THE REST OF YOUR LIFE

'Dr. Charlie' Goes to War

uring voluntary tours of duty as an Army medical officer for Operation Iraqi Freedom—Camp Spearhead, Shuaiba, Kuwait, in 2003 and Forward Operating Base Warrior, Kirkuk, Iraq, in 2005—Dr. Charles L. Garbarino kept family members and friends informed about his experiences by typing e-mails and scribbling other thoughts in a diary.

When he returned home from his second tour of duty, those same family members and friends encouraged him to write a book about his experiences as a pediatrician who cared for soldiers in the combat zone.

"People said to me, 'you have to write a book,' "said Dr. Garbarino, a colonel in the New Jersey National Guard who practices pediatrics in West Orange, N.J. "They'd say, 'Your e-mails were so touching and they brought out so many emotions. You made us realize what war really is; you have to tell your story.' I said, 'I'm a street kid from Brooklyn and you want me to write a book.'"

A friend introduced him to Marc S. Goldberg, a writer who helped him sift through those e-mails and diaries to assemble "Pediatrician Soldier: The Man the Kids Call 'Dr. Charlie' Goes to War" (Bloomington, Ind.: inuniverse.com, 2008).

Presented in essay form, the book includes Dr. Garbarino's candid thoughts about what it means to be deployed as a soldier; the pediatrician's role in caring for a soldier in a combat zone; postdeployment medical care; how posttraumatic stress disorder affects soldiers and their families; the impact of deployment on the family structure; and the role civilian pediatricians can play in caring for children of deployed soldiers.

A palpable theme throughout the book is the importance of bringing compassion to all aspects of medical care. In Iraq and in other theaters of combat in the Middle East, he explained, "what we have for the soldiers resembles a M*A*S*H unit. You're doing the best you can. But the thing is, there is a lot more hand holding and compassion when you're out in that battlefield or in that combat zone with the soldier. People here in the United States don't appreciate how much they have and how good the medical care is. Many people in Iraq get medical care from veterinarians."

During his 90-day assignment at Camp Spearhead, a soldier came to Dr. Garbarino complaining of chest pain. Every symptom suggested he was having a major heart attack.

"I was in a tent in the middle of nowhere, and I had to take him to a medical facility about 45 minutes away," recalled Dr. Garbarino, who was the first N.J. Army National Guard physician deployed for Operation Iraqi Freedom. "I was so afraid for him that I rode along with him in the ambulance. I said, 'We're going to have a long ride together. Let's talk.' He said, 'Can we pray?' I said, 'That would be fine.' I'm not one that goes to church regularly—I maybe go three to four times a year—but on the way we prayed and read the Bible, and he felt peace. I felt peace."

During an office visit with another soldier at Forward Operating Base Warrior, Dr. Garbarino addressed the man's chief complaint but noticed that his eyes were welling up with tears. "I told him, 'I'll be right back," Dr. Garbarino said. "I went into the next room, put on my Mickey Mouse shirt, put on my red clown nose that was given to me by Dr. Patch Adams, and I put on my twirly hat. Then I came back to the exam room and said, 'Hi. I'm your doctor.' And he just started to laugh. Then I held his hand and he cried. That, I think, is paramount. Physicians have to realize that just holding someone's hand is just as important as anything else."



"Physicians have to realize that just holding someone's hand is just as important as anything else," said Dr. Charles L. Garbarino, pictured in Kirkuk, Iraq.

A self-described no-nonsense kid from Brooklyn, Dr. Garbarino refuses to consider himself a hero for the service he provided on those two tours. "The real heroes are all the fallen soldiers and those who have come back emotionally, physically, or mentally traumatized," he emphasized. "Those are your heroes, as are all the people these soldiers left behind when they went to war. There is one hero in my family. It's not me; it's my wife, Lydia."

He went on to note that when soldiers return from deployment, "We all return changed. I had some PTSD when I returned. One day, I was sleeping and I woke up in a cold sweat, saying, 'I gotta get it! I gotta get it!' I finally realized I was home, and that what I was reaching for was my weapon. I've been okay, but so many soldiers are coming back with physical problems such as missing limbs, or they've been mentally traumatized. They hear somebody drop

a box and they duck."

All royalties from "Pediatrician Soldier" benefit Our Military Kids, an organization that provides support to children of deployed and severely injured National Guard and Military Reserve personnel (www.ourmilitarykids.org).

35

"Pediatrician Soldier" is available at www.amazon.com, www.barnesand noble.com, or www.iuniverse.com.

By Doug Brunk

E-MAIL US YOUR STORIES

The purpose of "The Rest of Your Life" is to celebrate the interests and passions of physicians outside of medicine. If you have an idea for this column or would like to tell your story, send an e-mail to d.brunk@elsevier.com.

POLICY & PRACTICE

Stimulus Benefits Child Programs

Vaccine programs, child day care, and Head Start all will benefit from the American Recovery and Reinvestment Act economic stimulus package, the Obama administration said. As part of the stimulus package, the federal government will use \$300 million to promote immunization, purchase vaccines, and distribute them through the Centers for Disease Control and Prevention's immunization program. In addition, states will receive \$2 billion from the stimulus package to pay for day care and expand facilities providing it. And the Head Start and Early Head Start programs will gain access to \$2.1 billion grants that could expand coverage to more than 70,000 children, infants, pregnant women, and their families. Head Start will receive a separate \$235 million increase in funding for 2009 through the stimulus package, the Obama administration said.

\$60 Million to Autism Research

The National Institutes of Health said it will commit roughly \$60 million in stimulus package funds to support autism research over the next 2 years.

Four grant programs collectively known as "Research to Address the Heterogeneity in Autism Spectrum Disorders" will fund research to develop and test diagnostic screening tools, assess risks from prenatal or early life exposures to potential toxins, conduct clinical trials, and adapt existing interventions to a maturing population of people with autism-spectrum disorders.

The topics follow the strategic plan that came from the federal Interagency Autism Coordinating Committee, NIH said.

AAP, AAFP Want Case Overturned

The American Academy of Pediatrics and the American Academy of Family Physicians have urged the U.S. Supreme

Court to overturn a Georgia high court decision that could allow parents of autistic children to sue vaccine manufacturers.

Last October, the Georgia Supreme Court ruled that the case, which involves an autistic child who stopped speaking after being vaccinated, could go to trial. However, other state and federal courts have held that the National Childhood Vaccine Injury Compensation Act of 1986 preempts such lawsuits, and the U.S. Supreme Court is considering whether to take the Georgia case

"If this [Georgia] decision is allowed to stand, it could lead to the very same crisis that Congress sought to prevent in passing the original legislation," said Stephan Lawton, an attorney for AAP, in a statement.

"There is a genuine threat to our nation's public health if manufacturers abandon or consider abandoning the production of vaccines. [A decision to

permit vaccine suits] would set our country back decades and have deadly consequences for our children."

House Passes Wakefield Act

The House has passed, 390-1, the Wakefield Act to reauthorize the Emergency Medical Services for Children program. The bill now goes to the Senate for consideration.

In the past 25 years, the program has funded state emergency services offices and supported projects that bolster children's emergency care. "It is no coincidence that since the EMSC program was established, death rates due to pediatric injury have dropped by an astounding 40%," AAP President David Tayloe said in a statement.

The legislation, named for a family whose child survived a catastrophic auto accident because of excellent emergency care, would reauthorize the program for 5 more years.

—Jane Anderson