seem to have been sanctioned at the highest level of government in Syria. Amnesty concludes that the Syrian Government is responsible for systematic violations amounting to crimes against humanity in Aleppo. With deadlock at the UN Security Council, the resignation of Kofi Annan as UN-Arab League special envoy, and the escalation of violence, Syria's medical crisis is likely to worsen.

Civil unrest, and the government's attempts to quash it, also continues in Bahrain. On Aug 1, Physicians for Human Rights (PHR) released a report documenting the Bahraini Government's use of tear gas as a weapon. Since

February, 2011, PHR claim the government has extensively and persistently used the toxic agent in large quantities against men, women, and children, often in enclosed spaces, resulting in blinding and even death of civilians. The report states that this misuse of toxic chemical agents could lead to long-term health consequences, including miscarriages and severe respiratory distress. PHR calls on the Bahraini Government to not only end these attacks but also allow scientists, health professionals, and epidemiologists to undertake toxicological and survey research on the effects of tear gas use in the country.

A disturbing feature of modern conflicts and, indeed, the Arab uprisings, has been the flagrant disregard for the Geneva Conventions, including targeting of civilians, persecution of health workers, and attacks on hospitals, alongside the failure of the UN system to prevent these violations. The medical community may feel hopelessness in the face of these seemingly intractable situations. But there is much that it can do to monitor, report, and prevent the impact of conflict on the health of populations, as well as condemning attacks on civilians and breaches of medical neutrality. *The Lancet* hopes to publish its first Series on conflict and health next year to advance knowledge in this area. In 2010, we published a special issue on violent conflict and health to coincide with one of the first major international conferences on the subject with multidisciplinary and global representation organised by Global Doctors and partners. The conference concluded that health professionals have a positive part to play not only during and after conflicts but also before them. However, the meeting also noted that common causes of and links between violent conflict and ill health are complex and poorly studied at present. And further research and standardisation is needed to achieve credible estimates of the health consequences in violent conflicts.

Aug 19 marks World Humanitarian Day, which aims to raise awareness about humanitarian work and pay respect to those who have lost their lives helping others such as the young doctors in Syria. The day should also be an opportunity to reflect on what more the medical community can do to understand and address the complex interactions between conflict and health, to protect civilians, including doctors, from harm, and to contribute to peace. ■ *The Lancet*



Reuters

For the report by Amnesty International see http://www.amnestyusa.org/sites/default/files/syria_aleppo_report.pdf

For the PHR report see https://s3.amazonaws.com/PHR_Reports/Bahrain-TearGas-Aug2012-small.pdf

For *The Lancet's* 2010 special issue on conflict and health see <http://www.thelancet.com/series/violent-conflict-and-health>

For more on the Global Doctors conference see <http://www.global-doctors.org/global-response-2010-experts-addressing-violent-conflict-and-health/>

For more on World Humanitarian Day see http://www.who.int/mediacentre/events/annual/world_humanitarian_day/en/index.html