

Introduction: *This account is an edited version of an email written, by Steven, to his friends and family about what happened to him in Afghanistan and subsequent events on his road back to recovery. At Steven's request certain names and details have been deleted for security reasons. This in no way detracts from the story and I must*

For those of you who are unaware, I am/was a company commander (Officer in charge) (unit ID deleted) of approx 175 personnel (mainly marines) based in the Northern half of the Nad e Ali district of Helmand Province. Amongst many other things, the company was responsible for providing security to the local population by manning a number of Check Points (CPs) or Patrol Bases (PBs) from which we patrolled from.

I was also able to release manpower from the CPs to conduct discrete helicopter and ground assault operations in order to disrupt the insurgents' (Taliban) freedom of movement inside and outside of my company's area of responsibility. It was during one of these discrete operations that I was injured.

I cannot go into great detail of the operation, named Operation OMID HAFT, for obvious security reasons, however my company was basically tasked to fly into an area where they had been no ISAF troops. I deployed with 100 personnel and our role was to establish a temporary PB three days ahead of the rest of the brigade in order to ease the pressure on the rest of the forces involved when they inserted. This would be done by drawing the insurgents towards our location, disrupting their movements and neutralising them. Within hours of inserting by helicopters and establishing a PB in a large compound we came under attack from multiple firing points. The attacks continued throughout the day and we took three casualties during an evening attack. Fortunately they were only minor shrapnel wounds and they were flown to the Military Hospital at Camp Bastion; they were soon released and actually flown back out to the PB two days later.

Once we had established defences and a routine in the PB, the following days were spent conducting fighting patrols in order to neutralise the threat from the insurgents. This type of patrol is inherently dangerous, but it was one of our tasks and what we are trained to do - the lads were extremely professional. It was during these patrols over a number of days that we sustained casualties. Lance Corporal (name deleted) was shot in the chest on day 4, then Lieutenant (name deleted) one of my Troop Commanders and Marine (name deleted) were tragically killed by an Improvised Explosive Device (IED) the following day. In the same incident, Marine (name deleted)

thank Steven for giving me his kind permission to publish this in "The Mainsheet". It is a unique insight into the hazards faced by our troops every day in Afghanistan.

Mike Baker

my Medic, lost his lower right leg, Lance Corporal (name deleted) had his arms severely injured (most of his left hand and his right forearm, including elbow, were blown away) and their Afghan interpreter was also severely injured; he tragically died from his wounds a few days later in the military hospital. This was a dreadful day, but I was incredibly impressed by the way in which everyone dealt with the situation.

Our task had to continue, so the next day we were on patrol again. It was eerily quiet and in hindsight I assess that we were clearly being watched to see how we were operating. It was whilst I was crossing an irrigation ditch that I was hit by a Directional Fragmentation Charge (DFC) IED that was initiated by a command wire i.e. someone triggered it specifically. These types of IEDs are located in the sides of walls and ditches in order to harm the upper body, compared with traditional IEDs in the ground which cause traumatic amputations. Command wire IEDs are generally used to target specific people (generally commanders) and it would have been relatively easy for them to work out who I was from watching us and the fact I was carrying a radio with a large antenna to ensure constant communication. I have also since learnt that later that day our HQ intercepted Taliban radio communications that stated they had "killed the commander"!!! Thankfully they were wrong, although I was clearly in a bad way and my Fire Support Team Commander (name deleted), who was behind me, also had severe shrapnel injuries to the rear of his lower legs.

As for my injuries, I took shrapnel to the lower right leg, the right knee (which also took a double fracture), upper right thigh (large hole), right hand, forearm, bicep, neck and head. The serious injury, however, was the large hole in the right hand side of my chest. The shrapnel had fractured my ribs on the right and punctured my right lung, which filled from the inside with blood and the outside with Afghan ditch water! The lads with me were amazing and performed battlefield first aid to plug holes and stem bleeding - I can still vividly remember it all!

The Medical Emergency Response Team (MERT) helicopter picked me up within 30 minutes and I pleaded with them to put me to sleep due to the pain, which they promptly did.

My last memory of Afghanistan was a surgeon looking over me and saying "You're in Bastion and you're going to be alright." The procedure of waking someone in Bastion is apparently now routine so that personnel with traumatic injuries have points from which to rebuild their memories.

Previously, personnel would have been sedated on the MERT and potentially woken up weeks later in Birmingham, which was deemed to be one of the causes of Post-Traumatic Stress Disorder (PTSD). Anyway, in Bastion they removed pretty much all the shrapnel from my limbs and cut me open (from the back) in order to flush out my lung – a nasty operation called an emergency thoracotomy. This was apparently pretty successful, although CT scans showed that there were three pieces of shrapnel between 5-10mm in diameter still in my lung. The decision was that they would be left for the time being in order for the surgeons at Birmingham to decide what to do as it would involve removing my lung. I was kept sedated in Bastion for a day whilst they awaited for the Critical Care Air Support Team (C-CAST) aeroplane to fly out from the UK to collect me and fly me back to Birmingham. I have a recollection of the surgeons in QE Hospital waking me and telling me I was in Birmingham, and that I was going to be alright, although at the time I did not believe them; in my mind it turned into what was the first of many horrific hallucinations over the next two and half weeks.

I spent the next few weeks sedated, on numerous machines, in intensive care; apparently, I was the No.1 critical patient in intensive care - I probably shouldn't be boasting. My wife (name deleted) and the consultants have been great at informing me of what occurred during that period, suffice to say it was pretty harrowing for her and she has been incredible.

The first big decision was that they would leave the three pieces of shrapnel in my lung for the time being and see how I reacted. The reason being two-fold: it would have meant cutting out my lung, but also one of the pieces is only a few mm from my aorta, which would have complicated the op further. In the first week I had a bleed in the lung, but they did not know where from, so I had to have an angiogram. They couldn't find it, so the consultants made the decision to put me on an oscillator rather than a ventilator as my lung was not healing.

Note: I have since learnt that a ventilator inflates and deflates the lung, so it was difficult for my right lung to sort itself out. An oscillator pumps the equivalent of 5 breaths a second into the lungs, so they remain at a constant pressure and do not inflate/deflate. My wife told me it was a noisy and rather violent machine, but I guess it did the trick as they tried to wake me after a week.

Unfortunately I only lasted a few hours before having to be sedated again, but this time put back on a ventilator.

They tried to wake me and remove the ventilator after the second week, but again I only lasted a few hours before having to be put back on it.

After this attempt they decided to give me a tracheotomy (cut open my neck in order to insert a plastic tube into my windpipe). The aim being that I could be awake whilst oxygen was pumped into my lungs via the pipe in my neck in order to assist. They woke me the third week and thankfully it worked. I remained on intensive care and the next week is a bit of a blur, but the consultants tell me that I started to make a miraculous recovery. During the 3rd/4th week I had pretty much all the drains, tubes, lines etc removed and was left with a feeding line through my nose into my stomach and a vacuum pump dressing on my chest and thigh holes. I was then moved to the military-run ward.

On the ward I was able to leave my bed on crutches and I could visit the other injured military personnel, including (name deleted) and (name deleted) (two of my guys that were injured the day before me). My wife also brought my children to visit, which was great as I hadn't seen them for 3 months. After 10 days on the ward I was amazed to be told that I would be discharged home for 2 weeks' sick leave before joining Headley Court, the Defence Rehab Centre in Surrey. All my stitches and the vacuum dressings were removed and I was left with 4 or 5 dressings on the large shrapnel wounds.

I am still in a bit of pain (specifically my ribs), don't sleep very well and constantly feel ill, but it's great to be home and I am slowly becoming more mobile. I'm having my dressings changed every other day and I start at Headley in just over a week. The three pieces of shrapnel in my lung have been left in there and it is hoped that they will slowly be covered in scar tissue and become part of my body. I will have to attend check-ups every six weeks at Birmingham for the next year in order to track any movement. Unfortunately it is a risk that I will have to live with for the rest of my life - at least I have my life I suppose!

Anyway, that's about it. I'd like to say a massive thanks for all your support, whether it be messages, texts, phone calls, cards or visits. It has been rather overwhelming and I appreciate all the words of encouragement. I would also like to thank those family and friends who gave up their time to be by my bedside and help look after my children whilst my wife was with me. I am indebted to you.

Steven