

## Review

# The World Trade Center Attack

## Eye witness: observations of a physician on the outside looking in

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### Abstract

Having personally witnessed the destruction at the World Trade Center on 11 September 2001, this paper presents my personal feelings and observations as an observer of both disaster and terror. Aside from the unimaginable horror as a result of the carnage, a feeling of helplessness was particularly prominent due to the inability to be able to care for casualties since most victims were fatalities. The passage of time has enabled a return to normalcy, however 'normalcy' carries a new definition due to the vastness of the tragedy and the sudden threat of bioterrorism and other weapons of mass destruction.

**Keywords** terrorism

During his historic trip to West Berlin in the early 1960s, John Fitzgerald Kennedy stated that the plight of the citizens of West Berlin was the plight of the world and, as such, we had all become Berliners. In that vein, we all became New Yorkers on 11 September 2001. We also became Washingtonians, Virginians, Pennsylvanians, Bostonians, San Franciscans, and Los Angelenos. In short, we had all become connected as victims.

### A personal chronology

I saw the events of 11 September 2001 unfold. Perhaps one day, a better wordsmith than I will coin the superlative that will capture the collective numbness that overcame us all. For me, amidst the relative comfort afforded by the edgy passage of time that facilitates a more thoughtful retrospect, one thought that seems to have been particularly predominant on that day was one of helplessness. Like so many other physicians and other health care professionals, I was paralyzed knowing that I was unable to give help and comfort in the ways in which I was trained. That sentiment was driven home during the evening of 11 September 2001 when the hospital at which I work (a tertiary care institution in an outlying borough), after gearing up for the carnage and after receiving a few victims with 'lesser' injuries, downgraded its disaster status to a lesser degree of readiness. This occurred because most of the resources and efforts would be redirected towards morgue and clean-up duty.

Everyone will remember what he/she was doing on 11 September 2001. It seems almost cliché to claim that the day began innocently enough, but for me that sentiment is true. It was the first day of the class I teach at medical school and, as such, I was afforded the restful luxury of sleeping in, and even drove my son to his school. From a weather standpoint, it was about as comfortable and clear as a September day in New York can be. In fact, it was the type of day that afforded an unimpeded view of the entire Manhattan skyline from a few select vantage points. Usually, this is something that I enjoy.

At approximately 08:45, I noticed smoke seemed to be coming from one of the towers of the World Trade Center. My first thought suggested this was merely a power plant smoke stack that I had not previously noticed. I quickly learned otherwise from the radio. A few minutes later, I nervously crossed the Throg's Neck Bridge from Long Island to the Bronx, a venue that affords an even clearer and more expansive view of the entire skyline. I looked to my left and saw the plume of smoke and then, as 'rubberneckers' slowed traffic, gawking in disbelief, I witnessed and heard the fireball erupt from the second tower as the second hijacked plane struck. I doubt that this vision will ever leave me.

Shortly thereafter, arriving at the medical school, others and myself watched from a high-rise departmental office as the

towers successively collapsed. Since our view was several miles north, it took a few minutes to confirm what we had all suspected and the minutes in between were spent in ashen horror asking one another whether any semblance of a structure still stood behind the smoke. The next few hours melted into an emotional blur, fueled by the local and national news descriptions, along with the personal uncertainties of locations of loved ones, families, and barely comprehending the carnage before our eyes. For me, once the safety of my wife and son were confirmed, I knew that I had to get to my hospital and pitch in if needed.

When word was received that some bridges and roadways had reopened several hours later, I began the drive to the hospital, making sure that I had a full tank of gas and a bottle or two of water in view of the probable traffic, detours, and closings. The usual 45 min drive took longer than 3 hours because of all of the diversions. This was expedited only by producing my physician's identification badge, allowing me to proceed on roads that were otherwise closed. This route had a clear view of the Manhattan skyline, a ghastly caricature of its former glory. The air also bore an acrid flavor as smoke covered much of the sky like an eerie cloud.

### Reflections and impressions

A few facts about the events and the overall state of mind among health care workers throughout the city merit mention.

We all tried to offer assistance wherever and whenever we could, not only in our own institutions but also at hospitals and centers close to the carnage. However, we were all personally jittery and nervous. We knew we would eventually go home to find out about the death of friends, neighbors, acquaintances, colleagues, and perhaps even family members who were likely to have been in or near the World Trade Center. And we were right.

More than 1 month since the attack, people still talk about funerals and memorials that they have attended, cars that remained parked at train stations for several days, and offices destroyed and people displaced. Thankfully, we also hear stories about people who did not go to work on 11 September because they did not feel well, they overslept, or they otherwise had reason to rightfully claim providence. General conversation is now punctuated by a greater sense of sincerity that goes beyond the usual perfunctory greetings. When we ask someone 'how are you?' we truly want to know 'how they are'.

Like many parents in town, I took my son to school the next day and walked him to class, not only to find out how his teachers would approach the events, but also to see if parents, friends, or others in his school had become victims. I am sure that this was repeated all across the metropolitan area and beyond.

The case mix in my hospital's emergency room returned to 'usual' on 12 September 2001. My colleagues and I passion-

ately wished that this was not so because if more had survived, our medical skills would have been needed.

### Conclusion

It is over 1 month since the World Trade Center towers were destroyed, and life in New York and elsewhere has returned to some semblance of normalcy. We remain cognizant, however, that the term 'normalcy' now has a new definition, although it rests on a new platform and possesses an altered frame of reference. From my standpoint, I live and work on the periphery of 'ground zero'. Yet it is a periphery that stands all too close to the site of the carnage and terror.

From a medical perspective, I realize we must now begin to focus on practical aspects related to the events and medical preparedness, including the logistics of emergency response and communication, uninjured bystander first aid response, application of trauma algorithms in the field, the realities of disaster triage, and delayed traumatic injury treatment. The need has further hit home to focus on the emerging yet suddenly real potential threats of bioterrorism, chemical attacks, and other weapons of mass destruction. I know that these are things we must now consider, but the smoke has not fully cleared from my memory of 11 September 2001 as I look towards the southern Manhattan skyline that now stands forever changed, and us with it.

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### Competing interests

None declared.

### Acknowledgement

This article, and the series it is part of, is dedicated to the first responders – fire, police and medical personnel – who attended the World Trade Center disaster of 11 September 2001. They did not hesitate to place themselves in harm's way to rescue the innocent, and without their efforts many more would have perished. They will not be forgotten.