

REMEMBERING WARS PAST

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The discovery of new facts and treatment options is only one of many reasons for publishing articles in a medical journal. Often there is the need to describe how epidemics of new illnesses have been combated so that the same procedures which have previously been successful could be used again. Such papers, which in effect chronicle past events while they are still fresh in the memory, become part of the medical history of a nation or location, and the medical history of a nation becomes part of its social history which gives it its identity. One of the present authors remembers well how Paul Cassar's book 'The Medical History of Malta', written by a practising doctor for doctors, became an inspiration for all Maltese doctors when it was published in 1964, the same year as the birth of Malta as an independent nation (1). That book became a focus of pride not only for the doctors, but also for all the citizens of the new state, as well as a testament of the longevity of civilisation on the islands which constituted it.

However, the work of a medical writer may also sometimes chronicle other facts, not simply of medical, but also of huge historical importance to a nation. While the medical impact of those facts may be important, it may also be dwarfed by the consequences of cataclysms so severe that they assume not only national but even international importance. Moreover, the impact of such events on the population concerned might even continue for generations, through genetic and epigenetic influences shaping the lives of people in a corner of the world for generations to come. Often it is left to doctors and epidemiologists to chronicle

such events, and to draw conclusions from them. Historians will later come to depend on their writing and draw social and political conclusions from them.

In this edition of the journal, Mevludin Hasanovic presents a paper entitled 'Post-traumatic Stress Disorder of Bosnian Internally displaced and Refugee Adolescents from three different regions after the 1992-1995 war in Bosnia-Herzegovina (2). Here he describes the epidemiological distribution of PTSD, not among the combatants in the war, but among the members of the next generation. He demonstrates that the effect of war trauma exists among those who were children during the war. Furthermore, he demonstrates that the prevalence, the level of severity and social dysfunction were greatest in Srebrenica, compared to other areas where the fighting in Bosnia-Herzegovina was less fierce.

It is well known that Srebrenica was the site of a systematic massacre which was of the gravest import, both in terms of its consequences for the local population who lost thousands of fathers and sons, and in terms of the failure of the United Nations Protection Force (UNPROFOR) to actually provide protection to the inhabitants of Srebrenica. These consequences are still being discussed at the International Criminal Tribunal for the former Yugoslavia in The Hague, and have been said to have led to the development of a view in international law that if a country is in a position to protect the civilian population which is at risk, then it is obliged to do so - a view which has been quoted to justify the defence of the Libyan population of Benghazi by NATO air forces in 2011 (3).

The epidemiological observations in Hasanovic's work are, therefore, not surprising, but they face the international community with the fact that a serious consequence of the war in Srebrenica is that the trauma, with its corollary of social dysfunction, has affected the next generation in an impor-

tant way, with future consequences which we cannot yet predict. For this reason Hasanovic's findings need to be known internationally. It is of extreme importance that, while always providing assistance to those who have been physically and mentally injured by natural or man-made calamities, doctors should do whatever they can to ensure that cataclysms such as war should be prevented. It is for psychiatrists to point out to politicians the unacceptable effects of mental trauma on the civilian population whenever a war is waged, because, alas, wars have been waged far too often over the last few years, and they continue to involve the civilian populations of many countries.

This obligation for doctors and epidemiologists to report to politicians on the consequences of war is not unique to the situation in Bosnia-Herzegovina. Recently, doctors have reported on the high incidence of birth defects and the possible link with the use of depleted uranium shells as weapons of war in Fallujah, Iraq (4, 5). This is another example of epidemiologists demonstrating to the world the consequences of modern warfare on future generations. The medical profession must vigilantly report on the expected and unexpected horrors of modern warfare at all times if it is to help prevent those very horrors.

It is also worth noting that the remit of psychiatrists does not stop there. It is certain that the public health system of Bosnia-Herzegovina never expected, before the war, to have to deal with PTSD on such a vast scale. Nor indeed, it should be noted, have the armed forces of the western powers, including the United Kingdom and the United States, found themselves adequately equipped to deal with the psychological problems of servicemen returning from Afghanistan and Iraq (6, 7, 8). Our politicians need to consider seriously what they are sending our young people to do in our name and what kind of support they need to give them.

PTSD is a condition which is challenging to treat and which requires the mobilisation of a wide variety of resources. The wars in the Balkans generated many innovative attempts to treat PTSD, ranging from the use of medication (9) to the use of group psychotherapy, and the realisation that such emotions as shame may complicate the treatment of psychological trauma (10, 11).

In other recent publications, Hasanovic has described innovative methods using local cultural and religious resources (12) as well as local educational resources (13, 14) to deal with PTSD within the context of the aftermath of the war in Bosnia-Herzegovina. He is to be commended for describing the use of these local resources to deal with the situation in which he has found his patients, including both veteran combatants and children who grew up in the war.

The trauma of war and the episodes of extreme violence like Srebrenica serve to remind us that war, death and suffering, to paraphrase Abraham Lincoln, must make us act to ensure that those who suffer and die do not do so in vain. The Bosnian War has led to the birth of Bosnia-Herzegovina as an independent state. That war will remain forever part of the history of the country, and it is only through mutual forgiveness (15) and reconciliation that the state of Bosnia-Herzegovina will survive as a modern democratic state, and the dead, injured and mentally traumatised from the war will be adequately honoured and remembered.

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