

# U.S. Army Doctors Begin Lifesaving Procedures on 8-Month-Old Iraqi Baby

Tuesday, 26 February 2008



**Zainab Najy holds her daughter, Noor, at the Forward Operating Base Delta medical facility before the infant had a procedure to rectify her prolapsed rectum. The 8-month-old was born with eight inches of her rectum outside of her body and with bladder exstrophy. Noor received the first of three treatments to repair her rectum, Feb. 8. Photo by Sgt. 1st Class Stacy Niles, Multi-National Division-Central.**

**FOB DELTA** — U.S. military doctors recently began the process of treating a potentially life-threatening condition for Noor, an 8-month-old Iraqi baby girl.

Doctors from the 948th Forward Surgical Team (FST), from Shelbyville, Ind., performed the first of three procedures to reverse Noor's prolapsed rectum. The procedure involved manually reducing the swelling in the rectum and manipulating it back inside the body.

Once the rectum returned to its normal location, the area around the rectum was injected with a highly-concentrated dextrose solution. The solution causes scarring that will keep the rectum in its normal position, said Col. Robert Monson, from Provo, Utah, the 948th FST commander.

Baby Noor was born with eight inches of her rectum outside of her body, and bladder exstrophy, a rare congenital disease in which the bladder opens on the abdominal wall;

it occurs once in every 30,000 births.

Surgery to repair bladder exstrophy is usually performed within 48 hours after birth. Separation of the pelvic bones also accompanies the condition and can complicate the repair.

The prolapsed rectum had begun to lose its blood supply; if left untreated, the rectum could perforate, resulting in death. The bladder exstrophy can progress to bladder cancer, said Lt. Col. Paul Brisson, an Albany, N.Y. native, general and pediatric surgeon with the 948th FST. Both conditions are rare in the U.S., said Brisson, and the causes are unknown.

“She is healthy other than these two problems,” Brisson said. “Her prognosis could be excellent if we fix these problems, but if we don’t there is a good chance she will die of cancer or infection.”

“We can fix the rectum here safely, but we do not have the resources for the bladder surgery,” Brisson said, adding he is trying to locate an urologist in Baghdad to repair the bladder exstrophy.

On the morning of her procedure, Brisson noted a change in the color of the rectum that he said indicated a reduction in blood flow to the area, making the procedure urgent.

Noor was not treated earlier because the doctors in the province lacked equipment to perform the surgery, said Neseer Jemeel, Noor’s father. Jemeel brought her to Coalition forces because he heard they cared about children.

“It’s hard to describe how I feel and how happy I am,” he said about Noor receiving treatment from the military doctors.

The day of her procedure both parents were a bit apprehensive about the procedure.

“I have mixed feelings,” said Zainab Najy, Noor’s mother. “I am worried because this is my baby, but I recognize they have the knowledge and are capable of doing the procedure safely.

“This is the solution for one of two problems,” she said. “I will definitely be happy to have the problem fixed, but I am still worried about the other...I hope they will do something about her bladder.”

Jemeel was concerned, but confident in the care Noor would receive. “I also worry about her because she is my baby, but I am sure she is in good hands and will be taken care of,” he said.

(Story by Sgt. 1st Class Stacy Niles, 214th Fires Brigade Public Affairs Office)