UCLA is new front in care of war injuries

In Operation Mend, the university’s plastic surgery team repairs battlefield wounds.

Tony Perry

Marines and soldiers who suffered disfiguring injuries in Iraq and Afghanistan are receiving advanced plastic and reconstructive surgery at UCLA Medical Center under a partnership between the center and the military’s top hospital for burn victims.

So far, five Marines and four soldiers have undergone surgery at UCLA. One was injured in Afghanistan, the others in Iraq. More patients are scheduled to arrive in coming weeks.

Military brass, UCLA officials and philanthropist Ronald Katz have discussed expanding the program to include other medical specialties and hospitals. Katz has donated about $1 million to the program, called Operation Mend, and helped to raise more than $10 million.

The goal is to provide advanced treatment for military personnel who have undergone surgery and rehabilitation at Brooke Army Medical Center in San Antonio, a world leader in the treatment of burn victims.

Katz serves on the Ronald Reagan UCLA Medical Center board of advisors and has also donated millions to programs involving Brooke. He said he got the idea to link Brooke with UCLA while he and his wife were visiting the Texas hospital.

EXAMINATION: Dr. Timothy Miller, left, chief of plastic surgery at UCLA, and Dr. Brian Dickenson check Scott before his surgery Thursday.

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Military personnel stop at UCLA on the road to recovery

[Treatment, from Page B1]

"We saw the burn patients, and they broke our hearts," Katz said. "We knew in our hearts that our docs could do great work."

Bringing the hospitals' two bureaucracies together hasn't always been easy, but officials on both sides say it has been worth it.

Three generals — one Marine, two Army — have come to UCLA recently to meet with the UCLA doctors and talk about a possible expansion of the program.

"There's exciting potential," said Amir Rubin, chief operating officer of the UCLA Hospital System.

With continuing wars in Iraq and Afghanistan, there is also need, he said: "Unfortunately there are still people getting injured."

One of the UCLA patients is Marine Gunnery Sgt. Blaine Scott, 35, who was burned over 36% of his body when his vehicle struck a roadside bomb that killed three fellow Marines in Anbar province on Aug. 20, 2006.

Scott's arms and legs were burned. The bones in his left foot protruded sideways. His nose had been virtually sheared off, and his head, ears and face were scorched, leaving deep scars.

When he regained consciousness at Brooke, his wife, Lilly, was by his side. "There she was, nine months preg-

HAPPIER TIME: Marine Gunnery Sgt. Blaine Scott and his wife, Lilly, are all smiles in a 2001 photo.

nant, pushing me in a wheelchair," Scott said.

The Scotts have two children: Isabella, 5, and Blaine, now 2. At Brooke, Scott had surgery to repair his foot. Part of the work was done with a skin graft, including taking part of a tattoo from his right forearm and transplanting it on his left foot. A graft from his forehead was used to reconstruct his nose in another operation.

Scott spent 18 months at Brooke and is now assigned to Camp Pendleton as an instructor in the urban-combat program.

At UCLA, Dr. Timothy Miller, a professor and chief of plastic surgery, operated on Scott to repair a tear in the corner of his eye, minimize his scarring, thin his lips and smooth out his nose.

Burn injuries from combat, according to Miller, are particularly damaging because they are usually associated with bomb blasts and intense heat. The explosions frequently destroy victims' noses.

When he was fresh out of medical school, Miller spent two years as an Army doctor — first on the staff at Brooke and then treating troops in Vietnam. He jumped at the chance to treat military personnel under Operation Mend.

"They've given a tremendous amount of their lives to me and my family," Miller said. "If I can give something back to them, it's very gratifying."

Brig. Gen. James Gilman, commanding general of Brooke Army Medical Center, said the Mend program was a way to expand care for those most severely burned.

"In general, the military does not have as part of its core competency really, really good facial reconstructive surgeries," he said. "To get a chance to work with world-class surgeons like Dr. Miller and his colleagues is tremendous."

Scott was on his second deployment to Iraq when he was wounded. He remembers waking up briefly in the military hospital in Germany and then next at Brooke, where he said he received "awesome" care.

Scott said he wanted to me, I told myself: 'You have nothing to complain about,'" he said.

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