

Foreword



There is no doubt about the devastation and human suffering that weapons of mass destruction (WMD) can cause. This was quite evident with the use of chemicals during World War I, the nuclear detonations at Hiroshima and Nagasaki, and the sarin attack on the Tokyo subway system. We know that the psychological casualties from the actual or even potential use of a WMD can and will be enormous. An excellent example is the gas mania casualties from World War I; the soldiers truly believed that they were exposed to mustard agent and displayed sympathetic symptoms but were not exposed to the agent at all.

Future use of nuclear/radiological devices and biological and chemical agents as WMD will generate large numbers of “worried well” casualties. They will flood the medical system, asking to be evaluated and creating the potential for inadequate treatment for those who are physically injured and need immediate attention. The medical system may be paralyzed and helpless

unless it can quickly develop a way to separate the “worried well” from the injured. The goal of current medical research in the Department of Defense is to rapidly determine whether an individual has been exposed to radiation, a biological warfare agent, and/or a chemical agent and to what extent. This will not only allow the medical system to treat and manage the physically injured efficiently but also give tremendous comfort to the “worried well” that they are indeed healthy.

In addition, there will be victims who were not at the devastation site but had close friends and relatives who were casualties. They are psychological casualties also because of the significant impact on their lives and the significant disruption of their norm. While some may be able to reflect and adjust by themselves, others will need the assistance of professionals to quickly regain control of their lives while giving due respect to loved ones and close friends who were lost.

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Preface



The International Conference on the Operational Impact of Psychological Casualties from Weapons of Mass Destruction (WMD) had its genesis in conversations among the editors and Dr. Robert Young and LTC Charles Salter at the November 1999 International Conference on Low-Level Radiation Injury and Medical Countermeasures. At the Conference, in a special session, we each presented a paper on psychological aspects of irradiation. Consequently, during our conversations, LTC Carl Curling, the nuclear/biological/chemical consultant for the Army Surgeon General, indicated an interest in a meeting devoted to the larger subject of psychological effects of WMD. We realized then and now appreciate even more, after the terrorist attacks on September 11, 2001, that the psychological effects of WMD are a serious health threat that must be addressed in depth.

We pursued the matter with COL Robert Eng, Director of the Armed Forces Radiobiology Research Institute, who submitted a proposal to the Surgeon General's office. By January 2001, the concept was funded and the conference was scheduled for July, requiring a compressed planning process.

The members of the Organizing Committee, along with Dr. Fred Tyner, attracted an excellent and varied slate of speakers and session chairs. Joseph Andrews was invaluable for his administrative help and for keeping everything on track. MAJ David Hinkes, Maj William Slauson, and Maj Joseph Nelson kept the financial details under control.

Donna Solyan offered sage advice on publishing matters. Ira Levine managed the website, setting up a registration process in a very short time. CAPT Thomas Nunns and Charlotte Naschinski ably addressed the continuing education accreditation. Courtney Banks and Dr. Steven Becker contributed substantially to our development of the program.

Our appreciation is extended as well to each of our fellow session chairs for keeping the conference focused. Dr. Gregory Knudson and Dr. Michael Landauer chaired the session on The Threat and Medical Consequences of WMD; COL Ann Norwood and LTC Ross Pastel chaired Estimating Psychological Casualties from WMD; Dr. Steven Hursh chaired Modeling Psychological Casualties from WMD and Combat; Dr. James Martin chaired Addressing the Problem of "Worried Well" Individuals; Dr. Cleto DiGiovanni chaired Diagnosis and Treatment of Psychological Casualties from WMD; COL James Romano and Dr. James King chaired Crisis Management: Prevention, Risk Communication and the Media; and Courtney Banks and Dr. Steven Becker chaired Are Psychological Effects Addressed in the Federal Response Plan?

We thank as well the Hot-Wash Panel members Dr. James Zimble, RADM J. Jarrett Clinton, MG Marianne Mathewson-Chapman, RADM Robert F. Knouss, RADM Craig Quigley, Mr. Thomas M. Antush, Dr. John Clizbe, Dr. Kelley Ann Brix, Dr. Michael Kilpatrick (who filled in for the Honorable Bernard Rostker), and Mr. James Woodward for their excellent contributions.

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