

When I was told next morning that my son was sent during the night to the 31<sup>st</sup> Combat Support Hospital in the Green Zone for an emergency operation, because he had a very severe bleeding following the operation he had in the morning. I got into my car and started a journey that would ultimately last more than 8 years of pain, terrible disappointments, and incredible tensions and would finally end in death of Nazar. I was not unduly worried, when I reached the Green Zone I found out that it was again like the camp where my son was hospitalized earlier, it was encircled by a similarly high wall of enforced concrete, which was much more imposing and better guarded with the necessary check points which were protected by more soldiers and fortified by small blocks of concrete and barbed wire. In addition to the soldiers a number of Iraqi civilians who were acting as translators. It was now a bit later than 10 am and one of the translators told me that visitors to patients in the hospital are allowed to enter only at 9 am. The next day, my wife, my daughter and myself were at the check point before 9 am when at exactly 9 a big car arrived from the hospital from which brought three American soldiers one of them was carrying a piece of paper with the names of the patients who were in the hospital, my son's name was there so we were allowed to enter. It was a twenty minutes to walk from the check point to the hospital and when we reached there we were told after a good deal of questioning and checking that our son was in the ICU on the second floor after the major operation he underwent after he was brought from the camp because of the complications which followed the morning's surgery.

The American 31st Combat Support Hospital in the Green Zone was before the invasion a singular hospital, a two story building, a forty bed structure which served only Saddam Hussein, his immediate family and the small circle of his nearest relatives; the most senior party members and ministers, and his most trusted personal assistants. Because of its proximity to Saddam's presidential palace, which was now at the heart of the occupation authority it was taken over by the American military and was used as a surgical emergency center for their injured personnel and some of their Iraqi employers. It was a, during Saddam it was very well equipped with very modern technology to which the Americans added a lot of equipment, but not a kidney dialysis unit a fact which would have an incredible effect on what would happen to my son later.

When we entered the ICU we found my son lying on a bed in a four bed unit, there were many I.V. lines inserted in him with lots of wires which were connected to three monitors. Nazar was still drowsy but he recognized us, there were a lot of people in the room one of them was a young very nice looking African-American woman who told us that she was the surgeon who operated on the boy, she said; it was a fairly long and difficult surgery which required 28 bottles of blood and entailed the removal of the damaged left kidney and the spleen and the repair of some damage to the diaphragm and esophagus, it was impossible to remove the bullet because it was now lying in his back behind the pancreas, the surgeon said that he was recovering nicely we can see him for few minutes and try not to disturb him. The surgeon was extremely nice and evidently very capable and experienced, Dr. Jimie Owsley. We stayed for few minutes there

and then my wife and I left the hospital, but my daughter stayed there and remained there the whole six of his time there. We went back the next day, he was looking much better and my daughter who has remained at his bedside all night said that he was reasonably comfortable he slept well and she was very confident of his chances of recovery a view which was confirmed by Dr. Owsley who came to see him when we were there, we went back the day after and the day after for the whole week during which he was recovering very nicely, some of the tubes and monitors have been removed. On the morning of the seventh day after the operation the male nurse who was in charge said that our son was in a very good condition, he is no more an ICU case and he is going to be taken to a regular ward for few days before sending him home, to be discharged and to be sent home for more than a week, few minutes later the nurse and myself were moving him from the bed to a nearby wheel chair when he said he was having chest pain so we returned him to the bed and within two or three minutes there at least half a dozen physicians and nurses on top of him injecting attaching I.V. lines and wires to different monitors to him. We were asked to leave and we waited outside, we were greatly worried and terribly concerned. We waited for half an hour, one of the nurses came out and said he'd had a pulmonary embolism but they are operating on him.

A pulmonary embolism (PE) is a blockage of the main artery of the lung or one of its main branches by a substance that has travelled from elsewhere in the body through the bloodstream (embolism). PE most commonly results from deep vein thrombosis (a blood clot in the deep veins of the legs or pelvis) that breaks off and migrates to the lung, a process termed venous thromboembolism. Mortality from untreated PE is very high. Prognosis depends on the amount of lung that is affected, the embolus must be resolved somehow if the patient is to survive. In thrombotic PE, the blood clot may be broken down by fibrinolysis, or it may be organized and re-canalized so that a new channel forms through the clot.

They were working on Nazar for two hours at the end of which the same nurse came to us and said your son's embolic problem has been fixed you can go and see him now. We went to see him and went back every day the next week, he was getting better but not as good as he was before the embolic attack and at the end of the week his doctor came to see us and said that his right kidney the only one he was left with was failing and he needs kidney dialysis but we don't have the equipment here take him to a hospital in the city where it can be done. We took him to a nearby hospital for the procedure, but it was a terrible failure, he was sent back in a hurry to the Green Zone but before he arrived there he had a heart attack. He was taken to the cardiac unit where he was resuscitated, his heart started to beat again but his brain has already been severely damaged, his brain has been denied Oxygen for 14 minutes which was too long, it left him in a vegetative state.

A vegetative state is a disorder of consciousness in which patients with severe brain damage are in a state of partial arousal rather than true awareness. It is a *coma* like state characterized

by open eyes and the appearance of wakefulness. The vegetative state is a very strange and unusual medical condition, a patient in a vegetative state is not dead but he is also not alive in the usual sense of the word, he has lost his high cortical brain functions like speech and movement but the mid brain automatic ones like breathing and heart beat are normal, he needs a good nursing care and very careful medical observation hoping that the situation would be reversed. After six weeks in the hospital nothing changed and we were told that they can do nothing for him you can take him home and do what he needs yourself which might be for months or years or let us stop his life saving devices and allow him to go. We took him home and began a very long and extremely difficult journey which would ultimately take us to the United States waiting for a miracle, but in the end there was no miracle.

Najeeb Hanoudi

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Southfield, MI

Email: [najeebhanoudi@yahoo.com](mailto:najeebhanoudi@yahoo.com)