

# Out of Hours

## The teacher

Thursday 8 May 2014. Just another day at the mobile clinic heading to one of the Syrian refugee camps in the Bekaa valley of Lebanon. It was a sunny day in Beirut, where our 2-hour journey started. On the road, a group of three nurses, a medical student, a family medicine resident, and the driver. We discussed the day ahead, distributing the tasks among ourselves while listening to relaxing traditional folk music on the radio.

Approaching Bekaa, the weather got colder and dark clouds blocked the sunshine. A short detour from the paved road took us through one narrow muddy alley. The camp was to our left. We parked our mobile clinic right outside the crowded tents and loud children playing outside on their recess break at school. There was only one swing and a slide and nothing else to play with but stones. We carried the scale, Snellen chart, sterile gels, gloves, masks, stethoscopes, and papers across the bridge over the muddy river cluttered with rubbish bags. The children stopped to look at us: the strangers stepping into their camp with gadgets.

### THE FIRST PATIENT

We set up the clinic in one of the only two rooms in that camp that are not in tents. My colleague who went to that camp on Tuesdays had asked me to see their English teacher before all the children poured into the clinic: I asked for him first. He was brought by a group of his friends, three other men in their twenties. *'Doctor, he has not been sleeping at all for the past 2 years. He has not been eating either. He rarely talks to anyone.'* He was a slim young man of tanned complexion and his heavy brown eyes spoke of pain and disappointment. I took him into the examination room and sat in front of him waiting for him to tell me his story. Kidnapped by armed troops, he was thrown into an underground pit the size of the small examination room, a 3x4 metre room with 60 other people. *'I was electrocuted... beaten up with bladed sticks*



*... I was electrocuted...'* Looking at his face, I could see that he lost eye contact and his eyes were fixed at an area on the floor, a blank area of cold cement. He was back into that dark pit reliving the torture experience. He was describing what had happened as if he was seeing it happening right now to someone he does not know anymore; a stranger or an actor in a movie. I kept looking into his eyes checking for a tear there somewhere, at his facial expressions, searching for a frown of anger, a grimace of disgust, a tinge of fear, or the drooping of sorrow. All that I saw was the blank face of a person whose lips seemed to be moving right then and there when his body and mind were not with us at all.

We closed the only door to the room. The two nurses and the medical student having heard how this story started were all silent. It did not matter that we had a huge group of children waiting outside our door to be examined in the remaining 2 hours we had at that camp. It did not matter that it was raining hard at that camp and most of them were barefooted and wet. It really did not matter because at that moment, they were all alive and safe from torture, at least one kind of it. He continued his story for a few more minutes. He was still not back with us yet and I was beginning to see the spot he was fixating on, the actual scene of what was happening. I felt the suffocating air of that underground pit with 60 other people, the stench of the wounds, the smell of fear,

### ADDRESS FOR CORRESPONDENCE

#### Khairat Al-Habbal

American University of Beirut Medical Center,  
Department of Family Medicine, Beirut, Lebanon.  
E-mail: ka40@aub.edu.lb

of impending doom ... and I was about to weep, so I had to interrupt.

### A PHYSICIAN'S ROLE

I did not ask who kidnapped him the first time nor the second time. I did not ask if he had any family, if they were tortured as well, if they know that he had survived. I asked about his sleep instead, whether he was reliving the experience frequently, his anxiety levels, the medications he was or still is on, his cigarette consumption. I told him about PTSD and the treatment for it and I took his number for follow-up purposes. I really wanted to let him get the whole story out, but that transfer of pain that was draining my emotions made it unbearable. His experience got me thinking whether I should really believe in the innate goodness of mankind any longer. It got me thinking that as physicians, our role should be to advocate for those who are still in that dark pit; those voices that are going unheard; the individuals whose names will never be remembered; those who are dying in the silence of fear, of pain, for no valid reason at all.

How can we doctors do that?

\*\*\*\*\*

According to the UNHCR 2015 statistics, there are presently 1.3 million Syrian refugees in Lebanon.<sup>1</sup> Lebanon is a small country, about the size of Wales or Brittany with a population of about 4 million. The impact of the present turmoil on the Lebanese healthcare system is inconceivable.

#### Khairat Al-Habbal,

Resident in Family Medicine, American University of Beirut Medical Center, Department of Family Medicine, Beirut, Lebanon and Thursday Mobile Clinic Team Leader.

DOI: 10.3399/bjgp15X685729

### REFERENCE

1. UNHCR. The UN refugee agency. *Lebanon. 2015 UNHCR country operations profile – Lebanon*. <http://www.unhcr.org/pages/49e486676.html> (accessed 21 May 2015).

*"It got me thinking that as physicians, our role should be to advocate for those who are still in that dark pit ..."*