

Australian Tactical Medical Association and the Journal of High Threat & Austere Medicine: A joint initiative to progress a niche subspecialty of medicine.

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This year sees the launch of the official journal of the Australian Tactical Medical Association (ATMA), the Journal of High Threat and Austere Medicine (JHTAM). This initiative is a significant achievement in the progression of high threat medicine in Australia and builds upon the success of the past 18 months.

Whilst 'Tactical Medicine' conjures in the minds of the uninformed ideas of black clad specialists in body armour, JHTAM and ATMA actually encompass and represent a wide range of applications of first aid and medicine. The crossover between all these applications is significant, and collaboration will only allow for a larger evidence base to draw from, as well as opening communication channels and starting conversations that enable greater and more cohesive response capacity in wilderness, expedition, prehospital, tactical, military and austere applications.

The crossover between these fields is well recognised on the ground by practitioners, and academia has begun to establish the

same link.¹⁻³ JHTAM will bring together these fields, recognising the common element of threat. Whether it is cold, distance, gunmen, opposing military forces, hostile environs or a combination of all, high threat and austere medicine predicates treatment on the level of threat and often medicine becomes a secondary or concurrent consideration to the mission and logistics.

The asymmetric nature of this field therefore makes it hard to define and even harder to provide a robust evidence base for. In the face of complexity and difficulty, we must rise to the challenge and find adapted ways to still collate evidence and apply best practice.

Prior to 2017, the state of high threat and austere medicine in Australia was strong but fragmented, with many identified capability gaps.⁴ Individual lines of effort, whilst robust, lacked the cohesiveness and support required to effect change between government, industry and the clinicians

attempting to progress this unique niche of medicine.

That all changed in May 2017, when a small contingent of Australians recognised that the effective, well drilled team is greater than the sum of its parts. On the evening of the 20th of July 2017, the Australian Tactical Medical Association was born, and a new innovative disruptor entered the international stage.

The first 18 months of the Australian Tactical Medical Association

Strong support for the association was clear from the start. The Executive Board, which was sworn in during the associations first annual general meeting, all assumed dual roles in order to help achieve the rapid momentum which would help us to achieve our goals.

But what were these goals and what did ATMA stand for?

The constantly evolving threat context within Australia meant that there was no better time for the association to both launch and plan for the future. The Executive focused on five key pillars (figure 1), which whilst forming the back bone of our collaborative efforts, was flexible enough to change direction should the landscape require.



Figure 1 – Strategic Objectives of ATMA.

The first year of the ATMA saw strong links being formed with international and Australian organisations such as the Committee for Tactical Emergency Casualty Care (C-TECC), the Australian Defence Force (ADF) and Special Operations Medical Association (SOMA)

The association has formed a number of subcommittees and working groups that are actively involved in progressing the strategic objectives across military and civilian high threat domains, but the most significant achievement thus far has been the 2018 conference.

The seminal event: Australian Tactical Medicine Conference

The most significant of these five pillars, the seminal event, was the inaugural Australian Tactical Medicine Conference (ATMC).

The first conference, held in Brisbane in late September 2018, was a huge success with tickets selling out a week from the event. It was the first time in Australian history that clinicians, technicians and industry across high threat response sectors were able to come together, connect and collaborate in a public forum.

The conference showcased a wide range of topics from high threat and austere medicine to military and high-performance medicine and was supported by a range of stakeholders who provided speakers including speakers from the ADF, United States Department of Defence (US-DOD), National Atlantic Treaty Organisation (NATO) and a host of civilian organisations including London's Air Ambulance (LAA), Ambulance Victoria (AV) and the Queensland Ambulance Service (QAS) to name a few.

The conference concluded with the induction of the ATMA's first fellows, Capt. Stuart Robertson and Mr. Jeremy Holder MG, an important tradition which will continue in years to come.

Education & awareness: The key to changing minds.

The Australian prehospital landscape was fraught with misconceptions, misinformation and dogma, leading many to believe that high threat medicine was but a small area of medicine utilised by those

operating at the highest echelons of military and civilian law enforcement.

A key part of the association's mission was to provide targeted high-quality education events to help educate clinicians on the principles of high threat medicine. The most important principle being the definition of 'high threat' itself.

High threat did not necessarily mean that the clinician found themselves faced with an active shooter scenario and the education team thought it imperative to translate the meaning of high threat specific to the Australian landscape. This could mean rising flood waters to our northern counterparts and a rapidly approaching bushfire to our southern counterparts. Similarly, the military concept of tactical medicine has many nuances that differentiate it from the civilian sector, and austere and wilderness is relevant in a multitude of ways and settings for medics on the contemporary battlefield and that of the future. The concept and increasing focus of prolonged field care is ensuring the concepts of austere medicine are increasingly relevant across all high threat sectors.

The ATMA's events, held at universities across Australia, produced overwhelming attendance time and time again, with a core demographic of attendees consistently involved university students, our practitioners of the future.

The importance of research: the birth of the Journal of High Threat & Austere Medicine

Research exists to build knowledge, facilitate learning and inform action. There is no other field where this is more relevant than in high threat and austere medicine, where some examples of practice are so infrequent, complex and significant to the preservation of life that they needed to be chronicled in a readily available and open access source.

The ATMA Executive Committee recognised that there is a dearth of published knowledge in this domain and so the need for a medium to promote and give a voice to research arose. The JHTAM was created to ensure that the organisation was able to help build research capacity in this niche and emerging field. Whilst other journals focus on the application of military, special operations or wilderness medicine JHTAM is unique in its synergistic approach across these interlinked domains.

JHTAM will strive to find the available evidence and stimulate further research, providing a platform for the application of academic rigour in high threat and austere medicine. The journal represents a niche area of prehospital medical care that is currently not well covered in peer reviewed

literature, and therefore has huge potential to change practice and progress the art of prehospital emergency medicine.

The journal has the full support of ATMA, however will remain an independent entity that has a solid foundation of peer review and academic rigour to ensure that standards and impartiality are maintained.

Conclusion

The world first Journal of High Threat and Austere Medicine builds on the success of ATMA in bridging the capability gaps that currently exist in this emerging prehospital medical field.

This is a welcome leap forward in building and strengthening the evidence base in the sector, and will have significant flow on effects throughout prehospital emergency medicine.

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References

- Butler FK, Bennett B, Wedmore CI. Tactical combat casualty care and wilderness medicine: advancing trauma care in austere environments. *Emergency Medicine Clinics*. 2017;35(2):391-407.
- Callaway DW. Translating tactical combat casualty care lessons learned to the high-threat civilian setting: tactical emergency casualty care and the Hartford Consensus. *Wilderness Environ Med*. 2017;28(2):S140-S5.
- Llewellyn CH. The symbiotic relationship between operational military medicine, tactical medicine, and wilderness medicine: a view through a personal lens. *Wilderness Environ Med*. 2017;28(2):S6-S11.
- Pepper M. *International Models and Innovation in Tactical Emergency Medical Support*. Canberra, ACT: Winston Churchill Memorial Trust of Australia; 2015.