

**What do nurses say about... ...the nursing implications of nuclear war? /
Medical Campaign Against Nuclear Weapons.**

Contributors

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What Do Nurses Say About . . .

. . . The Nursing Implications of Nuclear War?



A Working Party was set up by the Royal College of Nursing Council in 1982, on Nuclear War Civil Defence Planning – The Implications For Nursing. This consisted of 5 RCN members and was chaired by Mrs M.K.E. Morgan, then Deputy President of the RCN.

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The Bristol Simulation

Among other matters, the working party wanted to examine the devastation of a nuclear explosion and evaluate the outcome for NHS resources and nursing personnel. It looked at the effect of a one-megaton airburst over Bristol Bridge.

In the area 'totally destroyed' by the bomb were almost all the vital services for health, and included nearly all of the nurses' homes.

17 hospitals out of 25 were totally destroyed, leaving only 100 beds out of a total of 5000.

table 1

Before the attack: Adult Population	572,073	Hospital Beds	5,000
Number of Nurses	6,564		
After the attack: Killed	251,000	Hospital Beds	100
Injured	85,000		
Number of nurses surviving	328		

"i.e. 328 nurses to cope with 85,000 casualties in 100 hospital beds."
RCN Report 3.9

What are the effects of a nuclear attack?

Nuclear explosions produce heat, blast and radiation. These effects result in casualties with burns, trauma and radiation sickness (causing vomiting, diarrhoea, hair loss, convulsions and coma).

How many casualties would there be?

In 1980 an official NATO exercise 'Square Leg' simulated a 205 megaton attack on the U.K., and predicted the following figures. Scientific experts have challenged the Home Office figures.

table 2

Home Office Assessment	Effect	Scientific Assessment
None (assumes the entire population could take cover adequately)	BURNS	2½ million dead
8½ million dead	BLAST	13 million dead
2½ million dead	RADIATION	11 million dead
2 million	SEVERE INJURIES	6½ million
41 million	UNINJURED	21 million

The RCN Working Party thought the figures from scientific assessment were likely to be the more accurate. Even on the Home Office assessment there would be at least 2 million severely injured patients needing nursing

attention. This is equivalent to the entire population of Birmingham and Wolverhampton.

SO WHAT COULD A NURSE DO?

How can nurses help the burns victims?

"Given the enormous scale of the problem . . . planning for burns casualties is of little use.

Given the resources needed to care for one burns casualty in peacetime, how are we going to care for hundreds of thousands in war, when most resources will be destroyed . . . a surviving nurse . . . would have no drugs or dressings, or even clean water, and no other medical facilities. Advice on trying to keep the burn as clean as possible would be the practical limit of what the nurse could do."

RCN Report 2.17 & 2.18

How can nurses help the blast victims?

"There is nothing the nurse can do for the victims of blast except to offer comfort. To talk of planning for, and training in, triage and mass casualty techniques . . . is meaningless, as any surviving nurse could do nothing to assist."

RCN Report 2.29

How can nurses help the radiation sickness victims?

"There would be no way of assessing the absorbed dose of radiation . . . apart from watching the progress of the disease. The nurse . . . would have little to offer, apart from basic hygiene and words of comfort for the dying, as the disease ran its course with no hope of medical intervention."

RCN Report 4.11

What are the long-term effects of a nuclear attack?

INFECTIOUS DISEASES

RADIATION SICKNESS

CANCER AND BIRTH DEFECTS

PSYCHOLOGICAL TRAUMA

How can nurses help in the long term?

Teaching hygiene to the survivors will be her one major activity . . . WITHOUT the basic necessities of life, uncontaminated water, food, shelter and natural light.

WITHOUT the essential services that the 20th century has provided, such as good sanitation, communications and energy.

WITHOUT medical resources to treat the communicable diseases that will proliferate among the survivors.

WITHOUT a basic social structure.

"In such circumstances, of all the skills acquired by nurses, the special skills and insights gained through psychiatric training might be the most relevant."

RCN Report 7.3

And in conclusion – what can nurses do?

The study the Working Party undertook, and the evidence they received from professional experts, had a profound effect on the individual members, and they came to the conclusion that "the prevention of the use of nuclear weapons is infinitely preferable to planning for the aftermath of their use."

RCN Report 7.9

"As individual nurses, as inheritors of the past, and custodians of the future, we must strive, in accordance with our own consciences and beliefs, to ensure that nuclear war can never become a reality."

RCN Report 7.10

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