

MEDICAL NEWS

Volume 27, Number 6

www.militarymedical.com

June 2020

Post-Traumatic Stress Injury: Learning to cope

By Ralph DiPietro

I've been living with Post-Traumatic Stress Injury (PTSI) since I left Vietnam in 1967. I wasn't diagnosed with it until many years after I came home, but its roots date back to my combat.

Every American who has served his country in combat knows all too well the emotional wounds that the battlefield inflicts. But many who fought in Vietnam never heard of PTSI. We didn't have a name for it back then.

Merriam-Webster's Dictionary, Unabridged defines Post-Traumatic Stress Disorder (PTSD) as "a psychological reaction that occurs after a highly stressing event (as wartime combat, physical violence, or a natural disaster) and is usually characterized by depression, anxiety, flashbacks, recurrent nightmares, and avoidance of reminders of the event."

But I don't call it a "disorder." It's not the mind internally going awry. It's an externally inflicted wound to the soul. So I call it an injury.

I served as a U.S. Navy Hospital Corpsman-Field Medical Service Technician with Charlie Company, 1st Reconnaissance Battalion, 1st Marine Division in combat in 1967 in the Chu Lai area of South Vietnam. Wounded twice, I received a Purple Heart, a Gold Star (for the second wounding), and a Bronze Star with "V" for valor.

The U.S. Marines don't have medical technicians attached to their combat units. The Navy supplies corpsmen to do that job. So even though I was technically a sailor, my job was to go into combat with the Marines and attend to their wounds. The Marines called me "Doc."

I had no idea that the trauma I once faced and experienced in Vietnam could have such lingering effects on me so many years later. I was discharged from the Navy in 1967. Less than two months after my last patrol, I was sitting in the living room of my father's house, as though I had never left. There was no cooling off period, chitchat time, or program to help me readjust to the community after I left Vietnam. The Navy offered no training or treatment to help me deal with the trauma of the killing fields. I was left to confront the damage to my soul on my own. And no one warned me about what I was going to go through.

I was 19 years old when I stepped off the C-130 transport plane in Chu Lai, South Vietnam in 1966. My life changed the day when I was assigned to 1st Reconnaissance Battalion as one of their medics. I was new, but I realized that the medical training the

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(Photo by Spc. Ryan Lucas, 173rd Airborne Brigade)

A U.S. Army medic paratrooper assigned to the 173rd Airborne Brigade participates in an Army Combat Fitness Test during a Best Medic Competition on Caserma Del Din, Italy, June 4-5, 2020. The 173rd Airborne Brigade is the U.S. Army's Contingency Response Force in Europe, providing rapidly deployable forces to the United States Europe, Africa and Central Command areas of responsibility. Forward deployed across Italy and Germany, the brigade routinely trains alongside NATO allies and partners to build partnerships and strengthen the alliance.

173rd Airborne Brigade searches for best medic among their ranks

By Spc. Ryan Lucas
173rd Airborne Brigade

Vicenza, ITALY — 12 U.S. Army medic paratroopers assigned to various battalions within the 173rd Airborne Brigade participated in a brigade level Best Medic Competition over the course of two days on Caserma Ederle and Del Din, Vicenza, Italy, June 5, 2020.

The competition, which has been facilitated by the 173rd Brigade Support Battalion, is designed to build and maintain proficiency in tactical combat casualty care and related medic skill sets. The competition allows the brigade to select two primary and two

alternate two-medic teams to represent the brigade at the Army Best Medic Competition taking place later this year.

"This is a competition where the medics from the 173rd Airborne Brigade, who have the Expert Field Medical Badge or the Combat Medical Badge, can compete for a chance to go to Fort Sam Houston, Texas to compete in the overall Army Best Medic Competition," said Capt. Raymond Miller, a medical operations officer assigned to the 173rd BSB.

The 173rd Airborne Brigade is the U.S. Army's Contingency Response Force in Europe, providing

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• **PTSI** (Continued from front page)

Navy put me through was about to be put to the test..

After making my first patrol, I appreciated what those who had been there a while had to say. But my new platoon knew nothing about me. They had no idea how I would react under fire. I wanted them to know that they could count on me. I worried about their expectations of me, but only time would tell.

Before it was over, I lived through multiple combat patrols and two helicopter crashes. My memories will never fade. My last patrol involved an ambush. I was wounded, and two of my friends were killed. As I was being evacuated, I looked out the helicopter window and saw the blades strike a tree. Chunks of rotor blade broke off and shot out everywhere. The helicopter seemed to just hang mid-air for a brief second then tumble to the ground. The only thought I had was, "I'm going to die." I hung on to anything I could to keep from getting tossed about and crushed under tons of metal as we hit the ground.

Dazed, I heard the whirring of the massive engine as fuel leaked everywhere. I struggled to get out. The shrillness of the engine was deafening. Out of the corner of my eye, I caught movement. The helicopter crew chief was screaming at me to free him from the rubble that had him pinned. I grabbed him, but I couldn't move him. He continued to yell at me. Then the whirring stopped, and the engine died. We both survived.

The night before our patrols, we would all gather for a briefing by the unit's commanding officer. It was mainly held for the Marines, but I would sit in and listen attentively. He would tell us where we were headed and what we might expect once our boots were on the ground. There was a seriousness concerning the next day's patrol. I would be anxious and wonder what we might be getting into. I always kept an eye on the weather. It determined if we would get evacuated at our scheduled time. I never wanted to spend any more nights than I had to in the bush.

Vietnam was unbearably hot in the summer and miserably wet during the monsoons. No one back home would have ever believed that in a tropical climate we could experience such extremes in weather. The summer temperatures would soar to triple digits. Then, during the monsoon season, it would rain for days at a time, so that when we went on patrol we would be constantly wet. At night, the rain would be so intense we couldn't keep warm or dry. During watch, we would sit back to back trying to generate body heat to keep warm.

Would I make it home? On patrols, there were just too many variables to contend with—weather, helicop-

ters, ambushes, artillery, bombs being dropped, accidents from friendly fire, capture . . .

And there was always the threat of heat exhaustion. I carried a ruck sack full of needed supplies. It weighed 80 to 100 pounds depending on where we might be headed or the time of year. I always carried 8 to 10 canteens of water, enough rations to last at least a week, a change of clothes, about 300 rounds of ammo, twelve fully loaded clips, poncho, six grenades, my M-14 rifle, a 45 calibre pistol, and my medical bag containing first-aid supplies. Sometimes I lugged a 100-round bandolier for the M-60 gunner.

All this gear was very heavy but necessary. Try jumping out of a helicopter carrying that weight on your back, praying that you don't experience heat exhaustion and have to be medevaced by helicopter, compromising the patrol.

I was young and impressionable, and I believed what my superiors told me. If they said they had my back, I believed them. But there was nothing ever said about helping me when I returned home.

After a few months in the bush, my confidence began to develop cracks. The laughing and joking ended. This was for keeps. You could very well be alive one day and lying in a casket the next with an American flag draped over it.

Gruesome images of death during combat are burned into my soul. I watched friends cut down in the prime of their lives. They died grisly deaths. These images will never fade.

When I finally got to leave Vietnam and return home, I thought I had support of Americans, that I would be hailed as a returning hero. It didn't happen.

One day, I was reading the local newspaper, and there appeared an article in the "Letter to the Editor" section. The page jumped out at me. Someone had written a letter about me, criticizing my service and labeling me a baby killer. The writer didn't mention that I had risked my life so that he could have the right to express his opinion. To him and others like him, Vietnam was somewhere we didn't need to be. In short, my service to my country made me a murderer.

Fifty years later, memories of combat still occupy space in my head. The helicopter crashes, the ambushes have never left me. I attempt to release myself from them but can't.

At night, I see shadows of dead Americans and Viet Cong. The Viet Cong were so young. They looked like children, younger than my friends who died. What kind of principles were they fighting for? Why were they there?

I recall a flight I took from New York City to Charlotte, North Carolina

some years ago. It was a night that North Carolina and the surrounding states experienced heavy storms and tornadoes. We flew right into the turbulence, and I was a wreck. The plane hit air pockets that caused it to rise and fall like a spinning top. I looked around the cabin. I was the only one that seemed alarmed. I went from empty window seat to empty window seat looking for a break in the clouds so that I could reassure myself that there was ground below.

The person I was flying with snickered and kept telling me to calm down, but I didn't hear a word she said. I was sure we were going to crash. Only when I heard the landing gear unlock did I begin to settle down. I didn't think any part of it was funny.

When I returned from Vietnam in 1967, it had been more than a year since I had been able to lie down in a bed. I was concerned for the friends I left behind who were still chasing demons in the rice paddies. I wondered, as I lay in my comfortable bed, what were they doing? Did they need me? I thought about Sergeant Rosas and PFC Liggett, killed by my side. As I dozed off, I could hear their voices. I opened my eyes and saw nothing. I listened again and could hear Liggett's voice calling me for help—"Doc, where are you?"

For years after my tour ended, the only thing that seemed to relieve my depression and help me forget was the drugs I did. They made me euphoric. They gave me comfort. I fooled my friends and family into thinking I was all right when in reality I was torn up inside, hiding behind a mask, not coming to grips with my sickness.

Today, I keep hoping that the memories of Vietnam will one day end, and the burning fire I can't extinguish will finally be quenched. I still cringe at sudden loud noises like a car backfiring or sharp sounds from behind me. I still have nightmares and panic attacks.

I am a work in progress. I'm still hurting, unable to suppress the past, but I know I can only deal with these problems by confronting them head on, bringing them into my conscious mind. Every day is a new beginning, as I try to move forward and let the endless tide wash over me.

Every American combat veteran has a mountain to climb. We have an obligation to help one another. Coming together acts as a catharsis for our injury. Maybe one day there will be a genuine treatment that we may all benefit from.

Until then, we have to help each other.

Ralph DiPietro, a Navy Hospital Corpsman who saw combat in 1967 in the Chu Lai area of South Vietnam in 1967, received a Purple Heart, a Gold Star (for the second wounding), and a Bronze Star with "V" for valor.

Military Medical News

P.O. Box A3434
Chicago, IL 60690
Phone: 312-368-4884
Fax: 312-425-0203

To reach us:

advertising@militarymedical.com

Peter R. Bourjaily, Publisher

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Account Manager

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Camp Zama medical translator pays it forward, assists English-speaking patients in Japan

By Noriko Kudo
US Army Garrison - Japan

CAMP ZAMA, Japan – It is Yuko Sano's job to help people throughout one of the most vulnerable and uncertain situations they may ever experience, and she could not be more proud of that fact.

Sano has worked for the last 14 years as a medical translator at Camp Zama's BG Crawford F. Sams U.S. Army Health Clinic Japan, assisting English-speaking patients who must be transported to Japanese clinics and hospitals for treatment.

"I feel joy and fulfillment knowing my language skills and nursing knowledge helps Camp Zama patients who may feel at a loss in an overseas hospital," Sano said. "I'm happy to be able to help ease their anxiety and stress, and to provide any support they may need."

Sano is one of six translators assigned to U.S. Army Medical Department Activity – Japan, and one of two on the team with a nursing license. The team is on call 24 hours a day to assist with medical emergencies of any kind—a function that has been especially essential throughout the COVID-19 pandemic.

Sano's job entails more than just acting as translator between her patients and local medical staff. She and her team also help them prepare medical referral letters, schedule their appointments, and escort them to clinics and hospitals.

"I feel rewarded each time I am able to help patients and moreover, to be a part of the process of their health improving or when their treatment has a good outcome," Sano said.

Being a translator for medical patients can sometimes be taxing for her, both mentally and physically, Sano said, especially when she has to convey bad news to patients or their families, including deaths, serious accidents and injuries, or complex illness diagnoses.

Sano tries to remain as neutral as possible in her work, but said she sometimes cannot help but become emotional because she truly cares about her patients.

David Ames, formerly assigned to Camp Zama, remembered being very nervous and unsure what to expect during his multiple stays at a Japanese hospital for treatment from 2010 through 2018.

Ames said Sano, who was his translator, could sense his nervousness but noted that she remained calm and patient, and kindly walked him through the entire process and answered every question he had. "She really cared," Ames said. "She was always very attentive to all of her patients' needs."

Sano sometimes helped several patients in the same day, Ames said, and he was amazed to see how professionally, calmly and friendly she handled



(Photo By Noriko Kudo)

Yuko Sano, who has worked for the last 14 years as a medical translator at Camp Zama's BG Crawford F. Sams U.S. Army Health Clinic Japan, poses for a photo there May 21. As part of her job, Sano assists English-speaking patients who must be transported to Japanese clinics and hospitals for treatment.

each one of them.

"Translators can easily go unnoticed," Ames said. "They are truly the quiet professional. I personally could not have [gotten through my hospital stay] without her."

Kendell Clark, formerly assigned to Camp Zama, was also nervous and uncomfortable when first arriving at a Japanese hospital in 2016, but said that changed when he first saw Sano arrive "with a big smile on her face."

"I knew then that I would be in the best of care," said Clark.

Clark said Sano was a big help, not only with her translation assistance, but also for taking detailed medical notes and for making herself available to help him any time he needed.

"Medical translators like her are truly lifesavers," Clark said.

Sano said she attributes her compassion and desire to help others to her own experiences in the past—one of which was when she attended college in Utah for two years after graduating high school in Japan.

Sano said she clearly remembers dealing with cultural differences every day and feeling stressed due to her limited English skills, which made even the act of taking a bus a challenging ordeal.

Fortunately for her, there were strangers who recognized she was having a hard time and would often approach her and ask if she needed help.

"I was truly grateful every time I received help from random people because that greatly eased my anxiety being in a completely foreign culture," Sano said. "It made my experience in the States memorable."

Sano's experiences there were so memorable, in fact, that she made a commitment from that day forward to offer assistance any time she saw foreigners struggling in her country.

After Sano returned to Japan, her grandmother became ill and her family began taking care of her at their home. It was a difficult experience for Sano, who said she felt unable to do anything for her grandmother but watch her suffer in pain.

"I felt completely powerless," Sano said. "I really wanted to be able to help her."

Sano eventually decided to quit her job and enroll in a three-year nursing school program, devoting "all [her] energy, time and passion to pursuing that goal."

After earning her nursing certification and working at a hospital for a time, Sano said her desire to help foreigners

in Japan was still stuck in the back of her mind. A few years later, she was hired for what she calls her "dream job" as a translator for MEDDAC-J.

"I truly feel I have discovered my true profession," Sano said. "The Army gives me the opportunity to pay it forward every day."

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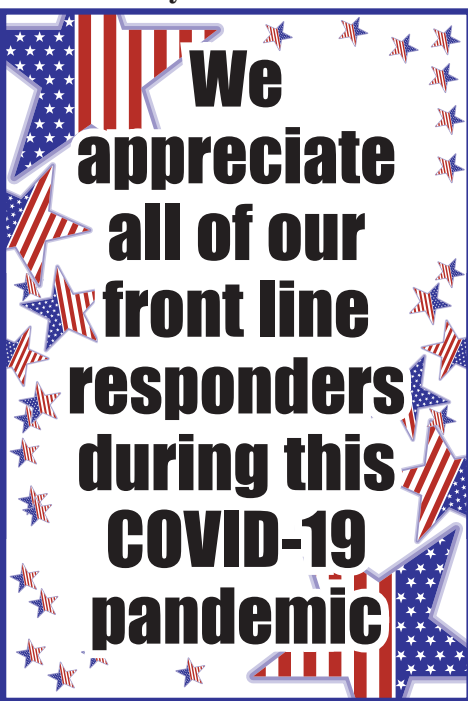
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• **Best medic** (Continued from front page)

rapidly deployable forces to the United States Europe, Africa and Central Command areas of responsibility. Forward deployed across Italy and Germany, the brigade routinely trains alongside NATO allies and partners to build partnerships and strengthen the alliance.

"We've been assessed with a number of physical events such as the Army Combat Fitness Test, the Army Physical Fitness Test, litter carries, and tactical sled drags, as well as more soldier oriented tasks like clearing rooms. On top of that, of course, we were assessed on medical tasks and medical lanes," said Spc. Brooks Carroll, a combat medic specialist in the 173rd BSB.

The medical tasks that the paratroopers have been tested on consist of "treating casualties with an emphasis on prolonged field care and mass casualty situations," said Miller.

"The role of the medic is very broad," said Carroll. "It goes from working in clinics, to providing assistance to [medical] providers, to battlefield trauma." Because of this, he said, the "competition has put a strong emphasis on being able to perform at a high level, to have good medical interventions while being physically exhausted."

"Out of the two day competition there's a lot of rigorous tasks that they have to complete," said Miller. "On the second day, towards the end, they have to do an unknown distance ruck march while also conducting prolonged field care on a notional casualty."

While the two day competition is physically and mentally demanding, Miller does not believe that a single medic

paratrooper will drop out.

"I think the medics in the 173rd are by far some of the best medics that I've seen in the Army. I think whoever we send as our first team to compete in the Army Best Medic Competition has a great chance of taking home first place," said Miller.



(Photo by Spc. Ryan Lucas, 173rd Airborne Brigade)
A U.S. Army medic paratrooper assigned to the 173rd Airborne Brigade tends to a notional casualty during a Best Medic Competition on Caserma Del Din, Italy, June 4-5, 2020.

