

Emergency physicians in war zones: roles, risks, and resilience

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Background: Emergency physicians deployed to conflict zones operate under extreme conditions that fundamentally expand their traditional clinical role. In active war settings, physicians must deliver high-acuity emergency care while simultaneously providing leadership, coordination, and operational stability.

Objective: To describe the evolving roles, risks, and resilience requirements of emergency physicians working in war zones, drawing on operational experience from the Emirati Field Hospital in Gaza.

Methods: This descriptive experience-based analysis examines the clinical, operational, and leadership responsibilities of emergency physicians deployed to a modern conflict environment. Observations were drawn from frontline emergency care, departmental leadership roles, resource management, and system-based practice within a deployed field hospital.

Results: Emergency physicians were required to manage complex trauma across all age groups, including blunt and penetrating injuries, blast trauma, burns, crush syndromes, and infectious disease presentations. Beyond clinical care, physicians frequently assumed leadership positions such as Emergency Department Officer, Chief Medical Officer, and, at times, overall hospital command. Operational challenges included resource scarcity, rotating multinational teams, security threats, and ethical dilemmas related to triage and allocation of limited life-saving interventions. Standardized bundled care protocols, simplified documentation systems, telemedicine support, and structured command frameworks were essential in maintaining care quality and operational continuity. Psychological resilience and peer support were critical in mitigating burnout and compassion fatigue under sustained mass-casualty conditions.

Conclusion: Emergency physicians in war zones function at the intersection of clinical medicine, leadership, and humanitarian service. Preparing physicians for these expanded roles through targeted training, leadership development, and resilience-building strategies is essential. The experience from Gaza highlights that well-prepared emergency physicians can provide not only lifesaving care but also stability, structure, and hope in conflict environments.

Keywords: Emergency medicine, conflict zone, physician roles.