

David Cotterrell: War and Medicine : Artists Diary

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This article is an extract from the Black Dog Publishing book, War and Medicine. Reprinted with kind permission of the publisher. The article offers an abridged account of a residency at the British forces field hospital in Afghanistan.

In November 2007, artist David Cotterrell travelled to Helmand Province, Afghanistan, as a guest of the Joint Forces Medical Group. For three weeks, he observed the work of military medical staff at the main field hospital at Camp Bastion. His documentation forms part of the research for a new body of work commissioned by the Wellcome Trust for the exhibition War and Medicine.

The passages and images reprinted here are extracted from his personal diary and photographic records.

This file may be viewed with Adobe Acrobat Reader.

the activity I hope the camera may offer me some perspective.

"I walk and I stand back. The beds in Room 411. X-rays, clothes cut away. Cleaning away the dirt of battle and resuscitating emergency cases. MEDIC medical stores, covered in dust and in full body armour, to head the British staff. They appear as if parachuted into A&E.

Practically the entire medical pass and constant to complete patients. I am surprised by this occasion. A vessel of violent injuries to death with its orange plastication. But one of the cases would be life-threatening. Here they seem to be covered in routine.

As I stare across the low-angled headbed seen in the distance, the first priority becomes visible. As the clothes are cut away the blame and any scars is unappreciated. There is a gap in his legs. His thighs appear missing. I feel sick, as I remember for the first time how he has been destroyed. Bloody eggs and gams are piled around his legs and in the distance I see figures faintly attending to his mangled body. I withdraw to meet the surgeons and see two feet separate before the casualties because their charge.

I follow them in, feeling a little embarrassed from observing to make the case. Alone, I walk past Theatre 1 and 2. Col. Galloway is waiting. "Hospital would", he says sympathetically, "Go in if you want." I enter through the vestibule. The mangled legs are exposed beneath blue surgical paper, the theatre light illuminating the end of his one arm.

"What injuries?" I am asked by a kindly theatre nurse. It feels wrong to have, but the nurse seems to recognise my unease and says gently, "It is no wonder what you are doing here—you are always welcome."

I feel humbled by the nurse. Surgeons walk on Fletcher's leg and other wounds. The others do not appear to be serious, but the legs are a terrible scene. The right leg appears to have been ripped away. It seems impossible anything can be salvaged, but the surgeons continue working meticulously removing infection-causing shrapnel, clothing and dirt.

I am shown the X-rays of the arm. It seems that this offers the surgeons some hope. They will try to save his leg.

The surgery lasts over an hour and the floor is red with blood. He has lost nearly all his own and is having a total transfusion. It seems that the risk from this can be rejected. If a transfusion has happened before, he may have two more antibodies and fail to accept the new blood.



Extract from article Credit: David Cotterrell (2008)