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Healing continues for vet, his nurse

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The hug seemed to go on forever. Neither wanted to let go. Rory Dunn and Tina Sundem hadn't seen each other since their lives briefly crossed in an Army hospital's intensive-care unit in the middle of Baghdad's Green Zone nearly two years ago.

Dunn is a former soldier from Renton who suffered a traumatic brain injury and other wounds near Fallujah, Iraq, in May 2004 when a roadside bomb exploded next to his Humvee.

He has no memory of the earlier encounter. He was in a coma and given little chance of survival.

Capt. Sundem, an Army nurse who treated him and now lives in Pierce County, vividly remembers former Spc. Dunn.

"He was so severely wounded I never imagined he would live," she said.

On a recent dreary evening at a Red Lobster restaurant in Tacoma, the two met for the first time since Iraq.

For Dunn, 23, the reunion was a chance to say thank you. But for Sundem, 34, it was another step in her own recovery. Sundem's experience in Iraq left her so traumatized that she attempted suicide 10 days before her tour was to end. She was diagnosed with post-traumatic stress disorder. She spent time in a psychiatric ward at Walter Reed Army Medical Center in Washington, D.C. She's found it therapeutic to write about her flashbacks from her home in Roy.

Sundem read about Dunn in The News Tribune last summer. She knew that seeing him would help her confront the darkest memories of her days in Iraq and take some comfort that her nursing skills, at least in Dunn's case, paid off.

"Since I came back from Iraq, I haven't been able to touch a patient," she said. "It's so sad. That's who I was. I was good at it. Others with PTSD can go on to become bankers or lawyers. But the thing I am, I can't be anymore."

Sundem is not alone. Nearly one-third of U.S. soldiers who were in Iraq during the war's first year have sought mental health treatment, according to a recent study published in the Journal of the American Medical Association.

About 12 percent of the 220,000 Army soldiers and Marines surveyed suffered serious mental problems, including depression and post-traumatic stress disorder. An earlier study of Iraqi war veterans had found that between 15 percent and 17 percent displayed PTDS symptoms.

PTSD once was labeled "shell shock" or "combat fatigue." The medical community, under pressure from Vietnam veterans, officially recognized it as a psychiatric condition in 1980. By some estimates, about 19 percent of those who fought in Vietnam have shown signs of PTSD.

The disorder is triggered by exposure to life-threatening or horrifying experiences that can range from war to rape to natural disasters. Symptoms can include flashbacks, hypervigilance, anxiety, nightmares, irritability, anger and insomnia. It can be treated with medication and counseling.

Maj. Gen. George Weightman, who oversees Army medical training, said the Army tries to prepare its medical personnel for what they will face at military hospitals in Irao.

"We call them trauma factories," WeightÂman said. "It can be a shock when 12 or 15 wounded arrive all at once. In the states, you see people injured in car accidents or wounded by guns or knives. You don't see high-velocity or explosion wounds. It can get pretty intense."

Health care professionals in any setting can suffer from "compassion fatigue," a form of burnout. PTSD, however, can be far more serious.

"We are trained to be objective and not grossed out by the blood and gore," Weightman said. "But at some point – who knows what will trigger it – the emotional floodgates open. As a civilian you can get away from it. In a combat zone you can't."

'EVERYONE ... COMES BACK CHANGED'

Before becoming a neurosurgeon, Dr. Jeffrey Poffenbarger was an infantry soldier and an Army Ranger who took part in operations in such places as Haiti. He served 14 months in Baghdad, mostly with the 31st Combat Support Hospital, the same unit Tina Sundern was assigned to.

The pace was relentless, the casualties often horrific, said Poffenbarger, 43, now in private practice in Virginia. He recalled incoming helicopters breaking the day's quiet, the arrival of mass casualties and making triage decisions about who could be saved and who couldn't.

"I would see people who have been shot only 10 or 15 minutes earlier - dirty, grimy, with shrapnel sticking out of their skin," Poffenbarger said. "In any other war, these soldiers would have been dead."

Though the months he spent in the Baghdad are a blur, Poffenbarger said he remembers Dunn. Medical teams thought they had lost him a couple of times. He's pleased that Dunn survived and would like to go hunting and fishing with him.

Poffenbarger seemed uncomfortable when asked about Sundem, though he did say he understood the stress she and other nurses were under. In many ways, Poffenbarger said the nurses in the Baghdad ICU had it tougher than the doctors, because they provided care 12 or 16 hours a day for six or seven days at a stretch.

"It was very hard on some," he said.

Others who served with the 31st Combat Support Hospital in Baghdad say that since returning they are a little edgier, a little angrier and a little less tolerant.

"Everyone who goes there comes backed changed," said Maj. Nancy Parson, an ICU nurse who was in Baghdad for a year. "You would do everything you could, and they would still die. Sometimes it felt like no matter what you did it wasn't enough."

Maj. Mark Brown, a psychiatrist who served in Baghdad and now works with Parson at Fort Bliss in Texas, said the stress came from more than just treating the wounded. Gunfire and mortar attacks caused him to worry about the mental health of those he worked with.

"As a psychiatrist, I spent a little part of every day trying to think about what could help them," he said.

SUNDEM: NEVER-ENDING HORROR

Sundem started as a nurse's aide when she was 16. Her father was career military, and it seemed only natural for her to eventually join the Army as a nurse.

She said she got three days notice before leaving for Iraq. She was working in a clinic at Fort Leavenworth, Kan., where her husband, Chad, an Army Ranger, was going to school. The 31st Combat Support Hospital needed an intensive-care nurse, and Sundem received her orders.

Sundem chooses words carefully as she talks about her time in Iraq. Her kids, Hannah, 4, and Bridger, 3, keep popping out of the family room, where they were supposed to be watching a video. She shoos them away as she talks about the carnage she dealt with in Baghdad.

"I can't describe the horror," she said. "I swiped a wounded soldier's eyeball into a trash can. At times I would think, 'This kid isn't going to make it, this kid will be a vegetable.' It was never ending. There was no escape."

Sundem said she worked 14- or 16-hour days, six days a week, and the ICU was always filled to capacity.

If it wasn't U.S. soldiers, it was coalition soldiers, wounded civilians, including children, or enemy combatants. Trash cans overflowed with empty transfusion bags and the wrappers from burn pads. Intercranial pressure monitors and intravenous pumps continually beeped. She recalls soldiers without legs or arms or faces.

One night as she tried to sleep, the blast from a mortar shell shattered the window, spraying her bed with glass shards.

But Sundem said it was not the danger of living and working in a war zone that got to her. More than anything, it was the wounded.

"I would lean over and whisper in their ears, 'You aren't going to die on my watch,'" she said.

'I FELT LIKE A MONSTER'

She kept a journal. Over the days and months, she turned to it in an effort to unburden her anxieties. As a nurse and a career Army officer, she knew she shouldn't become too attached to her patients or too emotional in treating them. But there was no escape. She said she began feeling hostile toward her co-workers and, especially, the enemy combatants she treated. At one point, she didn't sleep for four days.

"I called Chad, wishing someone could make this stop," she said.

Sundem did seek help. She was on medication and had been in contact with a psychiatrist. But near the end of her year in Baghdad, she snapped when she heard a doctor had bad-mouthed her care.

She tried to commit suicide but survived, and the Army sent her to a hospital in Landstuhl, Germany.

"I was a zombie when I got to Germany," she said. "One doctor said I was the worst case of PTSD he had ever seen."

While in Germany, Sundem said she couldn't call home, at first.

"I was afraid to come home," she said. "I had changed. When I went over there I was a successful, happy person. Every premise of my value system was challenged and destroyed.

"I had lost my faith in God. I had lost my faith in humanity. I felt soiled and impure. I felt like a monster. I didn't want to poison my children, and I was ashamed of what my family would see in me."

After a time at a psychiatric ward at Walter Reed and a stint at Fort Leavenworth, Kan., Sundem and her family settled in Roy with a horse named Jade and a dog named Tasha. Chad Sundem is assigned to a Stryker brigade at Fort Lewis and could be headed back to Iraq. He has served two previous deployments in Iraq and one in Afghanistan.

ARMY TAKES PTSD SERIOUSLY

As with Rory Dunn, Sundem is gradually putting her life back together.

"I have good days and bad days," she said, adding that she remains on the Army's temporary disability retirement list and could be recalled to active duty in the next five years.

The flashbacks come mostly when her mind is idle.

"I can feel them coming," she said. "It's like I am there, the smells, the sounds."

As the flashbacks sweep over her, she retreats to her favorite living room easy chair, pulls out her laptop and writes. She has written a book she titled "Lest They Be Forgotten: An Army Nurse's Memoirs." No publisher has shown interest yet. But Sundem said it has been therapeutic and is a story that needs to be told. She will continue seeking a publisher.

Senior Army officials say PTSD and other mental health issues are major concerns with troops returning from Iraq, including medical staff. They have made counseling and treatment a priority.

Col. Gregory Gahm, the chief of psychology at Madigan Army Medical Center at Fort Lewis, said his staff works hard to treat Iraq veterans who are facing mental problems. "We are able to help most of them," he said.

REUNION AT RED LOBSTER

Sundem said she no longer has nightmares about Rory Dunn. After she learned that he had survived, it took her almost six months to make contact.

"He had really haunted me," she said. "It helps to know he survived."

While others she treated in Baghdad still haunt her, Sundem said Dunn is not one of them. Their February reunion at the Red Lobster helped ease her pain.

"Rory, we didn't think you would make it," Sundem said as she and Dunn finally stepped back from a long hug. "You look beautiful."

They talked about the war, the 10 months he spent recovering from his injuries and his plans for the future.

"I want to do 'Dancing With the Stars," Dunn joked.

They also talked about how to find a vein to draw blood, spinal taps, CAT scans, the Adam Sandler song "Sloppy Joe" and how he met Ozzy Osbourne while he was at Walter Reed.

"He said a prayer for me," Dunn said. "It was the scariest thing."

The reunion lasted three hours. Dunn was restless, getting up frequently to put drops in his remaining eye. He's trying to quit smoking, has rented an apartment and is talking about taking some classes.

Dunn's mother, Cynthia Lefever, said her son hoped the reunion would help Sundem get on with her life. Lefever hopes the story about her son's survival would reassure others like Sundem that their efforts were appreciated.

"She saw this tall, dark, handsome young man with half his face blown away, and he lived," she said. "I'm hoping Rory's story will sent a message for the caregivers to never, ever give up hope and to continue to give the best care possible."

No one seemed to want the evening to end, but it was time for goodbyes and a final hug.

"Rory, you are a miracle," Sundem said.

"You were a good nurse. You did a good job," he replied.

On the way out he asked for Sundem's phone number so he can keep in touch.

Post-traumatic stress disorder

Treatment: Psychiatric care, most often cognitive-behavioral or group therapy; antidepressant medications

Prognosis: About one-third of those diagnosed suffer a chronic form that can last a lifetime. But even those with chronic PTSD can have good periods and bad periods.

Contacts:

- $\bullet \ \text{Washington State Department of Veterans Affairs PTSD program,} \ \underline{\text{www.dva.wa.gov/Benefits/PTSD.htm}}$
- U.S. Veterans Administration's National Center for Post-Traumatic Stress Disorder, www.ncptsd.va.gov
- National Mental Health Association, www.nmha.org

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