Health care services and sickness profile in the United Nations Interim Force in Lebanon

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ABSTRACT

Objective
This article presents the organization structure and tasks of the UNIFIL (United Nations Interim Force in Lebanon) health services, investigates the prevalence of diseases and injuries in the population of soldiers deployed within the UNIFIL, and discusses the sickness risk factors involved, with particular attention being paid to environmental causes.

Material and Methods
The conducted analysis was based on medical records of 2,054 patients of various nationalities treated in the UNIFIL Hospital from 1993 to 2000. The soldiers treated in the UNIFIL Hospital within the given period had a complete clinical evaluation. The examined population was selected out of 38,434 persons, military personnel of particular contingents, in the UNIFIL service from 1993 to 2000. The composition of the studied population was random (without choice). The medical records were used for a retrospective epidemiological assessment; the rate of morbidity, the rate of dynamics on constant and inconstant bases and the rate of morbidity structure of the studied group were measured. A chi-square test was applied for the statistical analysis. Changes in confidence level p>0.05 were considered essential.

Results
Health problems among soldiers hospitalized within the given period were categorized in injuries (23.5%), diseases of the digestive system (18.4%) and infectious diseases (10.6%). The incidence of injuries of particular organs and systems within the studied period had been decreasing, on average, by 1.3% annually. The most frequently hospitalized in the UNIFIL Hospital were Polish, Fijian and Nepalese soldiers. A high incidence of injuries was conditioned by the fact of being deployed within an operational area (battle injuries). Also, a high proportion of injuries resulted from traffic accidents and sports injuries (non-battle injuries). While, high incidence of infectious and digestive tract diseases resulted from disregard of basic sanitary principles that ought to be followed within areas of unfamiliar climatic and sanitary conditions.

Conclusions
The present study showed that the large volume of patients treated in UNIFIL, had a high level of treatment needs, the health problems among soldiers were found to be mainly battle injuries and health problems related to the pattern of life of the soldiers in Lebanon followed (diseases of the digestive system, infectious diseases, sexually transmitted diseases, psychiatric disorders). Risk factors related to environmental causes and to inadequate hygiene seemed to play a continuing role through the studied years and to contribute in morbidity, indicating the need for the development of better prevention policies, although a gradual improvement has been observed in morbidity data.

Keywords: health care services, diseases, injuries, military medicine, Lebanon.

INTRODUCTION

Historical Data
The Middle East, being the cradle of three great religions: Judaism, Christianity and Islam, had always been the territory of numerous armed conflicts. Practically, the situation has not changed until today. The end of the Second World War raised hopes of stabilization in this turbulent region. However, successive Arab-Israeli conflicts had completely ruined the chance of peaceful coexistence between the two neighboring nations. Lebanon - a small country which has been entangled in hostilities since antiquity and which is a conglomeration of 17 different religions - is a strange phenomenon on the world’s map. In April 1975, a civil war between Muslim and Christian militant groups, with the involvement of Syria and Israel, broke out in Lebanon. Officially the war ended in 1991. Nevertheless, fight in southern parts of the county continued. On the 11th March 1978, Palestinian commandoes, who had their bases in southern Lebanon, attacked some Israeli people near Tel Aviv; 37 Israelis were killed and 76 wounded. This was the proximate cause of the Israeli invasion three days later. On March 14th 1978, Israel Defence Forces invaded Lebanon and captured the land to the south of the Litani River. In response to the invasion, the Lebanese government lodged a protest at the UN calling for an immediate ceasefire and the withdrawal of Israeli forces from Lebanon aiming at restoration of the Lebanese sovereignty in the territory occupied by Israeli forces. On March 19th 1978, the UN Security Council passed the Resolution 425 calling for strict respect for the territorial integrity, sovereignty and political independence of Lebanon, calling upon Israel immediately to with-