CONFERENCE REPORT
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World Congress of Disaster and Emergency Medicine
Edinburgh, May 14-19, 2005

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On May 14th, the World Congress of Disaster and Emergency Medicine came to Edinburgh, the beautiful and majestic capital of Scotland with its abundance of heritage and history. Coinciding with the 500th anniversary of the establishment of the Royal College of Surgeons of Edinburgh, it was an occasion to meet, learn, share, prepare and savour the delightful sounds and sights of this breathtaking city. The congress was presented by the Faculty of Pre-hospital Medicine of the Royal college of Surgeons of Edinburgh on behalf of the World Association of Disaster and Emergency Medicine. The other collaborators were:

- The Royal College of Surgeons of England Quincentenary Programme
- BASICS (British Association for Immediate Care), Scotland
- British Association of Immediate Care (BASICS)
- Royal Centre of Defence Medicine
- Scottish Ambulance Service
- NHS Scotland

Under the able stewardship of Dr Andrew Marsden and Dr. Judith Fisher, chair and co-chair of the organising committee, it turned out to be a path breaking congress and one that will be remembered by all who managed to make it to Edinburgh. Attended by a galaxy of luminaries from the world of disaster medicine and public health, it was a global meet and one of its kind, with representation from all continents. Rounds of hectic parleying, scientific presentations, policy decisions and international practices made it an enlightening experience.

The conference was preceded by a satellite session on research in disaster public health and pre-hospital care. Sessions included: principles of good clinical research practice; ethical constraints and perspectives; the Utstein methodology for disaster research and; the perceived role of evidence-based medicine and the Cochrane Collaboration. Sessions were presented by eminent experts, and concluded with enriching panel discussions debating the core issues at stake.

One of the showcase events of the congress was the opening day major incident educational event at the Murrayfield stadium where the delegates witnessed a mock moulage of a chemical incident during a fictitious rugby match. The fire, police and ambulance services ably demonstrated their preparedness in handling such major incidents during mass gatherings. The opening ceremony was hosted at the Edinburgh International Conference Centre, (a purpose-built and fantastic venue) in the heart of Edinburgh. With a warm and heartening welcome to the sounds of Scottish bagpipes

from the Scottish Ambulance Service Pipe Band, Dr Marsden, the congress chairman and Dr Knut Ole Sundnes, the WADDEM president, introduced the theme of the congress *'To live, to learn, to love and leave a legacy'*. Student Stefan Ebmeier of James Gillespie High School, Edinburgh, entertained the audience with a beautiful haunting rendition on the violoncello followed by an excellent dance performance titled Ubudlelwane (a Zulu word for people eating, talking together and establishing close relationships in harmony) by girls from the same school, to commemorate the victims of the tsunami of South-East Asia.

This was followed by three days of intensive scientific and policy making sessions devoted to a wide spectrum of areas related to management of disasters and pre-hospital care. Twenty-four free paper sessions and 145 posters were presented during the congress. Special theme sessions included psychological aspects of disasters, civil-military collaboration, education, resuscitation, transport medicine, public health, chemical, biological and nuclear hazards, children in disasters, infectious diseases, planning, terrorism and EMS systems. A major highlight of the congress was the seminar on the tsunami of the South-East Asia in December 2004. A disaster of epic proportions causing loss of life to over 300,000 people and unprecedented havoc, the experiences of the experts who worked 'in the trenches' was both spine chilling and informative. The co-ordination of disaster management, role of international organisations, experience of local providers, cultural sensitivities, outbreak of infections and the obstacles to providing aid, was an eye-opener and water-shed in the history of disaster medicine. Painful memories were re-lived and lessons learned were shared with sombre nostalgia.

Other celebrated speakers at the conference included Professor James Ryan of the Leonid Cheshire Centre for Conflict Recovery, London talking about post-conflict recovery, Prof. Douglas Chamberlain, the leading cardiologist on Guidelines for Resuscitation, Prof. Leonid Roshal from Moscow on Terrorism and children, with reference to the Beslan tragedy, Dr. Eric Noji of the Office of Emergency Response, USA, on physician experience in politics of disaster relief and Eleanor Bradford, a journalist from the BBC providing the media perspective of major disasters. Speakers shared their experience from different corners of the world and attempted to thresh out problems related to international collaboration in disaster management, education, research and relief. The following task forces met regularly to deliberate and debate issues and present their respective guidelines:

- Nuclear, Biological, and Chemical Hazards
- Terrorism
- Psychosocial Aspects of Disasters
- Disaster Planning
- Disaster Public Health
- Refugees/Internally Displaced Persons
- Transportation
- Civilian-Military Collaboration
- Coordination, Control, and Information Systems
- Emergency Medical Services Systems in Latin America and the Caribbean
- Landmines

The late Dr Peter Safar - pioneer of the World Association of Disaster and Emergency Medicine (WADDEM) established in 1976 as 'the club of Mainz' in the USA, and his Messianic work for promotion of world peace and development of the science of disaster and resuscitation medicine, was remembered during the course of the conference and he was sadly missed. The second Peter

Safar Award for service in disaster reanimatology was presented to Dr Peter Baskett, a world-renowned figure in the field of disaster and emergency medicine, who delivered his eponymous Peter Safar lecture at the congress. Dr Baskett, a former consultant anaesthetist from Bristol in the UK, is famous for his work on resuscitation and pre-hospital care. A pioneer in resuscitation training in hospitals, and in developing the skills of ambulance paramedics in the UK, he is also renowned for the introduction of Entonox into the Ambulance Service in 1970; helping to pioneer the discipline of motor sport medicine; and helping to bring ATLS (Advanced Trauma Life Support) to Britain. A truly worthy recipient, Dr. Baskett has also held the roles of Chairman of the British Association for Immediate Care (BASICS); President of the Association of Anaesthetists; President of WADEM (1989-1993); founder Chairman of the European Resuscitation Council (1989-1994) and; editor of the journal '*Resuscitation*'.

The congress culminated with three Edinburgh statements, which were unanimously passed by the delegates after marathon sessions of toil and cerebration. The first stated that the World Association of Disaster and Emergency Medicine universally condemns exploitation of children as victims and vectors of terror and will facilitate global efforts to categorise effects of disasters due to natural or human cause on children and families with respect to health conditions, function and potential and ensure that children and families receive priority care in disasters consistent with future needs and welfare.

The second statement resolved that the World Association of Disaster and Emergency Medicine will support the Nairobi Declaration and Action Plan 2005-2009 on landmines, by encouraging members to establish work or relationships with other international committees to help victims and support mine ban treaty. WADEM will also seek dialogue with government and non-government organisations associated with efforts to assist victim rehabilitation and recovery.

The third stated that WADEM will assist with the provision of training and education of workforce involved in disaster management, in accordance with accepted standards of practice based on medical evidence and/or consensus. WADEM will also help to continue the development of standards in education, evaluation and research in disaster medicine, and will ensure global recognition of these standards. They will seek to streamline integration of resources not associated with previous humanitarian objectives such as civil-military co-operation, and attempt to collaborate with all stakeholders who are involved in the prevention and mitigation of damage resulting from such hazards. (Full text of the resolutions can be obtained at: www.wadem.medicine.wisc.edu).

It would be inappropriate to report on the conference without mentioning the gala social events which were organised for the congress. The opening evening reception at the magnificent Edinburgh Castle, and the congress dinner and *Ceilidh* (pronounced 'Kay-Lay') at the entrancing Royal Museum of Scotland, were the high points of an illuminating experience. The singing, dancing and merry-making stirred up buoyant spirits as the city captivated the vibrant verve of the global crowd. The congress ended with an enchanting Thai dance conceived and performed by student Tamara Goldie, who named it '*Bye Sri-the spirit lives on*' in reminiscence of the cataclysm in South-East Asia. To end the evening, all participants rose and joined hands together to sing 'Auld Lang Syne' in a sublime gesture to the camaraderie and spirit invoked between the delegates in their unanimous mission to save mankind and provide frontline care to those threatened with the loss of life or limb, and their state of well-being in this fractured world.

We live in a fragile world, fraught with the threat of disaster, looming like the sword of Damocles overhead. As I write this after the conference, the world braces itself to those threats every single day. Abraham Lincoln's famous words seem as if they were uttered in this present age "*We live in*

the midst of alarms; anxiety beclouds the future; we expect some new disaster with each newspaper we read” and as Winston Churchill said “There are men in the world who derive an exaltation from the proximity of disaster and ruin, as other from success”. Warped minds may attempt to make the world the ‘dancing halls of the devils’ and scaremongers may serve as catalysts to their cause. But in spite of all, there is hope. In the words of Robert Fulham living things have been doing just that for a long, long time. “Through every kind of disaster and setback and catastrophe, we are survivors”.

As London and the UK recover from the after-shocks of the heinous crimes committed against innocent humanity, as Mumbai and India struggle to come to terms with the ravages of a devastating flood, and as Iraq continues to smoulder and burn, the challenges before us are like never before. They serve as a poignant reminder of the work that needs to be done and carried forward. The footprints on the sands of time left behind by the faceless innocents caught up in meaningless human conflict and natural calamities, will help guide us in our endeavour to further the science of disaster medicine, to iron out the seams in international collaborative work on humanitarian aid and attempt to light the candle of peace in our global village.

“Happiness and strength endure only in the absence of hate. To hate alone is the road to disaster. To love is the road to strength. To love in spite of all is the secret of greatness. And may very well be the greatest secret in this universe.” - L.Ron Hubbard