



# Protecting our right to deliver surgical care: reflections from Gaza

I Marks<sup>1</sup>, O Alser<sup>2</sup>, N Sheneman<sup>3</sup>, N Roy<sup>4</sup>

**Correspondence:** Isobel Marks, Alder Hey Children's Hospital, Liverpool, UK. Email: [isobel.h.marks@gmail.com](mailto:isobel.h.marks@gmail.com)

1. Alder Hey Children's Hospital, Liverpool, UK

2. Department of Surgery, Texas Tech University Health Sciences Centre, Lubbock, Texas, USA

3. Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care (G4 Alliance), Chicago, USA

4. The George Institute of Global Health, New Delhi, India

**Cite as:** I Marks, O Alser, N Sheneman, N Roy. Protecting our right to deliver surgical care: reflections from Gaza. *Impact Surgery*. 2024;1(3):75-76. Doi: <https://doi.org/10.62463/surgery.73>

The recent escalation in the military occupation of Palestine by Israel has far-reaching consequences for surgical care in Gaza and beyond.(1) Whilst the surgical workforce in Gaza are highly resilient to war conditions, having delivered quality surgical care throughout many previous emergencies, the scale of destruction to both the health infrastructure and health workforce is unprecedented in the region, and will take many years to rebuild.

Before October 2023, Gaza had a functioning surgical system, but one which was heavily impacted by the military blockade of the last 17 years.(2) Denial or delay of permits for patients to travel outside of Gaza to seek further care has led to significant increases in mortality(3), whilst denial of entry of medical equipment, medications, radiotherapy and chemotherapy agents also delayed access to emergency and essential treatment. Studies examining the surgical capacity of Gaza systematically have noted deficiencies across all domains but particularly in lack of postgraduate training opportunities.(4)

Surgical teams in Gaza had systems in place to cope with mass-casualty conditions.(7) However, with continuing escalations of hostilities, new and terrible risks have emerged, which are set to worsen throughout the year. (8) Surgeons have been killed, and others abducted for prolonged periods, returning with signs of torture.(9) The lack of journalists on the ground has put pressure on medical staff, as trusted professionals with access to the wounded, to report to international news agencies, providing live interviews and verifying casualty figures. (10) Some will be required to give testimony and evidence to the international court. Surgeons are often separated from their families and are dealing with the loss of close family members and colleagues. Food and water scarcity affects their ability to provide medical care as well as increasing patient morbidity. The need to search for such essentials of life impedes their medical practice.

Surgical practice is crucial for trauma care, as well as ongoing emergent conditions, including maternal health. Reports from Gaza describe multiple instances of surgery being performed without anaesthetic, something that should never be required in the modern age.(11) Lack of adequate medical supplies has created extremely distressing situations: children requiring palliation or surgical intervention without pain relief. When doctors have the time to process these occurrences the psychological load will be extreme.

Whilst violence and war are ongoing fixtures of human society, in which surgery will always be required, we as an international community must resist the normalisation of targeting health workers and healthcare facilities. Calls for universal access to surgical care must include those in areas of conflict, crisis and disaster and we as the global surgical community must not leave them behind. From the bombing of hospitals with chemical weapons in Syria to the gutting of Al Shifa and Nasser Hospitals in Gaza, the situation for health workers in conflict is increasingly dangerous. Article 18 of Geneva Convention IV ought to enshrine the protection of health workers in internationally law. It is up to all of us to ensure that this is enforced by the international community, and that appropriate steps are taken to protect access to healthcare and the safety of health workers.

**Funding:** No funding was received for this work

**Acknowledgments:** This article does not represent the views of the funders or affiliated institutions



## References

1. Military occupation of Palestine by Israel. Cited 2024 Apr 17. Available from: <https://www.rulac.org/browse/conflicts/military-occupation-of-palestine-by-israel>
2. Farhat T, Ibrahim S, Abdul-Sater Z, Abu-Sittah G. Responding to the Humanitarian Crisis in Gaza: Damned if You do... Damned if You don't! *Ann Glob Health*. 2023;89(1):53.
3. Bouquet B, Barone-Adesi F, Lafi M, et al. Survival analysis for patients with cancer in Gaza applying for Israeli permits to exit the Gaza Strip for health care: a retrospective cohort study of patients from 2008 to 2017. *Lancet Lond Engl*. 2021 Jul;398 Suppl 1:S20.
4. Alser O, Alhabil M, Ayasa L, et al. Surgical Capacity Assessment and Leverage in the PalEstinian Land (SCALPEL-I) Study: The First Nationwide Plastic Surgery Capacity Evaluation in Palestine. *Plast Reconstr Surg – Glob Open*. 2023 Oct;11(10S):100.
5. Al-Moghrabi A, Abu Shaban N, Ghaith JS, Elsous A. Development of reconstructive surgery services in the Gaza Strip, Palestine. *Ann Burns Fire Disasters*. 2019 Mar 31;32(1):17–21.
6. Heszelein-Lossius HE, Al-Borno Y, Shaqqoura S, Skaik N, Giil LM, Gilbert M. Life after conflict-related amputation trauma: a clinical study from the Gaza Strip. *BMC Int Health Hum Rights*. 2018 Aug 31;18(1):34.
7. Enhancing the Emergency Preparedness and Response Capacity of Occupied Palestinian Territory: Focus on Gaza. Cited 2024 Apr 21. Available from: <https://www.who.int/about/accountability/results/who-results-report-2020-mtr/country-story/2022/enhancing-the-emergency-preparedness-and-response-capacity-of-occupied-palestinian-territory--focus-on-gaza>
8. Report projects excess deaths due to Gaza crisis. Cited 2024 Apr 21. Available from: <https://www.ishtm.ac.uk/newsevents/news/2024/report-projects-excess-deaths-due-gaza-crisis>
9. Masoud B, Mustafa IA. Gaza doctor describes ordeal of detention. Cited 2024 Apr 21; Available from: <https://www.reuters.com/world/middle-east/gaza-doctor-describes-ordeal-detention-2024-02-04/>
10. What video and eyewitness accounts tell us about Gazans killed around aid convoy. BBC News. Cited 2024 Apr 22; Available from: <https://www.bbc.com/news/world-middle-east-68445973>
11. Women in Gaza having c-sections without painkillers as girls use tent scraps for period products. Cited 2024 Apr 22. Available from: <https://news.sky.com/story/women-and-girls-in-gaza-using-scraps-of-tent-material-in-place-of-period-products-13053083>