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Rejection by hospitals compo unds agony of gunshot victims

FEBRUARY 20, 2014 BY BUKOLA ADEBAYO 2 COMMENTS



Gunshot victims

Bukola Adebayo relates deadly hurdles that gunshot victims have to cross to get treatment in hospitals

Before the October 9, 2013 incident, Vincent Olatunde had never imagined for once that he could be shot, much less right in front of his house. But that was exactly what happened when some hoodlums invaded his neighbourhood, leaving a trail of tears and blood in their wake.

Not only had he lived in Bariga for two decades, he was also well known for his activism and usual confrontation with authorities as he advocated improvement in the standards of living in the area.

Shot in broad daylight

Olatunde, who related the incident to our correspondent at his new residence in Gbagada on Friday, said though he realised that he had stepped on some toes, he did not expect to be so attacked in broad daylight.

He says, "I left for the office very early in the day and returned in the afternoon for a nap at home. I was about entering my street when I noticed that some hoodlums had gathered around and were surveying the neighbourhood.

"It looked as if they were on a mission to wreak havoc somewhere. I wanted to call the police, but a neighbour stopped me. Out of nowhere, they brought out their guns, jumped on bikes and started shooting. Three of them pursued me into the house, while others were shooting outside. I tried to scale the fence, but I couldn't. The next thing I saw was blood gushing out of my hand. It was then I realised that I had been shot."

'Sorry, no experts here'

Getting shot was devastating enough for Olatunde, but the real dilemma played out when he was taken to the General Hospital in Somolu, Bariga, Lagos. Though there were nurses and three doctors on duty that afternoon, they offered a rather lame excuse for not attending to the bleeding man. Indeed, they quickly referred the patient to the Lagos State University Teaching Hospital, Idi-Araba.

Olatunde narrates, "The doctor on duty said they could not treat me because they did not have a specialist that could treat a gunshot wound. They said they could only offer first aid treatment which should sustain me till I reached LASUTH."

No bed space either



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Columnists



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Considering the fact that the Lagos State University Teaching Hospital, Ikeja, is closer than LUTH, a friend took Olatunde there. Things didn't go as planned either. At the Medical Emergency in LASUTH, he was also rejected due to alleged lack of bed spaces. The authorities informed him that all the beds had been occupied by victims of a plane crash that occurred that same day. Again, he didn't get any medical assistance that his near-mortal wound demanded.

"They told me to look for a general hospital, as all hands were on deck trying to save the survivours of the plane crash that occurred that day that was the plane carrying the corpse of Ondo State former Governor Olusegun Agagu."

Obtain police report, or...

They referred him to the nearby lkeja General Hospital where the doctors also refused to treat him. This time, they said he must obtain a police report explaining the wherewithal of his wound.

"Although I was bleeding all over and the floor was covered in my blood even as I writhing in indescribable pains, the doctors said they could not treat me if I did not provide a police report. When we saw that they wouldn't accept our plea, my friend had to go back to Somolu Police Station to get the document."

While Olatunde is lucky to be alive to tell his near-death experience, it's not the case for 50-year- old former Assistant Editor of *Newswatch*, Mr. Toyin Obadina, and 34-year-old Sunday Obunnekwe, who were shot in Ikorodu and Gbagada respectively in January.

Obadina was on his way home after a rigorous day at work when gunmen in two Sport Utility Vehicles shot at him on Parafa Street, Imota Road, Ikorodu, Lagos State.

Though he was shot twice in the stomach, the father of three did not die on the spot. Relating the events of that day to *The PUNCH*, Biola, his widow, says, "He told us he was shot in the stomach and when he attempted to run, one of the assailants shot him in the stomach a second time before they fled.

He survived the surgery, but...

"My neighbour and I rushed him to Ikorodu General Hospital. On getting there, we were told that the case was severe and that they could not handle it. We took him to the Gbagada General Hospital where we were also told that the case was also too severe for their expertise. We finally took him to LASUTH," the grief-stricken woman explains.

Biola says despite the fact that they were conveying him from one end of Lagos to the other, Obadina remained conscious and was engaged in conversations with her. And though he came out of the surgery alive, Obadina passed away in the early hours of the following day.

Many are of the opinion that events that played out after the attack might have contributed to his death.

Rejected by three hospitals

Similarly, Sunday Obunneke, a trader who was shot in the stomach at Brown Bus Stop in Oshodi, Lagos, last year, was likely to have survived if he was not denied treatment by three hospitals that day.

His fellow traders rushed him to LUTH after fruitless efforts to get doctors to treat him at two private and one general hospitals in the area. He died in his pool of blood at the back seat of the car while he was about to be admitted into the Accidents & Emergency Unit of the tertiary hospital.

The tragic experiences of Obadina and Obunneke aptly describe the fate of many people that have been shot in the country. Indeed, the chances of dying of a gunshot wound in Nigeria are high, according to experts. A gunshot injury should be treated as an emergency that it is, but the reverse is often the case in the country. But it turns out that the trauma of gunshot victims is usually not necessarily from their injuries but mainly due to the delay they face when trying to access help.

III-equipped emergency units

The poor state of emergency services, lack of experts to treat gunshot wounds even in the nation's secondary and tertiary hospitals, and the caveat of presentation of a police report, are factors that jeopardise victims' survival.

When this happens, relatives and sympathisers would continue to whisk victims who have been shot from one hospital to the other in search of a sympathetic ear. While about four out of five people who have been shot in places other than the head survive in the United States of America and many countries in Europe, it is estimated that only one out of five gunshot victims survive in Nigeria.

For some hospitals, a gunshot injury is too complicated and expensive a wound to treat. So, they don't even



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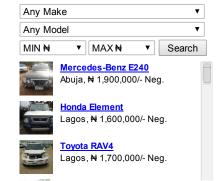


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bother to attend to victims. Others fear that accepting victims of gunshot could be an open invitation to the police to invade their clinics; while others fear that accepting gunshot victims in their hospitals may shoot up their mortality rate should the patient die in the course of treatment.

Minister, IG's orders rejected

Though the Minister of Health, Prof. Onyebuchi Chukwu, and the Inspector General of Police, Mr. Mohammed Abubakar, have, at different times, threatened to sanction hospitals that reject gunshots victims, investigation by our correspondent reveals that the situation remains the same.

Hospitals that agree to offer medical services to these victims still insist that they produce a report from the police in the jurisdiction where the victim was shot.

As a result, many victims have died at the doorsteps of hospitals while their sympathisers rushed around to obtain police report.

Consider the case of 30-year-old Sunkanmi Lawal, an undergraduate who was shot in the chest by cultists who were on the rampage in Somolu, Lagos. Lawal's sister, Shakirat, who was with him till he drew his last breath, told our correspondent that the young man was rejected by three hospitals.

She says, "The two hospitals we took him to refused to even give him a first aid. They said they would not touch him until we produced a police report. We pleaded with them to commence treatment while we went for the document, but they refused. Before leaving for the third hospital, our uncle left for the police station to get a report."

Lawal's uncle, who spoke on condition of anonymity for security reasons, says the police also delayed the issuance of the report.

"They said they wouldn't issue it without the DPO's approval; yet, the DPO was not in the office that afternoon. After about an hour, it became obvious that the DPO was not returning to the station soon. I pleaded with the policeman attending to me to use his initiative.

"Reluctantly, he agreed to go with me to the hospital to identify the victim if I could 'mobilise' him financially. I gave him all the N5,000 that was on me and we left for the hospital. But Lawal died in the hospital while the police were still in the process of confirming his identity," the uncle relates.

Enter the traditional healers

It was a traditional healer that removed the 10 pellets that were lodged in Jumoke Adeniji's arm when she was shot on her way from office in Victoria Island last May.

Asked why she opted for such unconventional means, Adeniji, who spoke to our correspondent on Tuesday, says her parents had to take her to the native doctor after she was rejected by two general hospitals on the night of the incident.

She said, "I was shot around 10p.m. in front of my gate. My mum rushed me to two general hospitals immediately, but they insisted on obtaining a police report before they would commence treatment. It was almost 12 midnight and those that went to get report at the station said the police was still questioning them

"I was conscious, but the pain was unbearable. A family member eventually took us to a native doctor on our street. I had fainted by then, so I wasn't aware of anything. But when I woke up the next day, I was told that I was lucky, as 10 pellets were extracted from my arm. I would have died if I had continued to wait for a police report."

Police exploitation

Victims and their relatives have accused the police of exploiting such cases; while they also blame doctors for failing to uphold the Hippocratic Oath they had swore to.

But in defence of the doctors, the Chairman, Lagos State Chapter of the Association of General and Private Medical Practitioners of Nigeria, Dr. Adeyeye Arigbagbuwo, says although there is no law that forbids private hospitals from treating gunshot victims, many would steer clear of such cases due to the police involvement and the risks involved.

He says, "Yes, we are trained to save lives and the cause of the injury is irrelevant. In an ideal situation, the doctor should treat, while the hospital reports to the police. The police are supposed to identify the victim at the hospital, and provide protection for the hospital while the patient is in the premises."

Follow procedure, court trouble



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"But that is not the case in Nigeria. When you follow the procedure, you get into trouble. When the hospital official or the relative goes to the police station to report, the police will say they don't have exercise books to write the statement or fuel in their van to come and identify the patient. You won't get anything done till you give them a bribe for all of that.

"If you refuse, they may implicate you and build a case against you for treating a gunshot victim without a police report. And if anything happens to that patient, they will turn round to claim that since he is a suspect, you shouldn't have treated him. If the patient dies because of delay on their part, they may accuse you of being incompetent and start assaulting the doctor."

Arigbagbuwo notes that another reason why hospitals which have the expertise reject gunshot victims are the risks it poses to the life of the doctor and patients in the hospital.

Weighing the options

He says, "We have had cases where doctors treated armed robbers or cultists and the police discharged their duties by protecting the hospital. But a few days after the police had left, the rival gang launched an attack on the hospital, killing workers and injuring patients.

"This is a country where there is hardly no justice for anybody. If an Attorney-General could be shot and his killers not found till date, what justice is there for the doctor? A private hospital weighs all these risks before it starts treatment."

Often, gunshot victims get respite in tertiary hospitals, which already have an overload of patients in critical conditions. The Chief Medical Director, Lagos University Teaching Hospital, Idi-Araba, Prof. Akin Osibogun, told our correspondent that this is so because government hospitals have better jurisdiction to handle such cases.

He says, "As a government hospital, we have the time to spare and qualified officials that can handle police enquires about gunshot and legal cases. Private hospitals do not have that and we don't expect them to spend all their time responding to police queries.

"Before now, the hospital must report before it commenced treatment; but now, we can treat and report while doing so. But even at that, it is not easy for a private hospital."

Osibogun also notes that many public and private secondary health facilities lack specialists that can handle such cases.

He says, "It is not all hospitals that can operate on a bullet to the chest or head. It depends on where the bullet hit. So, there will be some cases that our private and general hospitals cannot handle. Some general hospitals may have general surgeons but they may not have cardio-thoracic or neuro-surgeon.

"It is a teaching hospital that can readily have such expertise. But it is a lot of workload on us. There is the need for Nigeria to have private hospitals with tertiary capacities. We cannot do it alone. Abroad, private hospitals are the biggest and best hospitals to handle specialised and complex cases."

Police offers defence

Speaking on why the police must always be involved in such cases, and responding to allegations of exploitation levied against them by victims and relatives, the Police Public Relations Officer, Lagos Command, Ms. Ngozi Braide, says gunshot cases should be "incidented with the law" in order to assist the police in carrying out further investigations on the circumstances that led to the shooting.

She explains, "We frown at hospitals treating without informing the police first or after because it may just be an armed robber or a cultist who had sustained an injury. It should not be concealed, because the victim can shed more light on the situation.

"When a doctor treats and discharges without informing us, we cannot carry out investigations to a reasonable conclusion.

"Therefore, when such happens, relatives and sympathisers should rush them to the general hospital in the area and also report to the police, so that the law can take its course."

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