

X T H O R

Preparation for World-Wide Conflict





Jeremy W. Cannon, MD, SM, FACS
Trauma, Surgical Critical Care & Emergency Surgery
Perelman School of Medicine at the University of Pennsylvania
7 October 2024



Disclosure



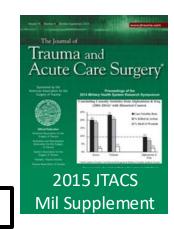


- COL Jennifer Gurney, MD, FACS
 - JTS Director -- > Tireless CCC Advocate

The vital civilian-military link in combat casualty care research: Impact of attendance at scientific conferences

Leopoldo C. Cancio, MD, Todd E. Rasmussen, MD, Jeremy W. Cannon, MD, and Michael A. Dubick, PhD, San Antonio, Texas

J Trauma Acute Care Surg. 2015 Oct;79(4 Suppl 2):S221-6.



- Col (Ret) Jeremy Cannon, MD, FACS
 - Practicing Trauma Surgeon (I like to cut!)
 - Public Policy Fellow (Hoover)
 - Father of a Navy OC -- > Intel Officer











Bottom Line Up Front

- The US is <u>NOT Prepared</u> for LSCO --> National Threat
 - (Inexperienced, understaffed, demoralized -- > competing priorities)
 - JTS, CCCC --> "Orphan" Status, Needs Maneuver Space
- Mitigation Strategies Needed <u>NOW</u>
 - Quantify and Understand the Threat
 - 1K casualties x 100++ Days
 - Changing Face of Warfare
 - Define the Needed Response: Open Discussion
 - Org Partners: ASPR, BARDA, NASEM, USU (Woodson, Elster)
 - Civilian Partners: Denver, Pitt, UPenn, Many Others
 - Society Partners: ACS, SVS, <u>THOR</u>
 - International Partners: Norway, Israel, Ukraine, ALL ALLIES



NOT PREPARED FOR LSCO

In war, you win or lose, live or die, and the difference is just an eyelash.

General Douglas MacArthur



Edward D. Churchell

"Surgeons in a current war <u>never begin where the</u> <u>surgeons in the previous war left off</u> – they always go through another long learning period. In every new war ... soldiers <u>lose their lives and limbs</u> because the doctor was ignorant of past experience."

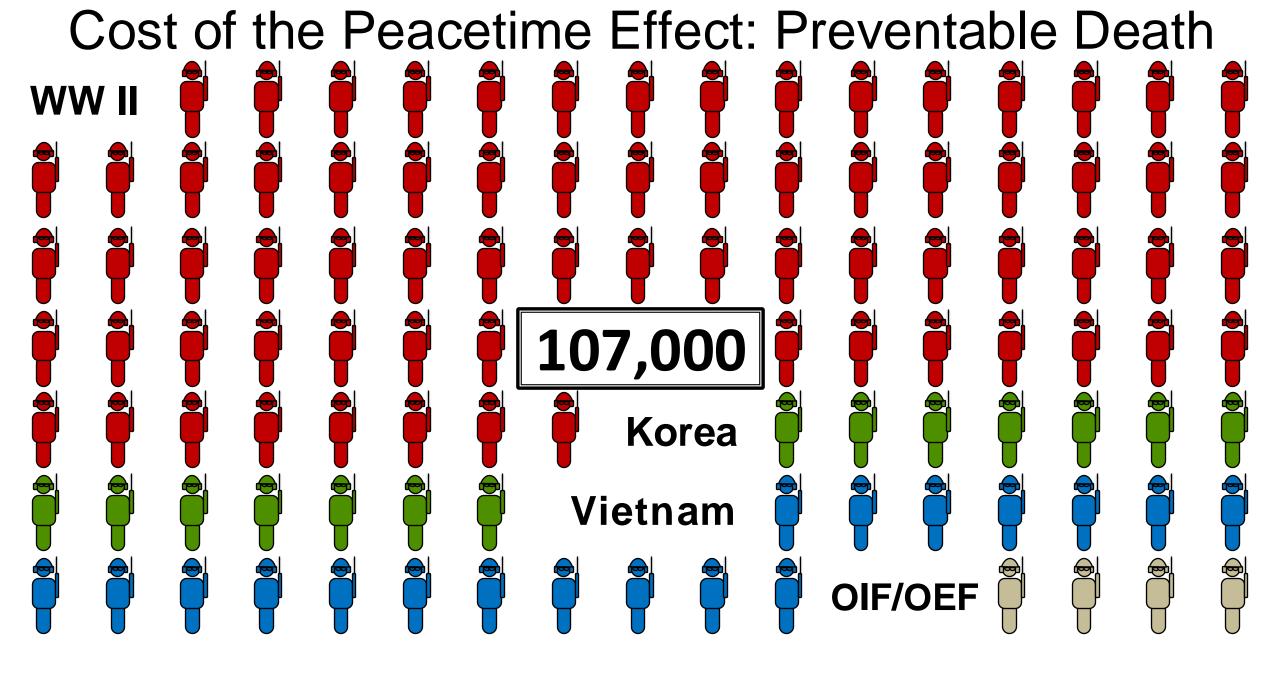
- COL Edward D. Churchill, MD



We are going to <u>repeat the same mistakes</u> we have made before. We are going to <u>think our doctors are</u> <u>trained</u>. They are not going to be trained. You have just got to <u>pray your son or daughter</u>...is not the first casualty of the next war.

Walker Dip -- > "Peacetime Effect"

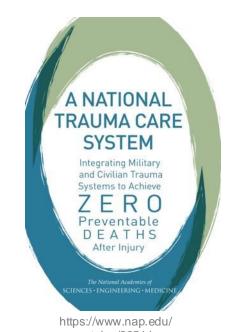


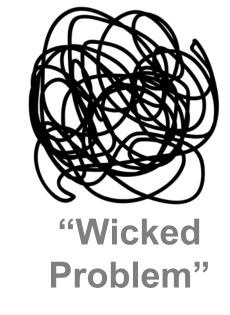


¹Cannon JW, et al. J Trauma Acute Care Surg. 2020; 89(2S Suppl 2):S8-S15.

Causes of the Peacetime Effect

- Patient-Level Factors
 - Catastrophic injuries
- Physician-Level Factors
 - Young surgeons (36 yrs old, 2 yrs post-boards)
 - Unfamiliar w/extreme trauma care (chest, vasc...)
- Team-Level Factors
 - Variable (low) experience levels
 - No prior experience together
- Systems-Level Factors
 - Funding cuts between conflicts
 - CONUS/Forward mission disconnect
 - Split teams, limited specialists
 - Prolonged pre-hospital care





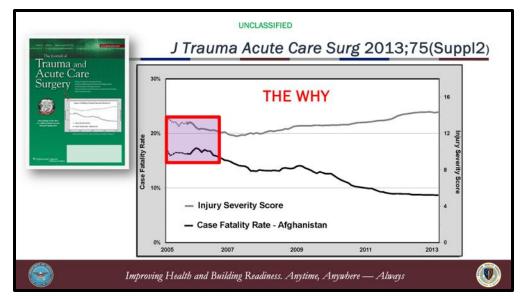
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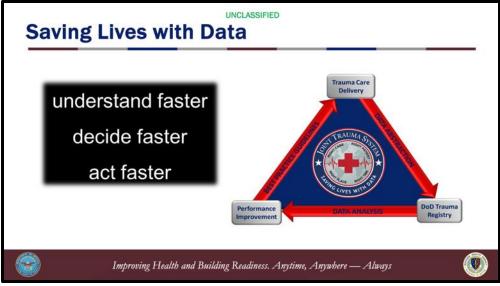
CONUS **In-Garrison Care** High-Volume Civilian **Trauma** Center



Current State: Uncomfortable Message

- Positive
 - JTS exists in policy
 - TCCC Training (unit/organic)
- JTS Move -- > Limited External Engagement, Maneuver Space
- Combat Casualty Care -- > Orphan Status
- CCC Mission Incapable



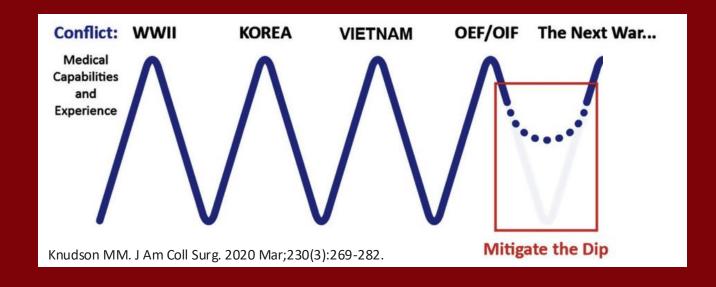




When three people are responsible for feeding the dog, the dog starves.

Major Vines as quoted by General McChrystal, *Team of Teams*

Mitigation Strategies





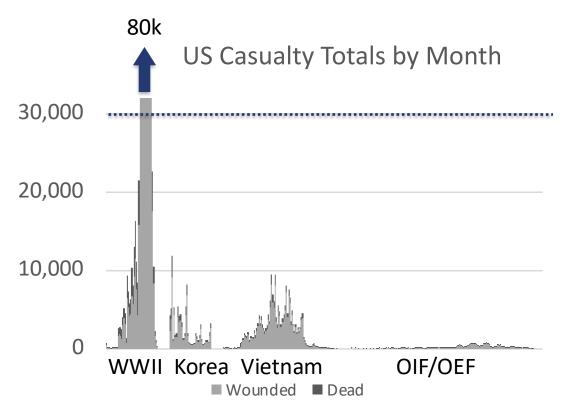
Quantify the Threat

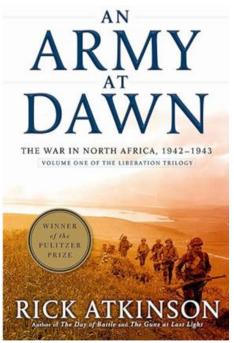
History, the Torch That Illuminates: Lessons from Military Medicine

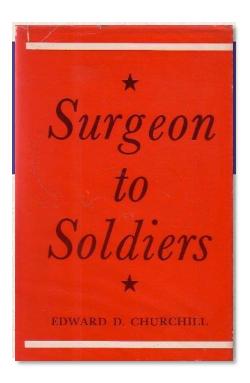
COL Michael E. DeBakey, USAR

MILITARY MEDICINE, 161, 12:711, 1996

NDMS Pilot: 1K/day x 100++ days == 30k/mo x ...







Cannon JW, et al. J Trauma Acute Care Surg. 2020; 89(2S Suppl 2):S8-S15.



Understand the Threat

- Thermobaric Weapons
- Medical Units Targeted
 - Triple "Advantage"
 - Degrade Force, <u>Eliminate Force Multipliers</u>, <u>Demoralize Units</u>
- Drone Warfare

America Isn't Ready for the Wars of the Future
And They're Already Here

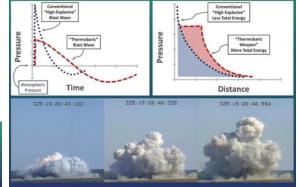
By Mark A. Milley and Eric Schmidt September/October 2024

Published on August 5, 2024

FOREIGN AFFAIRS



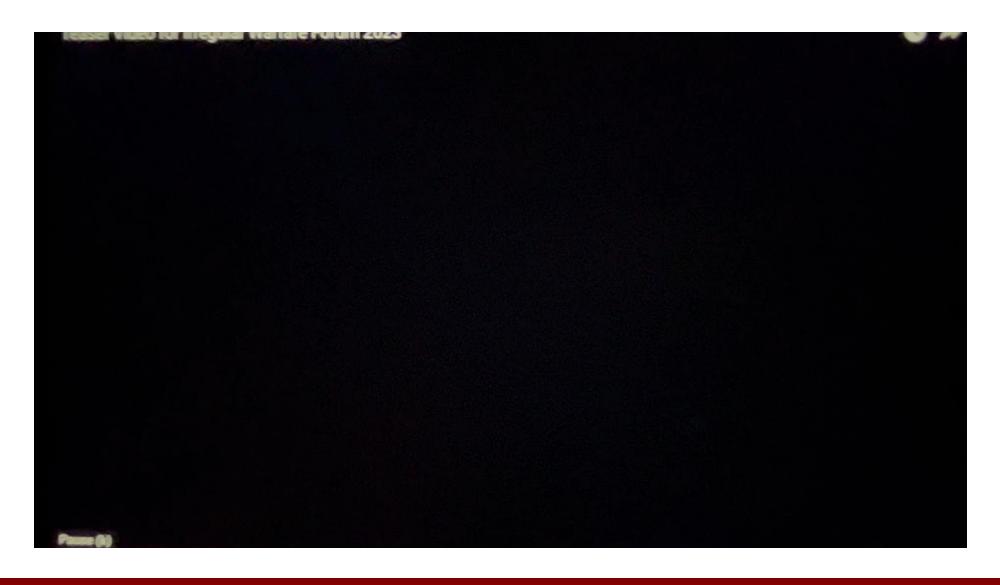
J Trauma Acute Care Surg 2023 Military Supplement







World-Wide War in 2024 == Irregular Warfare





Laser Focus on Combat Casualty Care

....it's why the MHS exists





Define the Response (Open Discussion): Strategic Medical & Disaster Readiness Coalition







INSERT LOGO HERE







Clinical Experience

Experience saves lives.

COL Jennifer Gurney, MD, FACS

Clinical: Trauma/Systems Experts

πολύ τε διαφέρειν οὐ δεῖ νομίζειν ἄνθρωπον ἀνθρώπου, κράτιστον δὲ εἶναι ὅστις ἐν τοῖς άναγκαιοτάτοις παιδεύεται.2

Archidamus II to Spartans: What sets you apart is the intensity of your training.







CDR Derek Foerschler Department Head Anesthesiologist



CDR Jay Yelon Trauma Surgeon



LCDR Mary Decoteau General Surgeon *Feb 2022



CDR Robert Oldt Emergency Medicine Physician



LT Natasha McClinton Perioperative Nurse



LT Demerce Young Critical Care Nurse

LCDR Zachary

Hare

Physician

Assistant



Kyoung Na Emergency Trauma Nurse





HM2 Brett Adkins Search and Rescue Medical Technician





HM2 Navy Nguyen Surgical Technician







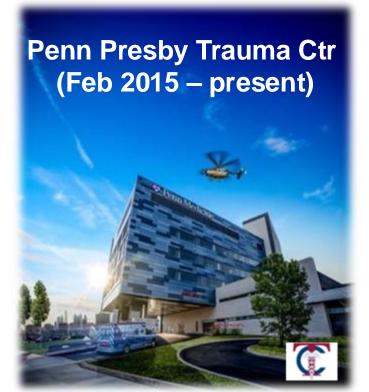


LCDR Bill Lawson Healthcare Administrator





Pryor Trauma Bay



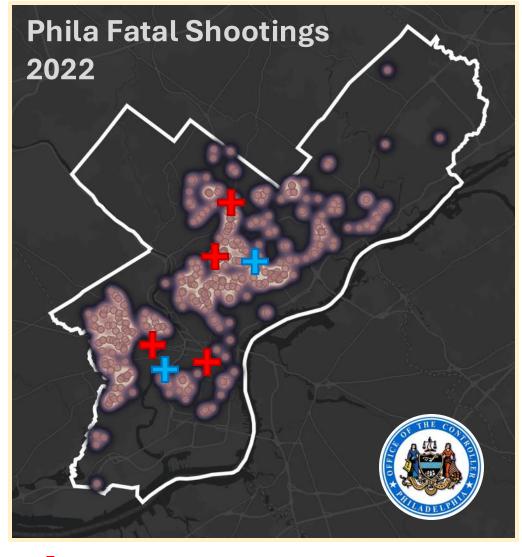




MAY 2016 JPP STAR Unit Dedication

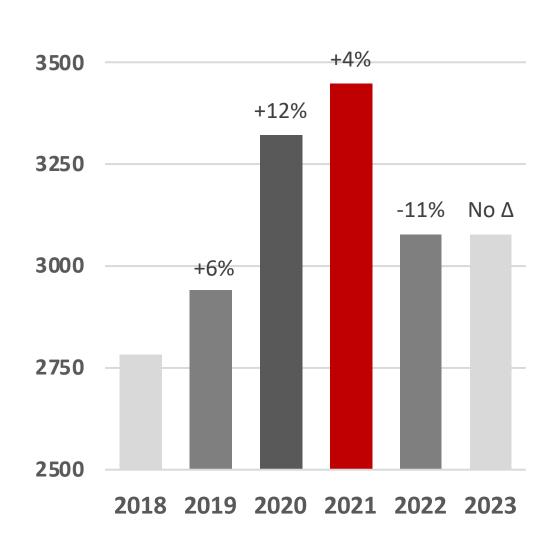


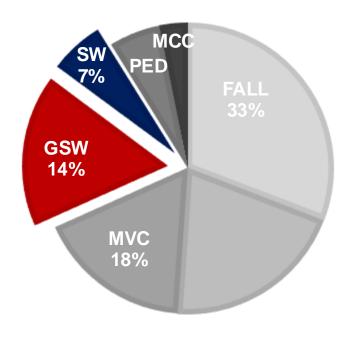
MAJ John P. Pryor, MD





UPenn Trauma Volume and Mechanism of Injury: 2018-2023





	2020	2021	2022	2023
Any Transfusion	254	276	267	278
MTP	69	71	77	87
Whole Blood	108	114	132	160
TEG Pts	314	389	474	583

Police Transport: Maximal Team Stress

2018

2020

2022

GSW From Scene 400 PPD n = 407Fire Rescue 300 POV 200 100 0

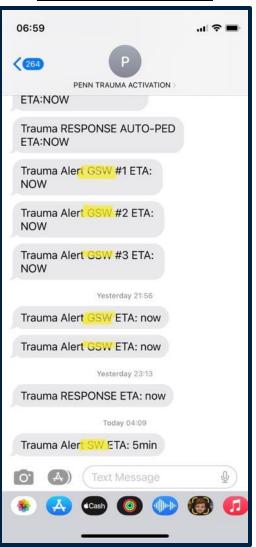
2016

2012

2014



@Penn Trauma Typical Call Night



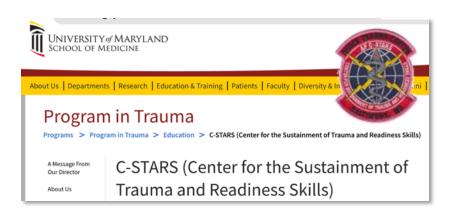
Clinical: Trauma/Systems Experts





Strategic Medical Asset Readiness Training (SMART) Program

https://www.cooperhealth.org/services/serving-our-military-and-veterans





https://www.medschool.umaryland.edu/trauma/education/c-stars-center-for-the-sustainment-of-trauma-and-readiness-skills/



J Am Coll Surg. 2015 Aug; 221(2):235-54.



All 2022 MZA Recipients



Experience saves lives

....not just for the individual patient

System improvements from wartime experience

- Tourniquet use / revival / TCCC
- Prehospital transfusion
- Faster transport times
- In-hospital transfusion
- Whole blood
- Damage control surgery

Synergy Disaster Preparation





High-Volume,
High Acuity,
High Complexity



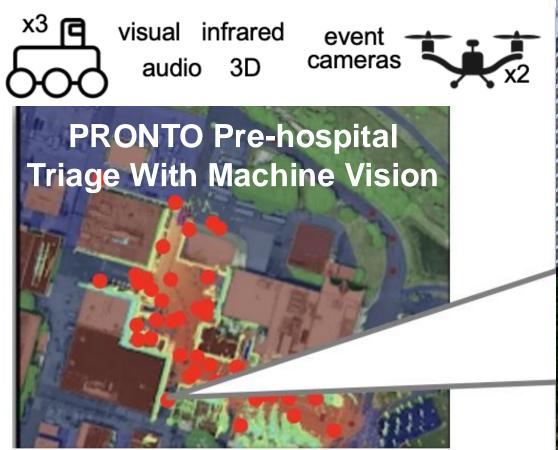






Research Innovation

Research: Readiness & Disaster Innovation





https://www.seas.upenn.edu/~eeaton/index.html
https://penntoday.upenn.edu/news/pioneering-robotic-triage

Research: Combat Casualty Care Innovation



University of Colorado

Anschutz Medical Campus

Center for Combat Medicine and Battlefield Research (COMBAT)



U.S. Assistant Secretary of Defense for Health Affairs Visits **CU Anschutz**

https://medschool.cuanschutz.edu/emergencymedicine/research/center-for-combat-research



Center for Military Medicine Research



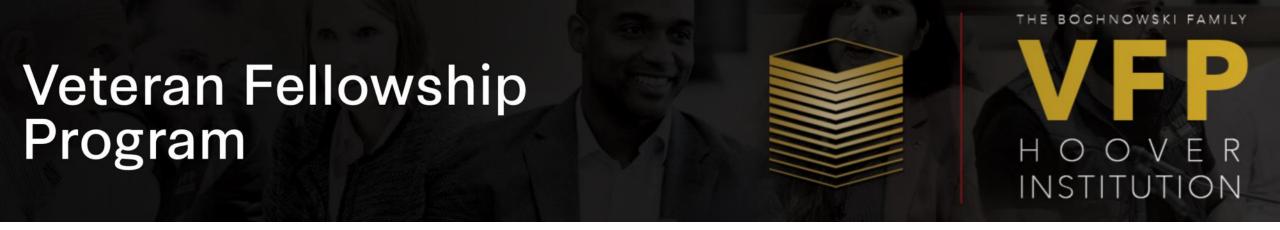
https://www.cmmr.pitt.edu/



Policy Development

Policy Development











▶ Capstone Project Key Questions

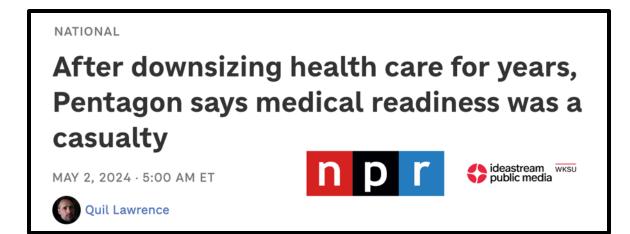
- Underpinnings of the Peacetime Effect/Walker Dip
- Identify Key Stakeholders in this Wicked Problem
- Collaborate with DOD Entities (USU, DHB)
- Define a Solution Set, Way Forward

https://www.hoover.org/veteran-fellowship-program

Policy Development

Proposal: Round Table Discussion

- Org Partners: USU (Woodson, Elster), NASEM, BARDA, ASPR
- Civilian Partners: Denver, Pitt,
 UPenn, Many Others
- Society Partners: ACS, SVS, THOR
- International Partners: Norway, Israel, Ukraine, ALL ALLIES



https://www.npr.org/2024/05/02/1246636334/pentagon-military-healthcare



https://www.nationalacademies.org/our-work/forum-on-medical-and-public-health-preparedness-for-disasters-and-emergencies/events



Next Steps: Take Action, Break the Cycle

The Medical Corps, <u>like most</u> other branches, entered [the next war] as unprepared as at the outbreak of [the last war].



- COL Michael DeBakey, MD



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