



Ministry  
of Defence

Defence Statistics Health

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1. In order to supplement information provided for inclusion in the Minister's speech, Defence Statistics (Health) were asked to provide the recovery rate of UK Service Personnel that have been admitted to the Camp Bastion Field Hospital in Afghanistan.
2. Defence Statistics have interpreted recovery rates as the rate of survival for all personnel that were initially admitted to the Field Hospital. This includes all personnel admitted for Battle Injuries, Non Battle Injuries and Natural Causes.
3. For the period 1 April 2006 to 31 July 2013 (latest available field hospital admissions data), the survival rate for UK Armed Forces personnel at Camp Bastion was **99.6%**.
4. This was based on a total of 6,386 admissions for UK Armed Forces personnel to the hospital at Camp Bastion, of which:
  - 28 (<1%) died of their injuries
  - 2,746 (43%) were aero-medically evacuated back to the UK and
  - 3,612 (57%) returned to their unit in Afghanistan
5. A further 21 UK Armed Forces personnel have died of their injuries after being aero-medically evacuated to the UK, reducing the overall survival rate to 99.2%.
6. Defence Statistics also receive Field Hospital admissions data for all other nations, including US Military, Coalition forces and Afghan locals. For the period 1 April 2006 to 31 July 2013, the survival rate for all other admissions (including coalition military forces and Afghans) was **96%**.
7. This was based on a total of 13,547 admissions for non-UK admissions to the hospital at Camp Bastion, of which:
  - 539 (4%) died of their injuries
  - 13,008 (96%) left the field hospital alive (MOD do not track coalition or Afghan populations after they have left the UK military hospital).
8. However it is important to note that the 'recovery rates' provided above are based on the total population admitted to the Camp Bastion field hospital, including relatively minor conditions which did not threaten life. There are two cohorts of patients that are more appropriate to assess for a survival rate, the cohort of trauma patients and those who received a massive blood transfusion.

9. Between 1 April 2006 and 31 July 2013 there were **6,829 trauma cases** admitted to a field hospital in Afghanistan, of which 93.2% survived (n = 6,362). The survival rate was influenced by the nationality of the patient:
  - 97% recovery rate<sup>1</sup> for UK Armed Forces (58 deaths and 1,906 survivors)
  - 97% recovery rate for Coalition military and entitled civilians (42 deaths and 1,206 survivors)
  - 90% recovery rate for Afghans (367 deaths and 3,250 survivors)
10. Between 1 April 2006 and 31 July 2013 there were 1,010 **trauma patients who received a massive blood transfusion**, of which 84% survived (n = 845 ). The recovery rate was influenced by the nationality of the patient:
  - 87% recovery rate for UK Armed Forces (33 deaths and 220 survivors)
  - 94% recovery rate for Coalition military and entitled civilians (16 deaths and 249 survivors)
  - 76% recovery rate for Afghans (116 deaths and 376 survivors)
11. The lower recovery rates observed for Afghan patients were thought to be due to a number of reasons including the use of protective equipment and co-morbidity.
  - Protection: The protective equipment worn by UK and coalition military (including the US) is of a higher standard than that used by either the Afghan National Army or the Afghan National Police and more than non-hostile civilians that may not be wearing any protection. Thus the injuries sustained by this group may be more life-threatening, reducing survival rates.
  - Co-morbidity: UK and coalition military forces (including the US) have been screened for health issues and are at a high level of fitness to be in an operational setting. This is in contrast to the large proportion of Afghan locals that present with other conditions (e.g. malnutrition) in addition to the injuries they have sustained, reducing survival rates.

## Background Notes

### *Deaths*

12. 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.

### *Casualties*

13. Field Hospital admissions data has been sourced from EpiNATO J97 returns and OpEDAR. We have identified field hospital admissions for UK personnel treated at the UK field hospital in Camp Bastion.
14. The OpEDAR database records all patients who have attended or been admitted through the A&E department of the UK operational field hospital. The data includes all patients including UK Service personnel, other NATO forces, civilians (both UK and nationals) and detainees.
15. Where information is available, only initial admissions have been counted. Reviews and readmissions have been excluded.
16. Please note that it is not possible for Defence Statistics to validate the data held on non UK Military personnel. As such, we can not identify whether individuals have been admitted to the Field Hospital for the first time and also whether the admission has occurred at Bastion or another coalition medical facility.

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<sup>1</sup> Figures include all UK Service personnel who have died of their injuries, including those who died at Camp Bastion and following aero-medical evacuation to UK hospitals.

17. The Joint Theatre Trauma Registry (JTTR) has been used to identify trauma patients in this response. A casualty is entered onto the JTTR and considered a trauma patient if the incident triggers activation of the trauma team in a deployed field hospital.
18. A massive transfusion is defined as: a) the replacement of an equivalent amount of blood to an entire circulating blood volume of the patient within 24 hours; or b) More than 10 units of red blood cells within 24 hours (whichever comes first). Due to limitations in the transfusions data in the JTTR in terms of date/time data not being held, Defence Statistics use an alternative definition of a massive blood transfusion as 10 or more units of RCC during Roles 1 to 3.

Yours sincerely,

Defence Statistics Health Head