

Reasons for Emergency Evacuation and Repatriations

Dr. Michael Braid

Regional Medical Director Offshore and Commercial Maritime

michael.braid@internationalsos.com



Disclosure

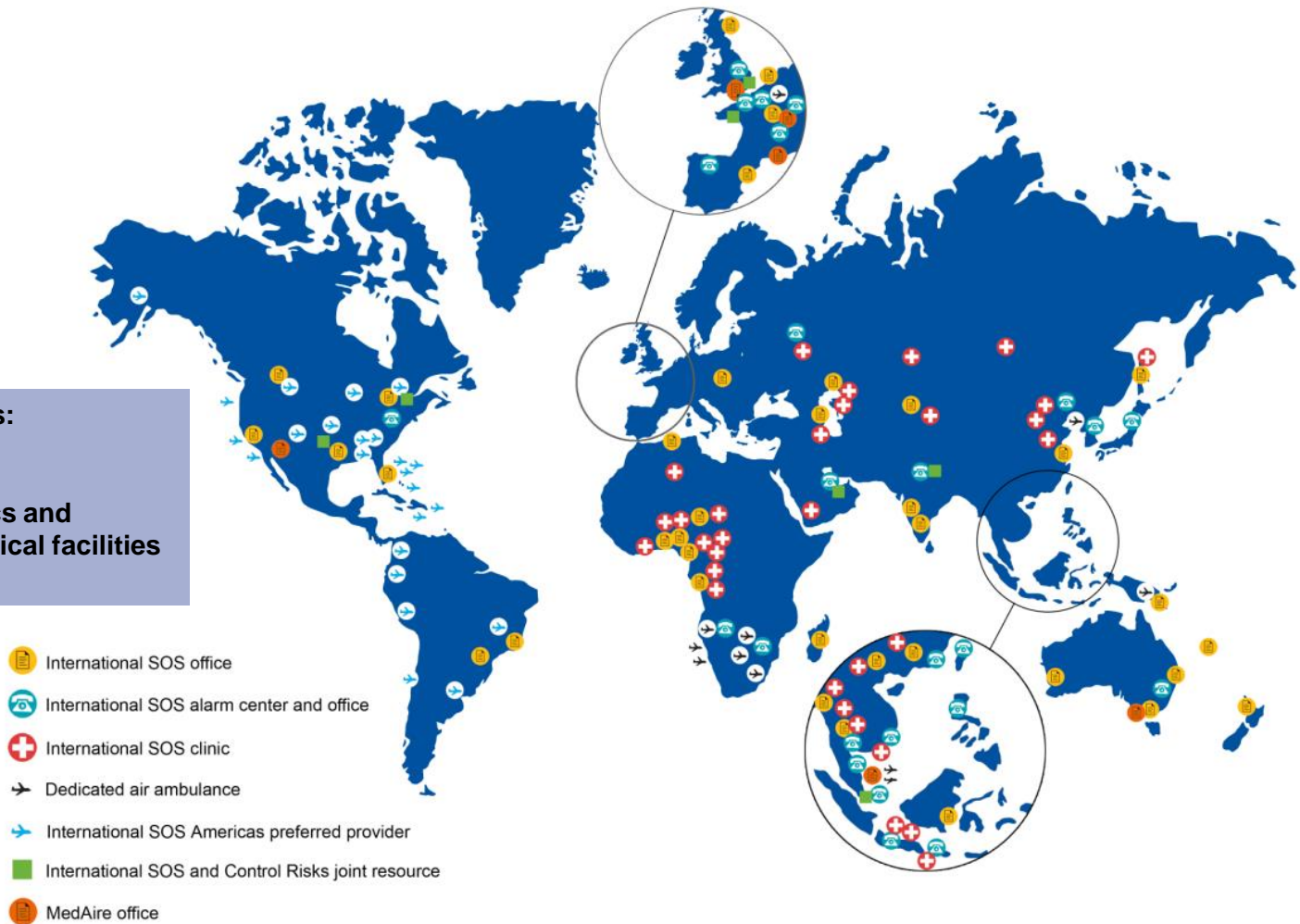
Dr. Michael Braida

- Canadian physician
- Regional Medical Director for Offshore and Commercial Maritime
- International SOS London and Aberdeen
- Medical Director MedAire Europe
- Medical training: Internal medicine and intensivist
- HEMS physician with over 2000 missions
- Post graduate research in Immunology



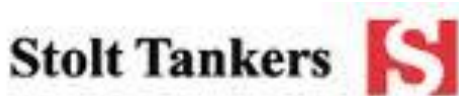
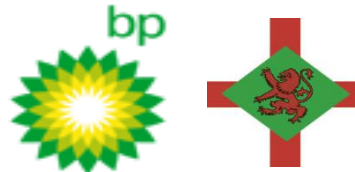
International SOS

International SOS has:
104 offices,
27 alarm centers,
32 international clinics and
Over 500 remote medical facilities
across 5 continents.



Client reference:

Fleet of prestigious **Tankers, Bulkers & Containers** companies



BP Shipping

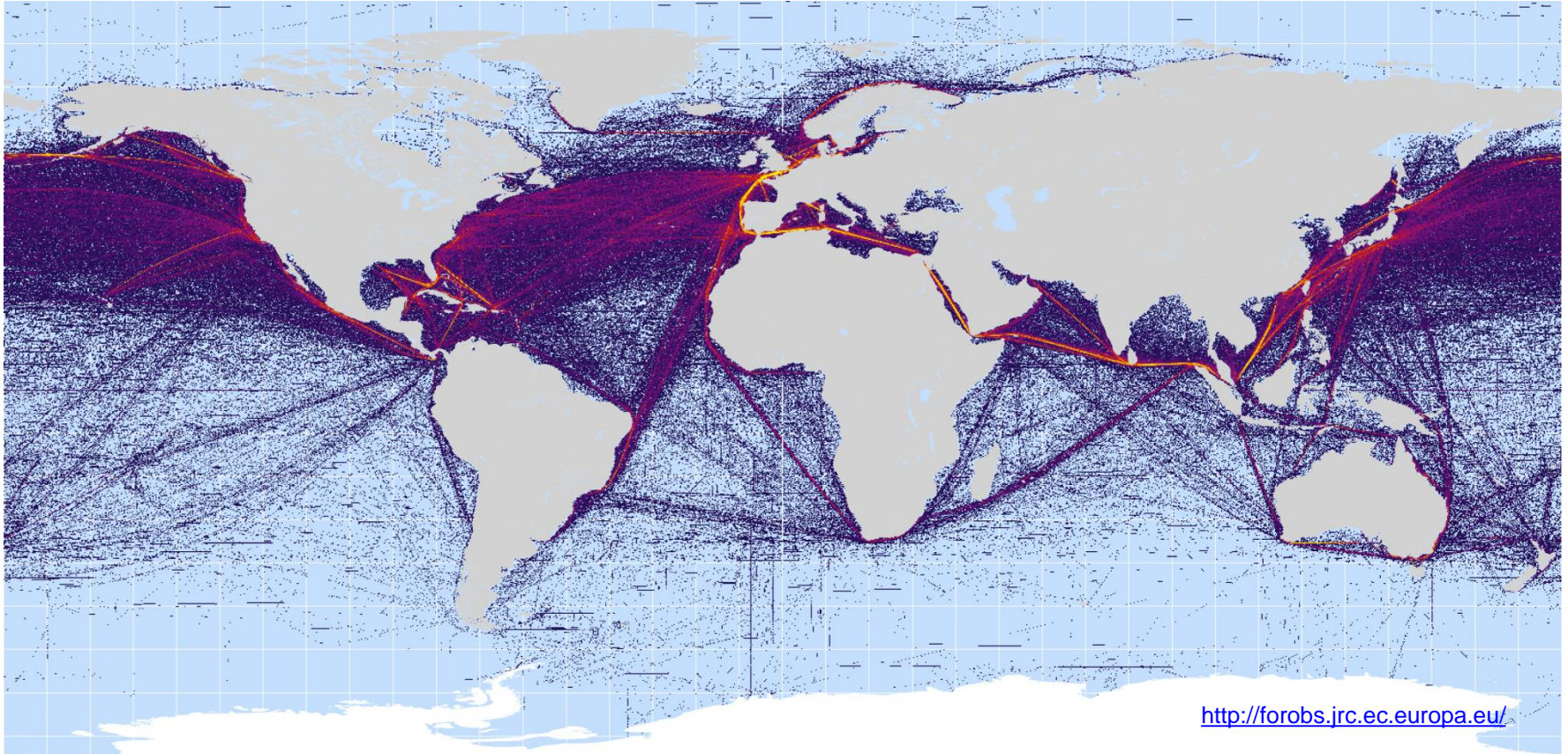


VALLES STEAMSHIP (CANADA) LTD.



WORLDWIDE REACH. HUMAN TOUCH.

Commercial Shipping Lanes Today



<http://forobs.jrc.ec.europa.eu/>

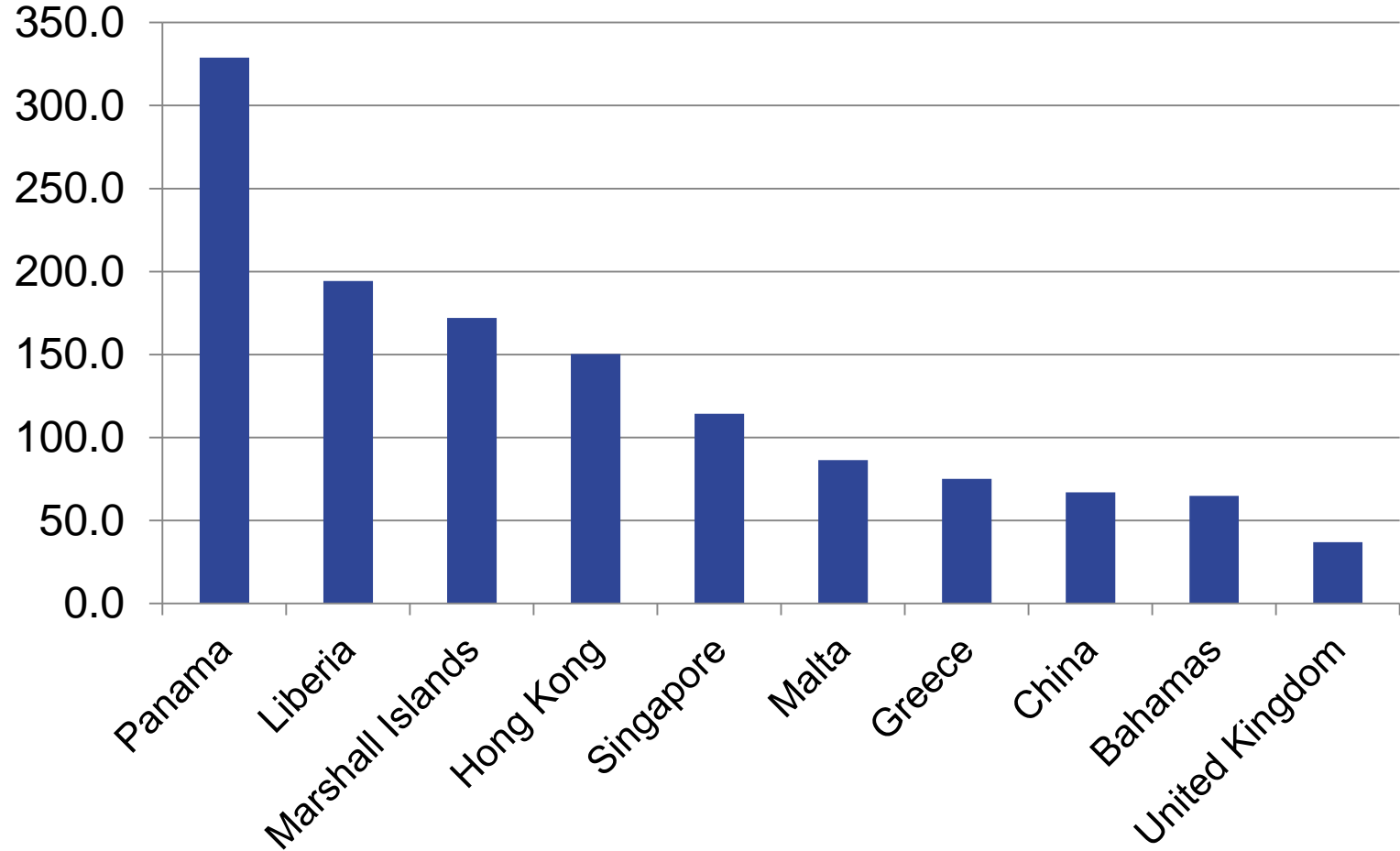
50,000+ merchant ships trading internationally
World fleet is registered in over 150 nations
Manned by over a million seafarers

Global Seafarers

Nationalities

- **466,000** officers and **721,000** ratings.
- Officers: North America, Western Europe, Japan etc.
- Officers Trend: recruitment from the Far East and Eastern Europe.
- Majority of the ratings are recruited from **developing countries**, especially the Far East and South East Asia.
- The Philippines and India are very significant maritime labour supply nations,
- Eastern Europe increasingly large supplier of seafarers with high numbers from countries including the Ukraine, Croatia and Latvia.

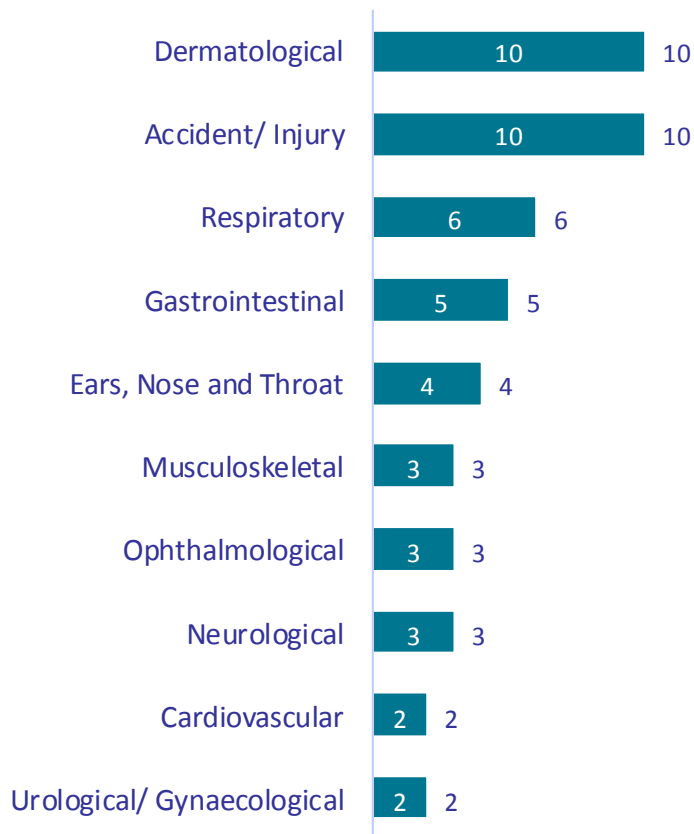
Fleet Nationalities



Most Observed Medical Conditions

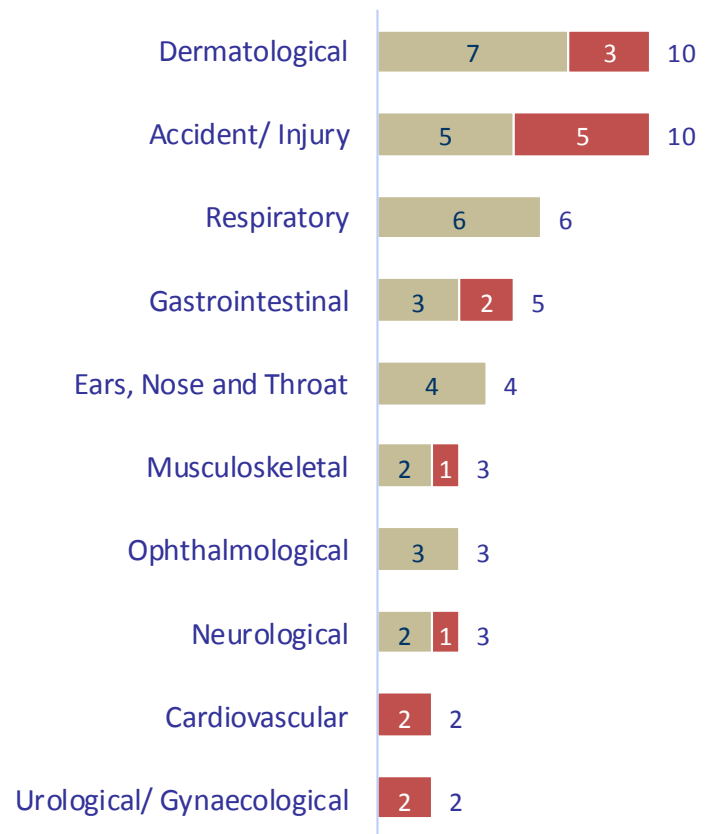
From 1st Jan. to 31st Dec. 2014

Incident Location



At port (olive green) At sea (teal)

Shoreside Evaluation

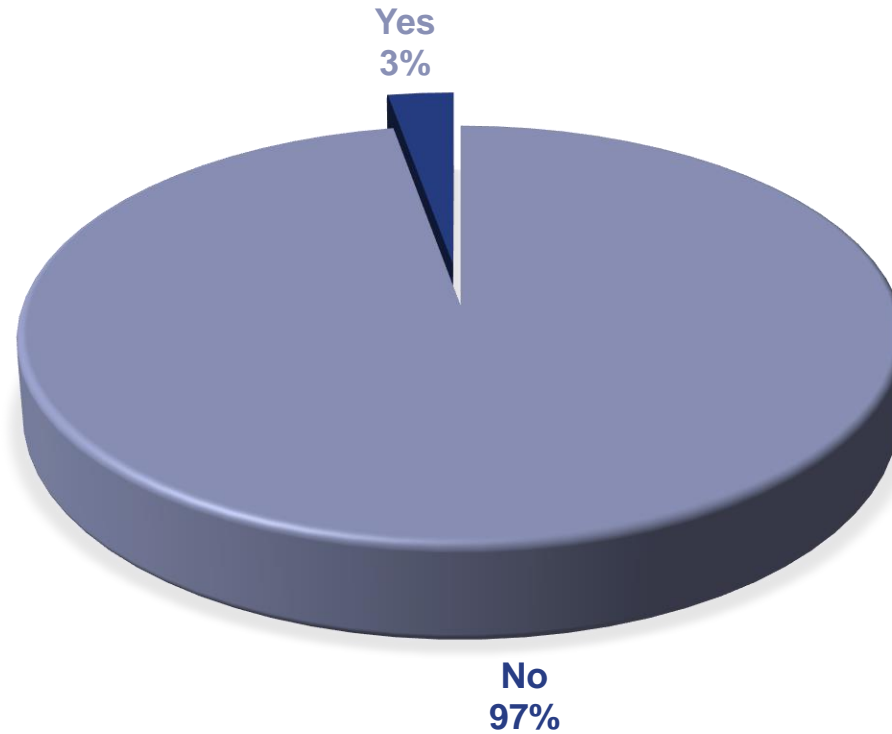


On-Board only (olive green) Follow up Ashore (red)

Approximately 2 to 3 reported medical cases / vessel / year



Diversions



Implications → always a major event

Key Morbidities of Concern

- Cardiovascular disease
- Neurology: Seizures
- Mood disorders / depression
- Communicable diseases



Case 1



02 September 2015

- Bosun on the XXXX at Anchor in Saudia Arabia.
- 4 day history of right sided Inguinal pain possible Hernia.
- Mariner went ashore for medical assistance.

03 September 2015

- Medical update the mariner is admitted in Jubail and their request is for the mariner to be repatriated back home and he would like Intl.SOS recommendations.

Case 1

Admitting Medical Diagnosis:

- DKA, Diabetes mellitus previously not known and or reported

ICU Diagnosis:

- DKA
- Necrotizing fasciitis of the abdominal wall
- Sepsis with MODF

Procedure:

- Surgical intervention

Clinical Course and Outcome:

- MODF, inotropes, respiratory failure with subsequent ventilation
- Patient passed away on 4th hospital day



Case 2

- Vessel Captain was found lying unresponsive in the engine room.
- Intl. SOS Medical Team was on the phone with the Chief Officer doing CPR for almost 1 hour until the Captain was confirmed to have passed away.

Final Diagnosis:

- Cardiac Arrest
 - Etiology: ?
- PMH: Ao-Aneurysm 3 years ago



Role of the designated medical officer

- Recognize
- Support
- Report
- Understand the contents of the medical chest



Can medical risk at sea be mitigated?

Pre-embarkation

- Concise and correct medical examinations
- Vetted maritime medical examiners
- More stringent immunization recommendations
- The informed seafarer

En-route

- Medical chest
- DMO training
- POC diagnostics
- Telemedicine plus digital technologies

Disembarkation

- Wellness programs
- Continued health care provision



Thank you

