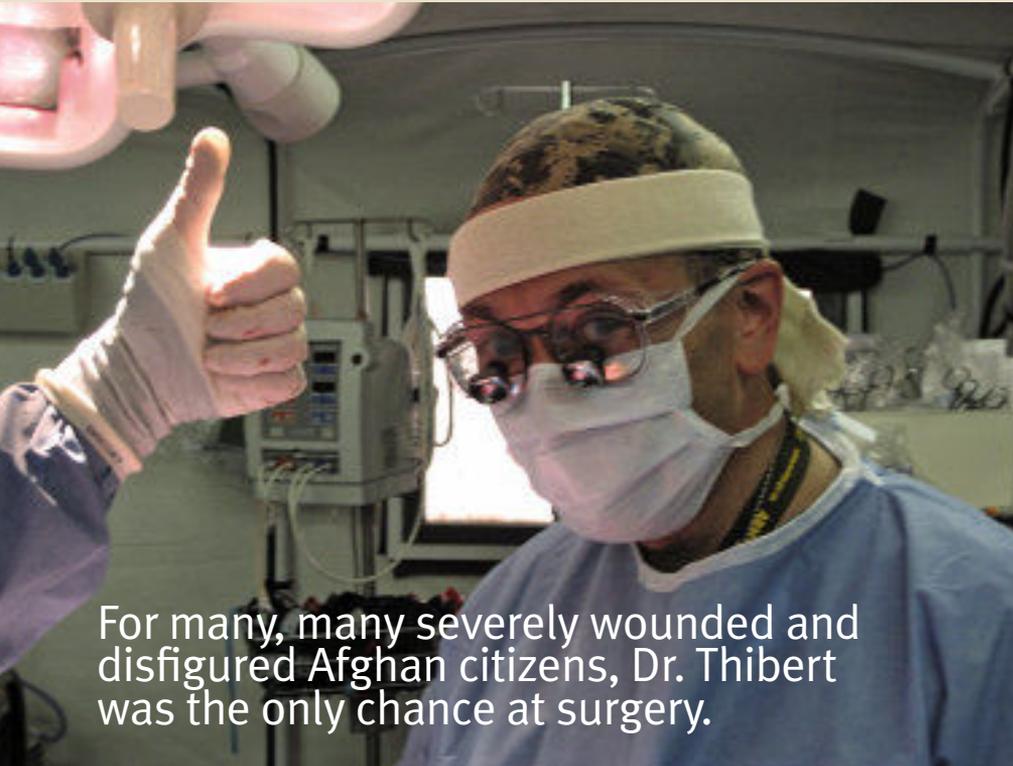


Tour of Duty

BY WENDY HAAF

Photos courtesy of Dr. Mark Thibert



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DR. MARK THIBERT (BSc'79, MD'83) WITH THE INTERNATIONAL SURGICAL TEAM AT THE ROLE 3 MULTINATIONAL MEDICAL UNIT (MMU) IN KANDAHAR, AFGHANISTAN.

Half a world away from his Thunder Bay plastic surgery practice, Dr. Mark Thibert (BSc'79, MD'83) has made a difference in the lives of many ordinary Afghan citizens that goes much deeper than the merely cosmetic. Between July 27 and October 3, 2008, Dr. Thibert, a reservist and commanding officer of 18 Field Ambulance, was deployed to the Role 3 Multinational Medical Unit (MMU) at Kandahar air field – a period when the institution saw an unprecedented peak in casualties. Countless residents of the country suffer horrifying injuries from insurgent attacks, and end up at the Canadian-military-run MMU.

“If a Canadian is badly wounded, they’ll get their life-saving surgery (at the MMU) and then they’ll get reconstructive surgery back in Canada, but for many, many severely wounded and disfigured Afghan citizens, Dr. Thibert was the only chance at surgery,” explains Dr. Andrew Kirkpatrick, a Calgary general surgeon who served alongside Thibert for a month. To illustrate, Kirkpatrick tells this story. “There was a guy who basically had half his leg blown off by a high-powered machine gun bullet, and the orthopaedic surgeon had fixed the bone, but there was no vascular surgeon,” he says. “Mark helped me with the easy end of the

interposition graft, and he did the hard end, and it worked perfectly. That gentleman would have lost his leg if it wasn’t for Mark.”

According to Thibert, injured individuals in Afghanistan can be abandoned by family if they’re unable to return to work soon after release from hospital. He also says it was particularly

gratifying when he was able to restore someone’s hand function because the hands play such an important role in communication in that culture.

Thibert remained upbeat and encouraging, says Kirkpatrick, even after more than 24 straight hours doing facial reconstructions, helping with wound debridements, and putting skin grafts on fasciotomies – something that made him stand out even in an environment where interdisciplinary respect and pitching in is the norm. All this, despite dorm-like living conditions, 24/7 on-call, temporarily having to forgo passions like running and playing jazz, and missing friends and family, including his two adult children.

For his part, Thibert says he gained a great deal of satisfaction from the experience and learned at least as much from his colleagues as they did from him. “If I had to pick out one thing from my entire deployment that was most meaningful to me, it was the ability to work so very closely with all of these very, very highly trained individuals.”

Thibert is also quick to shift some of the credit for his good works in Afghanistan onto other shoulders. “I could not have gone and done that type of deployment, had I not received the utmost, world-class training while I was at Western.”