

MEDICAL PRECAUTIONARY MEASURES FOR ESCORT OFFICERS

PREPARATORY PHASE

1.1 Personal Health Care and Precaution

1.2 Prevention

1.3 Specific risks: first contact and pre-departure

1.4 Positional Asphyxia Syndrome

PERSONAL HEALTH CARE AND PRECAUTION

- Organize your equipment, **have your own medicine with you.**
- International Vaccination Document (“Yellow Book”)
- Let your colleagues know what medication you need if needed.
- Get medical information about your Returnee’ (e.g. contagious diseases)
- Take enough rest before the trip

PREVENTION

Every escort officer should be (or can be) vaccinated against:

Hepatitis A and B
Yellow fever
Diphtheria-Tetanus
Polio
Bacterial meningitis
(Cholera)
(Typhus)
(Rabies)

TRANSMITTED

BY WATER AND FOOD:

- Hepatitis A
- Cholera
- Typhus

BY BLOOD / BODY SECRETION:

- Hepatitis B / C
- HIV

BY INJURIES /WOUNDS:

- Tetanus
- Hydrophobia/rabies (canine madness)

TRANSMITTED

BY INSECTS:

- Yellow fever
- Malaria

FROM HUMAN TO HUMAN:

- Diphtheria
- Polio
- Pediculosis
- Scabies
- Ebola
- Tuberculosis

AS GENERAL ADVICE...

DURING THE MISSION EATING, DRINKING,
SMOKING AND BRINGING OBJECTS TO
MOUTH MUST BE DONE VERY CAREFULLY
AND WITH PROPER PRECAUTION

NEVER TOUCH YOURSELF WITH GLOVES!!!

REMOVE YOUR GLOVES BY THE MANEUVER
WHICH PREVENTS THEM TO TOUCH YOUR
PALMS, THEN IMMEDIATELY WASH THE
HANDS

SPECIFIC RISKS: FIRST CONTACT AND PRE-DEPARTURE



RISKS DURING THE SEARCH





TRANSMISSION THROUGH CONTACT

EXAMPLES OF INFECTION THAT
CAN BE TRANSMITTED BY DIRECT CONTACT OR
INDIRECT CONTACT VIA MATERIALS.

Especially if after use of toilet and without washing hands

- Escherichia Coli
- Shigella
- Hepatitis A B C
- Rotavirus
- Parainfluenzae Virus
- Intestinal diseases
- Clostridium Difficile
- Pediculosis
- Scabies
- Respiratory Virus
- Ebola
- Herpes Simplex Virus
- Noro virus

TRANSMISSION THROUGH BLOOD CONTACT

HIV

HEPATITIS B

HEPATITIS C

HOW TO REDUCE THE RISK ?

INDIVIDUAL DEVICE PROTECTION OF HANDS



GLOVES

Surgical gloves prevent infection from spreading through direct contact. Important thing is never to touch your own body with the glove! If needed, remove the gloves with specific maneuver that prevents the infectious side from touching you, wash the hands, do the needed job, and take new gloves. That reduces the infection risk to a minimum.

INDIVIDUAL DEVICE PROTECTION OF AIRWAYS

Use mask to prevent transmission of respiratory diseases or/and diffusion of fluids



POSITIONAL ASPHYXIA SYNDROME



ASPHYXIA



DIAPHRAGMATIC BLOCKADE



AIRWAY PLUGGINS

DEFINITION

Positional asphyxia (or postural asphyxia) is a form of asphyxia which occurs when someone's position prevents him from breathing adequately.

A small but significant number of people die suddenly and without apparent reason during restraint by police, prison (corrections) officers and health care staff.

Positional asphyxia IS a factor in some of these deaths.

RISKS

If left in a prone position, even without weight being placed on the back, the persons own body weight can restrict breathing and cause death. Especially with overweighted people.

Pay particular attention to the transportation of persons who are handcuffed in this way.

After use of coercive measures (which mostly occurs on stomach), quickly remove the returnee from „stomach“ position to position on a side, on a back, or seated position.

THE RISK IS HEIGHTENED UNDER THE FOLLOWING CIRCUMSTANCES:

- The person is intoxicated with alcohol or drugs, or has a known history of substance abuse, particularly cocaine
- The person has recently been engaged in violent activity (such as fighting with police) and is suffering respiratory muscle fatigue
- The person is substantially over-weight
- There is some form of obstruction to or blockage of the airway
- The person is unconscious for whatever other reason

WARNING SIGNS

- Verbal complaints of being unable to breathe properly together with increased effort.
- A violent and noisy person suddenly changes to a passive quiet and tranquil demeanour
- Blue/Purple discoloration to facial skin: (this is difficult or impossible to see with very pigmented skin). Also unnatural white/pale color could be present
- Gurgling/gasping sounds/foam or mucus coming from the nose or mouth

WARNING SIGNS

- It **should be noted** that persons suffering breathing difficulties may not be able to complain about their discomfort!!!
- The problems experienced in trying to breathe will normally result in a physiological response of fighting for air and the subject may thus appear more aggressive.
- This could lead to the restraint pressure being increased, perpetuating the 'vicious circle'.
- Any increased resistance from a person lying in a prone or semi-prone position should be regarded with caution.
- If you remove to the “side” position and struggle stops, the lack of air was the cause.



REDUCING THE RISKS

- Once handcuffed, people should be raised to their feet, placed on a seat, or if violence continues, restrained in a recovery position. Never leave person laying on a stomach.
- Care should, however, be taken not to put pressure on the back as breathing can be restricted even if the person is placed in a recovery position. If needed, use pressure on joints, arms, bottom, legs, but generally avoid pressure on chest from behind.
- Monitoring the person's condition continually whilst being restrained, as death can occur suddenly and develop beyond the point of viable resuscitation within seconds rather than minutes
- Getting medical assistance immediately if there is any reason for concern about the person's condition. Better safe, than sorry.

2.5 CRITICAL MEDICAL SIGNS AND SYMPTOMS

- A Airway
- B Breathing
- C Circulation
- D Disability
- E Exposure

3 STAYING ABROAD

2.1 **Hygiene**, **Eat** only food on recommended closed places (restaurants, no street food) and **Drink** preferably only from closed bottles.

2.2 If in need of medical support in the country of destination, inform your colleagues!!!

3 STAYING ABROAD



Tourist boat kitchen

- HYGIENE, FOOD AND DRINKS
- Before you eat or drink wash your hands
 - Do not use ice cubes in your drink!
 - Only drink bottled water / carbonated soft drinks! Make sure the bottle is still sealed!
 - Even use bottled water for cleaning the teeth

HYGIENE, FOOD AND DRINKS

- Meat should always be well done!
- Do not eat raw sea food!
- Only eat well and freshly cooked food
- Avoid street food

HYGIENE, FOOD AND DRINKS

Boil it, cook it, peel it or forget it!

- Fresh salad, sauces and dressings can be problematic
- Be careful with eggs
- Avoid desserts containing cream
- Avoid non pasteurized milk/ice cream



IF IN NEED OF MEDICAL SUPPORT IN THE COUNTRY OF DESTINATION...



...CHECK:

- Is an (police/embassy/hotel) doctor available
- Language assistant / translator available
- Hygiene standards, level of healthcare
- Therapy / Treatment has to be paid
- HAVE A COLLEAGUE WITH YOU !!!!!!!



PSYCHOLOGICAL “STRESS” CONCERNING THE TEAM

- The most frequent factor of psychological stress is dissonance within the team
- Long lasting work without possibility of rest
- Diverge of expectations and pretences
- Necessity of improvisation
- Group dynamic
- Different languages

PSYCHOLOGICAL “STRESS” CONCERNING OPERATING CIRCUMSTANCES

Alteration of the
sleep-rest-
rhythm

Jet lag

Collision with
legal and social
standards

Alcohol and use
of medical
treatment

Lack of an area to
retreat

Posttraumatic
Stress Disorder
(PTSD)

PSYCHOLOGICAL “STRESS” CONCERNING PERSONAL FACTS

Witnessing of poverty, agony, chaos, violence

Boredom

Private problems (e. g.: family, economical...)

Dealing with vulnerable persons

HEALTH OBSERVATIONS

Diseases if you stay abroad some days and after immediate return in your country

Period of latency from weeks until months especially for malaria, vermin and sexual transmitted diseases

Continue malaria chemoprophylaxis if necessary

In all cases of a disease inform the doctor about your stay aboard

- the country
- the duration
- the purpose
- special circumstances
- pharmacological therapy



HEALTH OBSERVATIONS

If you develop

- fever
- unexplained fatigue
- diarrhea
- any other severe symptoms (e.g. vomiting, unexplained hemorrhage, severe headache) in the few weeks following return operations

SEEK RAPID MEDICAL ATTENTION