Imagine trying to reconstruct someone’s pulmonary vein in an austere Syrian operating theatre. Now imagine six men dressed in black and wielding AK-47s crashing in and interrogating you as to why you have your hand in their comrade’s chest. This was just one of David Nott’s brushes with the Islamic State of Iraq and Syria (ISIS), amongst the many other dangerous encounters that nearly cost him his head.

Volunteering for non-profit organisations like Médecins Sans Frontières and the Red Cross is a dream for some medical students when they consider where their skills may take them in the future. David Nott has realised this dream and made a career out of contributing to these organisations, whilst forging his own way of improving surgical outcomes in areas of terrible conflict; War Doctor is the compelling story of this work.¹

A consultant general and vascular surgeon at three London hospitals, Nott’s humanitarian career has spanned multiple missions, beginning with the Siege of Sarajevo and continuing to the Syrian Civil War, Gaza, and conflict zones in Sierra Leone and the Central African Republic, among many others. He has witnessed first-hand the devastating harm one human being can do to another, and opens a window to a completely different area of medicine than the ones we as students are familiar with in New Zealand.

War Doctor balances uplifting stories of camaraderie between Nott and local surgeons, with tales of professional conflict; the latter especially between Nott and other humanitarian doctors who work on an unsustainable fly-in, fly-out basis. Nott sets a grand example to medical students and doctors alike who are thinking about how best to serve the needs of people in dire or violent circumstances. While working in Libya, he was struck that so many people were dying from wounds that could be adequately treated if the staff were taught some basic surgical skills. Nott began offering lectures to local and humanitarian surgeons. At first no one attended, but after a while he was teaching packed lecture theatres and, on his return, Nott conceived the pioneering Surgical Training for Austere Environments (STAE) course.² Nott admits with humility that his courses have the potential to save many times more lives than his direct actions as a surgeon.

The courses are also a form of advocacy for the civilians and doctors of Syria and other war-torn countries, and Nott is proof that this and other actions can produce meaningful change. After a series of meetings, interviews, and rare telephone calls with President Bashar al-Assad, Nott was able to help secure a safe passage for children and doctors to leave East Aleppo before the government offensive wiped out all resistance to their deadly regime. Learning about this and other strong examples of leadership is one of the most important reasons for reading this book as a medical student.

Nott’s humanity and commitment to care for people affected by conflict is a blueprint for us to stay committed to our most vulnerable patients, no matter the specialty. He writes as a very skilled surgeon who is in demand everywhere, yet he chooses to go to where his skills are needed most. Nott even proposes that he is probably dispensable in London where many other equally skilled surgeons can do his job.

There is also a final twist. Nott led a lonely existence after his parents died. This changed when he finally emailed a woman, Elly, from a pre-mission charity dinner while his life was threatened in a city under attack. The chemistry was both instant and career-saving, as Nott developed post traumatic stress disorder after returning from a third mission to Aleppo, and Elly was able to help him recover. The David Nott Foundation they set up together offers scholarships to surgeons from war-torn countries to come to London where STAE courses are held. They are able to learn new skills and knowledge to take back to their war-torn countries, thereby continuing Nott’s work in the areas where it is needed most.

This book is important to read for all those interested in how to care for patients in dire need. This is relevant to both adventurous types and others because it is a manuscript written with universal themes of passion and humanity, that will help one care for those persecuted by ISIS or any other pathology.

References


About the author

William completed Year 5 of medicine in 2019 and is now a BMedSc(Hons) student in neuroscience at the School of Medicine, Faculty of Medical and Health Sciences, University of Auckland. He is an undergraduate student originally from the United Kingdom and enjoys fly fishing and skiing when opportunities arise.
Conflicts of Interest

William is the Auckland Academic Events Officer for NZMSJ. This article has gone through a double-blinded peer review process applied to all articles submitted to the NZMSJ. This author has no other conflict of interest.

Correspondence

William Cook: williamhcook@gmail.com