

How the Wounded Return from America's Wars

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Theme: [US NATO War Agenda](#)

I often write essays that try to shed light on – and warn about – some of America's too-big-to-allow-them-to-fail (or even criticize) institutions that are often given undeserved respect. Wall Street, Big Pharma, Big Food, Big Chemistry, Big Agriculture, Big Medicine are some of my targets.

An equally important one is the US military, an institution that has been known to harass, prosecute, imprison and even execute its conscientious whistle-blowers and conscientious objectors to criminality who have tried, in the interest of truth and justice – to expose the secret international war crimes and corruption that they – as insiders – had witnessed. (Google and watch the banned 12 minute “Collateral Murder” video for just one particularly egregious example – made available thanks to Bradley Manning and WikiLeaks at <http://vimeo.com/63389575>.)

15 years ago the advertising budget just for Pentagon recruitment cost taxpayers \$8 billion per year (an item that has probably doubled or tripled by now). Those recruitment ads never mention the common, and often permanent – and often incurable – mental and physical health consequences of participating in war that therefore violate the “Truth in Advertising” laws in this country.

The pro-war propaganda that pervades American culture and media has been so thorough over the past half-century that average US citizens no longer seem to act the least bit concerned about blatant war atrocities – when they actually manage to hear about them. What may even be worse was that most citizens of most war-mongering nations (like Germany in the pre-Nazi and Nazi eras) didn't even want to hear about their military's dark underbelly. And the media usually were happy to not report anything that might shame its “uber-patriotic” war industries.

Today I offer an extended excerpt from a powerful and very sobering essay titled “A Trail of Tears”. It was written by author and women's rights activist Ann Jones and published earlier this month on TomDispatch.com. Her most recent book, from which, I believe, the following excerpt is taken, is titled, “They Were Soldiers: How the Wounded Return from America's Wars: The Untold Story” In 2010, Jones wrote a book about the costs of war on women. It was titled “War Is Not Over When It's Over: Women Speak Out from the Ruins of War”. Jones wrote an earlier book, entitled “Kabul in Winter” which, if read with an open mind, will

make even uber-patriotic “true believers” in American foreign policy cringe.

If America had any real interest in fully informed consent at the armed forces recruitment centers, Jones’ last book would be required reading – if not for the potential recruit, at least for the loved ones of any person who is thinking of enlisting. It could prevent a lot of misery, expensive war wounds, PTSD, TBIs, amputations, alcohol and drug addictions, suicidality, homicidality, permanent disabilities, broken marriages, under-employment, homelessness, chronic medical treatments and even criminality. Jones writes:

“In 2010, I began to follow U.S. soldiers down a long trail of waste and sorrow that led from the battle spaces of Afghanistan to the emergency room of the trauma hospital at Bagram Air Base, where their catastrophic wounds were surgically treated and their conditions stabilized. Then I accompanied some of them by cargo plane to Ramstein Air Base in Germany for more surgeries at Landstuhl Regional Medical Center, or LRMC (pronounced Larm-See), the largest American hospital outside the United States.

“Once stabilized again, those critical patients who survived would be taken by ambulance a short distance back to Ramstein, where a C-17 waited to fly them across the Atlantic to Dover Air Base in Delaware. There, tall, multilayered ambulances awaited the wounded for the last leg of their many-thousand-mile journey to Walter Reed Army Medical Center in Washington D.C. or the Naval Hospital at Bethesda, Maryland, where, depending upon their injuries, they might remain for a year or two, or more.

“Now, we are in Germany, halfway home. This evening, the ambulance from LRMC heading for the flight line at Ramstein will be full of critical-care patients, so I leave the hospital early and board the plane to watch the medical teams bring them aboard. They’ve done this drill many times a week since the start of the Afghan War. They are practiced, efficient, and fast, and so we are soon in the air again. This time, with a full load.

“Two rows of double bunks flank an aisle down the center of the C-17, all occupied by men tucked under homemade patchwork quilts emblazoned with flags and eagles, the handiwork of patriotic American women. Along the walls of the fuselage, on straight-backed seats of nylon mesh, sit the ambulatory casualties from the Contingency Aeromedical Staging Facility (CASF), the holding ward for noncritical patients just off the flight line at Ramstein.

“At the back of the plane, slung between stanchions, are four litters with critical care patients, and there among them is the same three-man CCAT (Critical Care Air Transport) team I accompanied on the flight from Afghanistan. They’ve been back and forth to Bagram again since then, but here they are in fresh brown insulated coveralls, clean shaven, calm, cordial, the doctor busy making notes on a clipboard, the nurse and the respiratory therapist checking the monitors and machines ...

“Here again is Marine Sergeant Wilkins, just as he was on the flight from Afghanistan: unconscious, sedated, intubated, and encased in a vacuum spine board. The doctor tells me that the staff at LRMC removed Wilkins’s breathing tube, but they had to put it back. He remains in cold storage, like some pod-person in a sci-fi film. You can hardly see him in there, inside the black plastic pod. You can’t determine if he is alive or dead without looking at the little needles on the dials of the machines...

Flight Risk

“The CCAT team has three other critical patients to think about. They are covered with white sheets and blankets, but it’s easy to see that the second patient is missing both legs. His right hand is swathed in thick bandages, almost as fat as a football. His face is ripped and torn so that his features appear to be not quite where they belong, but pushed up and to one side — his nose split and turned askew. He’s sedated and on a ventilator meant to assist his breathing, but his chest convulses as he struggles with the job.

“The respiratory therapist hovers, checking monitors, adjusting a breathing tube, and the man quiets. But not for long. The IED blast that took off both his legs above the knee bypassed his pelvis to slam into his chest. He must have been doubled over, crouching, when he walked onto the bomb. The impact damaged his lungs in ways not yet fully understood, so that now when he breathes on his own, every breath costs him more than he has to give.

“The CCAT team confers. To stop the convulsive effort to breathe, the doctor can paralyze him and let the ventilator do the work of respiration, but that means removing from his intestine the feeding tube pumping in the calories he needs to heal these catastrophic wounds. It’s a fine line, and the team walks it for the next hour until it’s clear the man needs rest more than nourishment. Then the doctor administers a drug, the body grows still as stone, and the soldier inside sleeps softly while the ventilator steadily breathes in and breathes out.

“Patient number three is breathing on his own and fast asleep, a saline drip feeding into his arm. He looks okay, but for the flattening of the blanket. He’s lost both legs, but both below the knee. He has his hands. He has his junk. Of these four patients, he’s the one the military and the media will call ‘lucky.’ But the doctor doesn’t call him that. He says, ‘You can’t assess his injuries in comparison to those of other soldiers who happen to be on the same plane. You have to assess them in comparison to who he was before.’ He is a boy who used to have legs and now he doesn’t.

Quadruple Amputee (two legs, one hand + genitals)

“The fourth CCAT patient is a darkly handsome kid who lost both legs to an IED. His right arm ends in a bulbous bandage, but something about its shape suggests the hand might still be all there. He’s conscious and breathing on his own, vaguely gazing at a thin woman in blond boots and a light jacket who stands next to his litter and clutches at the rail as if to hold herself upright.

“She was called to LRMC because her son was close to death, but she is now taking him home, what’s left of him, alive. In the dim light, she looks dazed, but she leans over him and speaks into his ear and soon he sleeps. The doctor tells me that the boy, a Marine, lost one leg below the knee, and the other very high up — too high for him to wear a prosthetic leg.

“‘He’ll be in a wheel chair,’ the doctor says. ‘It’s doubtful he’ll ever walk. His right arm is all there, but the hand is blasted. He’ll probably lose his fingers at

least, but he may have enough of a hand left to power a wheel chair on his own. It's hard to say. He lost one testicle, too, and part of the penis and urethra. But he could still be fertile. There's a chance.'

Boys don't know any better

"An older Army officer calls me over and gestures toward the empty seat by his side. He sits ramrod straight, wrapped in his blanket, and speaks through tight lips as if he fears what might come out of his mouth. 'I've been in the Army twenty-six years,' he says, 'and I can tell you it's a con.'

"He doesn't think much of military bosses or politicians or Americans in general who send the lowliest 1% to fight wars that make the other 1%, on the high end, 'monu-fuckin-mentally rich.'

"He says he's going home for 'psych reasons' caused by 'life,' and he is never going to deploy again. He has two sons, 21 and 23, in college, 'They won't have to serve,' he says. 'Before that happens, I'll shoot them myself.'

"I ask if he has any particular reason to dislike the military so intensely. 'War is absurd,' he says. 'Boys don't know any better. But for a grown man to be trapped in stupid wars — it's embarrassing, it's humiliating, it's absurd.'"

And here are some reader comments about this Tom Dispatch essay.

1) "...Military bosses or politicians or Americans in general who send the lowliest 1% to fight wars that make the other 1%, on the high end " IS the agenda of the 1%.The 1% make, KEEP the poor desperate so they join the armed forces....What the real "threat" to the 1% is, is that "subversives" may cause the 1% to realize that they, the 1%, are emotionally lacking in meaning in their lives, because all the 1% lives for is money, fame, power. If the 1% ever realised how EMOTIONALLY impoverished all their money, fame & power makes them, they, the 1%, might seek alternatives to their limited emotional existence!

2) Meanwhile the General Public is kept from knowing this dreadful situation and the Department of Defense (War) and Veterans Admin aren't talking; in fact JUST TODAY Chuck Hagel announced that veterans are going to

have to “make sacrifices” due to budget restraints. ARE YOU KIDDING ME!?? And then you have these ignoramASS Teaparty types who are all “whoo hoo, hoorah! yay war!”. I have never in all my life seen people support policies that work so much against their own best interests. The absolute dumbing down of America. We must actively DISSUADE young boys from joining the military...one way to do it would be to take them to Walter Reed or Bethesda...

3) A sad tale, very sad. But just how many stories have there been of the 500,000+ innocent Iraqi civilians who were killed, of the hundreds of thousands who were injured and did not have the facilities to help them as these men have, and the millions who fled their homes to escape the fury of an illegal war. Who feels sorry and writes about them? Not to mention the millions still alive and trying to live in a broken society – just because our grand and glorious leaders wanted retribution for the 9/11 fake terrorist attack... I wonder if the American people will ever pull the wool from over their eyes and start acting like decent human beings and rein in the empire builders so we can, once again, stand tall.
I wonder...

4) It is hard to feel any sympathy for soldiers. Why can't the military take care of its own messes? The generals in the Pentagon with all the medals on their chests should be marched out into the parking lot and hanged. They are the cause. When they actually do something to help the people they have destroyed, then the rest of us can begin to care.

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