practical animal medicine. Keywords: armed forces; clinic; diagnostics; dogs; examination; Germany, purchasing; training; veterinarians; Prehosp Disast Med 2003:18:s(1)s13. E-mail: bmvgfuesani4@bmvg.bund400.de

Retinal Detachment Following LASIK: Management and Outcome in an Army Hospital

Seyed Hamid Parhizgar, MD Bagheyatollah Medical Science University, Tehran, Iran

Objective: Eight patients with retinal detachment (RD) following LASIK surgery were operated on in an army hospital. Specific problems during their operations and their outcomes are described.

Method: The group included one patient with flap tear and PVR-A (PVR = proliferative vitreoretinopathy); two patients with flap tear and PVR-B; three patients with giant tear and PVR-C; and two with dialysis and PVR-C. Scleral buckling was performed on three patients, while others underwent vitrectomies. Six patients required one operation apiece, and two others were operated on more than once.

Results: After the retinal detachment (RD) operation, visual acuity (VA) was better than 20/50 in 50%, but others did not achieve equally good results, or lost visual acuity.

Conclusion: Surgical treatments of RD following LASIK are especially difficult for surgeons. However, in about half of the cases, good VA will be restored, while the other half will lose a significant part of their vision.

Keywords: retinal detachment; LASIK; scleral buckling; surgery; visual acuity; vitrectomy

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International Civil-Military Cooperation as Responding to Public Health Emergencies Associated with Weapons of Mass Destruction

The Sigonella Protocol: Results of a 1999 Meeting to Plan the Medical Response to the Release of Biological Weapons

CDR Christopher D. Clagett, MC, USN, MD, MPH, PT Head, Threat Assessment Department, United States Department of Defense

The U.S. Department of Defense, realizing that preparedness in the United States for a Biological Warfare/Biological Terrorism [BW/BT] attack was insufficient, began to develop protocols on U.S. installations for dealing with a BW/BT event. Since 1999, additional rounds of planning have occurred on many bases, including Sigonella, Italy, sponsored by the U.S. Soldier Biological Chemical Command. The most important overarching issue is that U.S. forces potentially must deal with coordination with host nation governments should U.S. forces overseas be involved in a BW/BT event. Consideration must be given to the fact that other nations may have slightly different priorities and concerns than do the U.S. military commanders. When dealing with the event itself, the first objective is to minimize the impact on the military and civilian populations. Epidemiological methods will be critical in identifying the presence of a deliberate attack, defining the scope of the incident, and tracking progress of the incident. Coordination between medical assets and security forces is essential to minimize any spread by agents capable of causing secondary cases.

Two major medico-legal issues are isolation and quarantine. Governments must have a plan in place to balance the needs to protect the uninfected public and treat suspected cases with compassion and courtesy. Decontamination procedures in a BW/BT event usually will not be as prominent a part of the picture as in chemical events. Finally, authorities must have a coordinated risk communication plan. This will reassure the public when warranted, counter rumors and misinformation, and dispel perceptions of government secretiveness.

Keywords: attack; biological warfare/tiological terrorism [BW/BT]; civilian; command; epidemiology; medico-legal issues; methods; military; plan; reassuranced *Prehosp Disast Med* 2003:18:s(1)s13. Email: cclagett@nepmu7.sicily.navy.mil

"Alert Not Alarmed" - The UK Perspective

Brian Butler Director of Counter-Terrorism Communications, UK Government Information and Communication Service

Public safety and confidence depends on timely, clear, and coherent information to the public by trusted and consistent sources. The UK public would deserve and demand official advice and information quickly and appropriately targeted.

Who talks to the public?

The UK Government Civil Contingencies arrangements that cover both deliberate and accidental disruption, place control and command responsibilities at a local level — usually in the hands of the police. Government support, advice, and co-ordination is managed centrally by officials, and, where necessary, by Government Ministers (politicians).

The system for managing emergencies places the main responsibility in the hands of the appropriate Government Deportment — known as the "lead" department — for terrorist incidents. This is the Home Office (Ministry of the Interior, but other Departments' officials and Ministers would have key roles in informing and warning the public — for example, health, transport, education.

The UK arrangements also allow far the police or other authorities to ask for military assistance —"Military Aid to the Civil Power"— but, the military does not have a specific role in giving out public information, although they may assist the police in evacuating areas, helping to maintain cordons, but it does not play a role in maintaining or restoring public order. Recent emergencies in the UK notably, inland flooding, the foot and mouth disease outbreak, and the 2002–2003 fire dispute — have involved the

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