

# Wadi Ghalilah

## RESCUE

By Pete Aldwinckle  
Photos by Ian Ganderton

Three o'clock in the morning is never a good time for a wake up alarm but on this occasion it did not matter. I was already dressed and the alarm acted as a prompt for more tea and toast. Twenty minutes later I was in Ian's truck heading north from Ras Al Khaimah towards Wadi Ghalilah. Ian explained the events of the previous afternoon and his trip up and down the mountain after receiving the telephone call for assistance.

Although I had spoken to Ian several times the previous evening and also with the team high on the mountain; it was only now that the situation became clear. A member of a group on the Stairway to Heaven scramble has slipped and fallen during the descent. The fall had occurred early afternoon. The casualty had suspected broken lower leg, cuts, grazes and a lot of bruises. He was located a couple of hours walk from the end of the Galilah road on a very steep scree slope above a vertical drop. The route up to him was steep, in some places very narrow, covered in loose rocks and there were plenty of opportunities to fall over the edge of a cliff. He needed assistance to get down.

Fortunately for the casualty and the rest of his group, while there is no formal mountain rescue service in the UAE, there are a significant number of experienced and active climbers in the northern Emirates. A telephone call from the accident site had initiated a cascade of calls through the climbing community. Within hours a small team had collected their climbing equipment and were heading up the mountain to assist. They had reached the accident site just before last light. Andy, the medic, had assessed the casualty, stabilised him and the decision was made to wait until first light before moving him.

The majority of the original Stairway to Heaven group had been brought down to the road head while six members of the team that had gone up to assist had stayed on the mountain with the casualty. During the night, the larger team that would be carrying out the rescue had been preparing equipment and trying to get a few hours sleep. Ian and I were the advance party and a team of twenty would be following on an hour behind with the majority of the technical equipment. As a



Improvised Splint

voluntary operation put together at short notice without the benefit of rehearsal it was likely that our outline plan would need some modification once we were up at the accident site.

Four thirty in the morning, Ian and I were picking our way up a narrow goat track heading up into the mountains. Our head torches picked out boulders, the occasional stunted tree but most of the time it was just a beam of light searching into an inky darkness. No moonlight, no wind and no sounds apart from our increasingly heavy

breathing and a dislodged rock tumbling into the darkness made us feel very isolated. We pushed on and tried to maintain the pace as the ground steepened. There was no real path to follow to the accident site, just the occasional stack of stones left by previous travellers, a mountaineer's intuition and Ian's memory from the earlier in the night.

The ground was a lot steeper now, great care was required as one slip and we would

be plunging into the darkness below us. Our torches were now picking out towering cliffs that disappeared above us in the darkness. Up ahead and disappointingly much higher than we were, we saw a light flickering. At least we knew we were on the right track and it spurred us on to keep the pace up. Thirty minutes more hard effort and we passed the first members of the overnight team sheltering on a narrow ledge under an overhang. After a few words we pushed on up a narrow rocky gulley and then carefully traversed across a steep slope to the casualty party.

They were camped, if sitting on a rock can be called camping, on a very steep slope with the casualty lying in a sleeping bag on a very narrow platform. A rope secured him to the mountain and prevented him from sliding over a cliff that was some twenty meters further down the slope. After brief introductions we got to work. Andy, the medic, along with some assistants were splinting the casualty's leg with walking poles, a cut up sleeping mat, climbing tape and, of course, the universally useful duct tape. Another team were assembling the specialist mountain rescue stretcher. As the sky got lighter, the seriousness of the terrain became clear; steep cliffs, very narrow ledges and a lot of loose rock. The cliffs were too steep and enclosing to allow the use of a helicopter so the casualty would have to be carried out. We planned and then prepared for a series of lowers to get the casualty off the scree slope and to the ledge system some thirty metres below us. As the main body arrived on the ledges below us, instructions for more equipment and manpower were

sent down.

By eight o'clock we were as ready as we could be and Phil's team on the stretcher started the delicate manoeuvre to get the stretcher to the top of the main cliff. Although there were ropes in place, it was still potentially dangerous with loose rock and a big drop below the stretcher team. My team waited at the top of the cliff with the next team at the bottom to receive the stretcher from us.

Simply put, our plan was to pass the stretcher down the mountain with teams working ahead of the stretcher preparing ropes to lower over the big cliffs or to back up the carrying team so that the casualty did not get dropped in the event of a slip. Once the stretcher had passed through a section, the team that had prepared the ropes would collect them and then move ahead of the slower moving stretcher party and set up at the next section. It worked out that twenty odd guys were in the stretcher team and two teams of five on the ropes. The complexity was that we were working on very steep slopes with big cliffs close, loose rocks and numerous other hazards. As a team, we were going to be relying on the individual skills and competencies of every member to be able to look after themselves combined with our ability to work together without making any mistakes as the consequences could be fatal.

The first technical lower had gone much quicker and smoother than expected. Andy and Phil had been lowered with the stretcher to ensure it did not get jammed against the cliff. The terrain and available equipment had demanded some improvisation but the stretcher with casualty securely strapped in had been safely passed to the next team. We coiled ropes, dismantled belays, packed rucksacks and moved down the mountain after the casualty party. We pushed forward past them at the end of a narrow ledge that must have been challenge to negotiate; I was glad that the other team had that obstacle to overcome.

We quickly worked ourselves into a routine of preparing ropes, checking knots and carabineers; checking systems and ensuring that somebody checked us. As the stretcher party approached I struck by the calm purpose that everybody had. There was no rush but we were making remarkably quick progress considering that we were moving down a loose mountain carrying a 120kg of stretcher and an injured person that was totally dependent on us. Those not carrying or working ropes moved rucksacks, water and equipment ahead. There was a constant checking of each other, looking out for hazards and a grinding momentum that was moving us down the mountain.

For six and a half hours the casualty was in constant motion towards the road apart from two stops. The first at what must be the only flat ground in upper Wadi Galilah where we ate and relaxed for a moment; the second when the casualty succumbed to the constant bumping and jogging and his bladder said that a stop was required. For the majority of this time we were dependent on ropes for security or back up. And then we reached the vehicles. Our

uncomplaining casualty was transferred to motorised transport for the onward journey to hospital and the operating theatre.

As the team sorted out equipment, relaxed and shared food and water, we reflected on the last 24 hours. We had been lucky that our casualty did not have life threatening injuries and so we had not been required to evacuate him at night. He had been lucky that thirty odd experienced climbers had been in the area and had responded to call for assistance. All of us had been motivated to help one of our own and lurking in the back of our minds was probably the thought that next time it could be us.

Whilst there may be moves to establish a more formal mountain rescue capability in the Emirates, the mountains will always be rugged and steep with the constant peril of a small slip resulting in serious injury. Anybody heading into the UAE moun-

tains needs to have a high degree of self sufficiency and be comfortable on exposed ledges and difficult terrain. The feeling of remoteness and challenge the mountains provide is very much part of their appeal but they are certainly not benign and need to be treated with respect.

Pete Aldwinckle is a resident of RAK and the Technical Director of Global Climbing. He has been enjoying mountains and rock climbing for over thirty years and during this time he has climbed on five continents for fun and worked as a professional mountaineer in Scotland.

The names of the majority of the rescuers, companies that released them from work and supplied equipment and the casualty have not been published at their request or as permission to use their names has not been sought.

Pete Aldwinckle.



Team work



First move of casualty