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EDITORIAL

The Health Impacts of War

You are welcome to this edition of the West African Journal of Medicine. At this point in time, the challenges associated with COVID-19 pandemic are gradually receding even though there are emerging reports from certain parts of the world that calls for concern and continuous vigilance. However, as we write this, war has broken out between Russia and Ukraine.¹ This war has brought global fear and there is concern that it may escalate throughout Europe and result in third world war. Such armed conflicts seemed to have largely occurred in the developing parts of the world and did not always attract as much global attention as the unfolding war between Russia and Ukraine. In Africa, for example, several countries have continued to have armed conflicts in one form or the other. These include Nigeria, Cameroun, Central African Republic, Libya, Sudan, South Sudan, Ethiopia, among others.

Armed conflict is a significant cause of death and disability. Direct and indirect effects have been recorded. War causes obvious injuries and deaths on the battle field while war-related effects such as increase in the displaced population, breakdown of health and social services and increase in disease transmission are threats to public health.^{2,3} It has been described as the worst man-made public health problem.⁴ Armed conflicts also cause a diversion of essential and scarce resources away from health and other human services towards the war effort.

The war in Ukraine has again brought to the fore many of these severe health- and healthcare-related challenges associated with armed conflicts. About 3 million people have been reportedly displaced by the war, while an estimate of 15,000 people has died including

combatants and civilians.¹ The war has also ignited talks about the possibility of the breakout of a nuclear warfare as part of a potential third world war. While some opine that such a scenario is far-fetched, it nevertheless presents an opportunity for a discourse on the medical preparedness for nuclear emergencies. It is thus high time we asked ourselves about how prepared are we for the direct and indirect health problems associated with wars and conflicts in general and nuclear warfare in particular.

Problems of Nuclear Warfare

Nuclear warfare has several health effects that last longer than the war itself. The three major causes of death associated with nuclear detonation involves death due to blast, radiation and waves from heat. In addition, dangerous electromagnetic pulses could lead to impairment of devices operated electrically, including those being used in healthcare services.⁵ Furthermore, human exposure to these radioactive rays and substances can lead to a variety of short- and long-term health problems. Depending on the intensity of these rays, there could be damages to the nervous and gastrointestinal systems in particular radiation burn injuries, impairment of bone marrow and the immune system, increased vulnerability of victims to infections and different cancers, among others.⁵ Medical doctors and other professionals, especially those at the frontline of emergency care, should thus receive appropriate training regarding appropriate response to nuclear incidences and the management of affected individuals.

Displacement of People

Many individuals are forced to leave their homes in search of safety. These

displaced populations are at a greater risk of disease and illness. In particular, they are at a higher risk of contracting infectious diseases. Research has reported significant increase in the incidence and prevalence of tuberculosis, hepatitis B and various infectious diseases in refugee and asylum-seeking populations.² Numerous factors contribute to putting them at a greater risk of disease and illness. These factors include increased levels of poverty, overcrowded living conditions, and increased likelihood of taking on work in cramped conditions.³ Such displacement inevitably reduce access to clean water, food and sanitation, thus putting refugees at risk of diseases like cholera and other water-borne diseases. Malnutrition, especially in children is also prevalent in such population.^{2,3}

Break-down of Health Care Services and Infrastructure

Armed conflict exerts detrimental effects on the health system, ranging from the health infrastructure to the human and financial resources. This further worsens already weak health systems. Hence, conflict-affected zones tend to have poor health indicators. The migration of skilled health workers away from conflict zones, leads to or aggravates the insufficiency of human resources for healthcare.⁶ All these impair the capacity to manage conflict-related injuries and other health issues that are indirect consequences of the war. The breakdown of healthcare systems can eliminate screening programs, limit patients' access to functional health facilities, reduce the availability of essential medicines, thus making compliance with use of medications a low priority for people facing physical and emotional trauma.

Women and Child Health

The impacts of armed conflicts on public health tend to disproportionately affect women and children. Men are more likely to suffer injuries or die on the battlefield while the women suffer from a variety of long-lasting consequences of conflict on health. Violent acts directed against women during conflict situation include rape, sexual slavery and other forms of gender-based violence. Rape and sexual violence are often used as a tool of war. These war crimes result in both physical and psychological injury to the women at the hands of the violent assaulters.^{2,6}

There are also limitations in access to reproductive, maternal and child health services such as family planning services, obstetric care, vaccination programs, among others. The preservation and enhancement of reproductive health is rarely a priority during time of war. This results in avoidable maternal and child mortalities and morbidities. It has been shown that, in conflict regions, children are at a greater risk of a multitude of health issues due to the impact of war on maternal health, interruption of public health intervention programs such as immunisation, the lack of access to healthcare, and the harsh living conditions they face.^{2,6}

Mental Health

The negative impact of wars and armed conflicts on mental health cannot be overemphasized. This affects both the combatants and civilians. The effect of displacement, food insecurity, fear and anxieties, among other conflict-related exposures can exert an unimaginable toll on individual's mental and psychological health. These include different degrees of depression and anxiety disorders. Post-traumatic stress disorder (PTSD) is a common long term

sequelae of exposure to wartime violence.² A detailed discussion of PTSD is beyond the scope of this article. However, PTSD encompass a pattern of symptoms that occur as a result of immediate or delayed response to a catastrophic life event. These include intermittent or intrusive distressing recollections or dreams of the event, and psychological agitations at exposure to cues or scenarios that resembles the event. There is usually a persistent avoidance of stimuli connected to such trauma, in addition to a blunted or persistent increased arousal (e.g. being unable to fall asleep or stay asleep). PTSD tend to be under-recognized and under-diagnosed in this part of the world. Health professionals must maintain a high index of suspicion for this disorder among the general populace where exposures to traumatic life events such as armed conflicts and sexual violence are prevalent.

Role of Healthcare Professionals

Health care providers and professionals must be attuned to these and many other health problems and consequences of armed conflict. They must be involved in advocating for, and delivery of, safe and evidence-based public health and humanitarian interventions. This underscores the need for adequate training in the management of traumatic injuries and other conflict-related physical and mental problems. The curriculum for training at both undergraduate and postgraduate level will require a review in this regard. Furthermore, as mentioned earlier, proper attention must be paid to the training and preparation of relevant healthcare professionals with regards to tackling the health implications of nuclear incidences that may arise from war-related nuclear accidents or outright nuclear warfare.

In conclusion, war is not desirable but it has unfortunately become a practical reality of the modern age. The current conflict going on in Europe has the potential of snowballing into the third world war. As the saying goes, to be fore-warned is to be fore-armed, hence, the medical profession has to be proactive in terms of preparation for such scenario.

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