



Ministry
of Defence

Defence Statistics Health
Ministry of Defence
Oak 0 West (#6028)
Abbey Wood North
Bristol BS34 8JH
United Kingdom

Telephone [MOD]: +44 (0)30679 84423

Facsimile [MOD]: +44 (0)1179 319634

E-mail: DefStrat-Stat-Health-PQ-FOI@mod.uk

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██████████
House of Commons
London
United Kingdom
SW1A 0AA

Date: 29 November 2013

Dear ██████████,

Thank you for your correspondence of 6 November 2013 where you requested information on behalf of a member of your constituent, who asked;

"To date, how many of our military personnel have lost their lives as a result of the present conflict in Afghanistan? To date, how many of our military personnel have lost a limb and have returned to Britain since the present conflict began."

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held. The information you requested is enclosed.

Deaths

From 7 October 2001 (the start of operations) up until 24 November 2013, **446** UK Armed Forces personnel have died as a result of operations in Afghanistan. Figures are for Tri-Service regular and reservist personnel and for all causes of death; Hostile action, accidents, natural causes, assaults, coroner confirmed suicide or open verdicts and cause not yet known.

Information on deaths and casualties as a result of operations in Afghanistan is released on a monthly basis and can be found at;

<http://www.dasa.mod.uk/index.php/publications/health/operational-casualties/fatality-and-casualty/2013-09-30>

Amputations

Defence Statistics produce quarterly Afghanistan and Iraq Amputation Statistics which detail traumatic and surgical amputations sustained as a result of Operational incidents in Afghanistan and Iraq from 7 October 2001 to the latest available data. The latest publication available provides information up to 30 September 2013, the next scheduled release of these statistics is Thursday 30 January 2014 at 0930.

These statistics can be found online at www.dasa.mod.uk. You will find the link to the published reports under 'Health/Medical Statistics' within the 'All Other Publications' tab. For your convenience the latest quarterly report has been attached.

Table 1 below provides the number of UK Service personnel whose injuries included a traumatic or surgical amputation, partial or complete for either upper or lower limbs as a result of injuries sustained on Operations in Afghanistan, from 7 October 2001 to 30 September 2013.

Table 1: UK Service personnel¹ with partial or complete limb amputations sustained as a result of injuries in Afghanistan, 7 October 2001 – 30 September 2013, Numbers²

| Date Of Initial Amputation | | Financial Year | | | | | | | | | | | | | |
|----------------------------|-------------|------------------------------|-------|-------|-------|-------|--------------------|-------|-------|-------|-------|-------|-------|-------|---|
| | | Op VERITAS | | | | | Op HERRICK | | | | | | | | |
| | | 01/02 ³ | 02/03 | 03/04 | 04/05 | 05/06 | 06/07 ⁴ | 07/08 | 08/09 | 09/10 | 10/11 | 11/12 | 12/13 | 13/14 | |
| Country | Afghanistan | All - Financial Year | ~ | 0 | 0 | 0 | 0 | 9 | 17 | 28 | 71 | 75 | 46 | 29 | |
| | | 1 April - 30 June (Q1) | | 0 | 0 | 0 | 0 | ~ | 5 | ~ | 5 | 19 | 14 | 11 | ~ |
| | | 1 July - 30 September (Q2) | | 0 | 0 | 0 | 0 | ~ | ~ | 5 | 22 | 20 | 15 | 8 | ~ |
| | | 1 October - 31 December (Q3) | ~ | 0 | 0 | 0 | 0 | ~ | ~ | 15 | 24 | 19 | 10 | 5 | |
| | | 1 January - 31 March (Q4) | 0 | 0 | 0 | 0 | 0 | ~ | 6 | ~ | 20 | 17 | 7 | 5 | |

Source: See background notes for information on the data sources

¹ Includes Naval Service personnel, Army personnel including those from the Gibraltar Regiment, RAF personnel and Reservist personnel. Civilians and other Nations Service personnel have been excluded.

² Data presented as “~” has been suppressed in accordance with Defence Statistics rounding policy (see background notes).

³ 7 October 2001 is the date Op VERITAS commenced.

⁴ 1 April 2006 is the date Op HERRICK commenced.

All of the personnel included in Table 1 were either aeromedically evacuated back to the UK or had a record in the Defence Patient Tracking System of receiving further treatment in the UK. Since 2001, the Royal Centre for Defence Medicine (RCDM), based at the University Hospital Birmingham Foundation Trust (UHBFT), has been the main receiving unit for military casualties evacuated from an operational theatre. In the Birmingham area, military patients can benefit from the concentration of five specialist hospitals (including Queen Elizabeth) to receive the appropriate treatment. Queen Elizabeth is at the leading edge in the medical care of the most common types of injuries (e.g. polytrauma) our casualties sustain, and the majority of casualties will be treated there, but others may be transferred to another hospital (in Birmingham or elsewhere) if that is where the best medical care can be given.

Background Notes

The tables in this response have been scrutinised to ensure individual identities have not been revealed inadvertently. In line with Defence Statistics rounding policy (May 2009), in keeping with the Office for National Statistics Guidelines, all numbers fewer than five have been suppressed and presented as ‘~’. Where there is only one number in a row or column that is fewer than five, the next smallest number (or numbers where there are tied values) has also been suppressed so that numbers cannot simply be derived from totals.

Deaths

Defence Statistics (Health) compiles the Department’s authoritative deaths database for all **UK Armed Forces personnel who died whilst in Service** going back to 1984. Information is compiled from several internal and external sources from which we release a number of internal analyses and external National Statistics Notices.

Amputations

Data are compiled by Defence Statistics from five sources:

- The Joint Theatre Trauma Register (JTTR), which commenced during 2003 to improve the care of the seriously injured patient from the point of injury to the point of discharge from hospital treatment.
- The Complex Trauma Database managed by the Defence Medical Rehabilitation Centre, Headley Court which commenced in June 2008 to record information on patients receiving in-patient care on the complex trauma ward.
- The Prosthetics Database managed by the Defence Medical Rehabilitation Centre, Headley Court which commenced in June 2006 to record information on patients fitted with a prosthetic limb(s).
- The Defence Patient Tracking System (DPTS) which commenced on 8 October 2007. The DPTS was set up to enable the capture of tracking data for aeromedically evacuated patients at the place where healthcare is being delivered along the care pathway.
- UK Service personnel who have sustained a partial or complete limb amputation as a result of injuries on Op HERRICK and Op TELIC prior 1 April 2006 have been identified from the dataset used to compile the following research paper: Dharm-datta, S; Etherington, J.; Mistlin A. & Clasper J, 2011, Outcome of amputees in relation to military Service, Journal of Bone and Joint Surgery - British Volume, Vol 93-B, Issue SUPP_I, 52.

A live UK Service personnel is defined as an amputee if they have an injury coded in the JTTR as Amputation (traumatic), partial or complete, for either upper or lower limbs using the Abbreviated Injury Scale (AIS) Dictionary 2005 (Military Edition), and live UK Service personnel who had a surgical amputation performed either at the field hospital or at a UK hospital (the majority of these will be at the Royal Centre for Defence Medicine). A traumatic or surgical amputation can range from the loss of part of a finger or toe up to the loss of entire limbs.

Live personnel are defined as either those undergoing treatment at Camp Bastion Field Hospital or the Royal Centre for Defence Medicine (RCDM) or those being discharged from hospital after receiving treatment for the injuries that resulted in an amputation(s).

Since 2001, the Royal Centre for Defence Medicine (RCDM), based at the University Hospital Birmingham Foundation Trust (UHBFT), has been the main receiving unit for military casualties evacuated from an operational theatre. In the Birmingham area, military patients can benefit from the concentration of five specialist hospitals (including Queen Elizabeth) to receive the appropriate treatment. Queen Elizabeth is at the leading edge in the medical care of the most common types of injuries (e.g. polytrauma) our casualties sustain, and the majority of casualties will be treated there, but others may be transferred to another hospital (in Birmingham or elsewhere) if that is where the best medical care can be given.

The data from the JTTR is cross referenced with the Complex Trauma Database, the Prosthetics Database and the DPTS. Doctors may recommend and/or patients may elect to have an amputation at any point during their care pathway, thus any additional live UK Service personnel identified as an amputee from these data sources have been included in this response.

Operation VERITAS is the name for UK operations in Afghanistan which started in October 2001. The UK was involved in Afghanistan alongside Coalition forces, led by the US under Operation Enduring Freedom (OEF), from the first attacks in October 2001.

Operation HERRICK is the name for UK operations in Afghanistan which started in April 2006. UK Forces are deployed to Afghanistan in support of the UN authorised, NATO led International Security Assistance Force (ISAF) mission.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering deaths and injuries in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: DefStrat-Stat-Health-PQ-FOI@mod.uk

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Deputy Chief Information Officer, 2nd Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

I hope this is helpful.

Yours sincerely,

Defence Statistics (Health) Head (B1)