

Surgical Mission to Gonaives February 2007

Trip Report:

Feb 9th: 20 people arrive at Ft Lauderdale (18 from Colorado Springs, 1 from Boston, 1 from California) to spend the night en route to Haiti.

Feb 10th: Arrive Port au Prince, and then travel by small planes to Gonaives. Met by Fr Max Accime, Episcopal priest in Gonaives. Proceed to Providence Hospital; make contact with hospital director, Dr. St. Giles (OB-GYN). Observe c-section in the operating room that Saturday afternoon. Fr Max takes us to the rectory where half of the team will stay and all will take our meals. The other half will stay in a nearby Hotel.

Feb 11th: Attend services at St. Basil Episcopal Church and school, downtown Gonaives. Fr Ephraim Radner preaches the sermon in French. That afternoon the team organizes the medicines we have brought in preparation for half the team to conduct medical clinics at St Basil's Monday and Tuesday.

Feb 12th: Meeting with Minister of Health, Dr. Cantave (Artibonite District) at 9:00 am. Ephraim, Andrea Coleman (Chief Operating Officer, Penrose Hospital, Colorado Springs), Tom Anderson (CEO, St Mary Corwin Hospital, Pueblo) and I attend. We are welcomed and told to consider this as "our home". The minister says they are very grateful for the container-load of donated hospital equipment that we shipped to them last spring, and for the fact that we have returned! ("Many people have come here and made promises, but very few have returned"). He informs us that the second container full of surgical instruments and supplies (which we had anticipated using for our surgeries) has arrived at the port at St. Marc, but has not been delivered to Gonaives yet. (Apparently due to red tape.) He tells us of the problems the hospital has had since the hurricane, which flooded Gonaives 3 years ago. Many people in the hospital died. They lost all their beds due to looting. The hospital was then used as a morgue and there were cadavers there for months. Not only has the hospital not recovered (it is just barely functional) but people still associate it with the dead bodies that were kept there, and try too avoid it. Anyone who can travels elsewhere (Cap Haitian, Port au Prince, etc) for his or her medical and surgical care. He is excited about our new partnership with him because he needs help to fix the hospital, which is "broken", in his words. He is also most pleased that we will be doing free surgeries on patients in the hospital this week. Mr. Anderson tells us that we want to help him rebuild the hospital from the ground up (start with the basics: water, sanitation, electricity, then move up to the next level: training doctors and nurses, etc).

Meanwhile, Dr. Ben Massey (our anesthesiologist) is provided a car and chauffer to go to Port au Prince to try to find an oxygen regulator to get the anesthesia machines we shipped them to run off their oxygen bottles, and to find the anesthetics and narcotics that

we will need to do general anesthesia (we were unable to bring them with us since they are controlled substances). Ben ends up spending 2 days in Port au Prince and through miraculous persistence (and evidently God's Grace) convinces the officials there to let him purchase what he needs, even though he ends up falling short of providing the paperwork and signatures they require).

We proceed to the hospital to start our surgeries with the aid of spinal anesthetics provided by the Cuban anesthetists there, and with the instruments they are currently using in their operating room. I assist the Cuban general surgeon there in an exploratory abdominal surgery and then I perform a hernia repair with his assistance.

Feb 13th: Slow surgery day because only one of the patients I identified on my previous trip 2 years ago as needing surgery comes in. I repair his hernia. The medical team sees their second day of patients at the school.

Feb 14th: Ben is back and performs general anesthesia at the hospital for the first time in 3 years, as I take out a gallbladder, do a below knee amputation with the Cuban surgeon, and debride leg wounds on a motor vehicle accident patient. (That day we returned to the rectory at 11:15 pm because our surgeries did not start until noon because we were waiting for diesel fuel to run the hospital's generator). The medical team has had a good day seeing patients at the church in Bayonaise (a mission church of St Basil's in the countryside, about 30 minutes outside of Gonaives).

Feb 15th: Another good day in the OR as we now have a working electro-cautery machine and sterilizer (thanks to our biomedical tech, Chuck Demanche) and I am able to do a mastectomy for breast cancer, and two hernia/hydrocele repairs. Ben familiarizes the Cuban anesthetists with the use of the anesthesia machines that he and Chuck have made operational (they are all well-trained in general anesthesia and are quite happy to have this capability here, now, in Gonaives). Another good day for the medical team in Bayonaise.

Feb 16th: We do an orchiectomy for testicular cancer, a toe amputation, and drainage of a large thigh abscess in an emaciated young man who looks to have advanced aids or tuberculosis. The container finally arrives at the hospital that evening, after we have had our dinner at the rectory, so we all joyously return to the hospital and unload it into their warehouse, with Tom Anderson leading the unloading team in the hot, humid container for 2 hours. Unfortunately it arrived too late for us to use any of the equipment we had planned to do our surgeries with, but at least it more than replenishes the surgery supplies we had used during the week, and contains instruments that will significantly enhance their surgical capabilities after we leave.

Feb 17th: 5 members of the team return to the U.S. The remainder travel across Haiti for 4 and ½ hours by tap-tap to visit Dr. Paul Farmer's mythical miracle clinic in Cange. The

members of the team find it incredible that a hospital of this nature (1st world cleanliness, water, sewer system, and electricity) should exist in the midst of these surroundings. The Haitian Doctors, Nurses, and staff who run the hospital graciously give us an in depth tour of the entire facility. One of our interpreters even remarks that he had never seen any facility as nice as this before, not even in Port au Prince! We make the 4+ hour return trip to Gonaives over the dirty, dusty roads, arriving back at the rectory well after dark.

Feb 18th: The team attends church at St Basil's, and Ephraim again is asked by Pere Max to deliver the sermon. And the congregation expresses its happiness with our visit and our help to them. That night we attend a "party" given for us by Dr. Cantave, the minister of health at the largest hotel in Gonaives. He serves champagne and wonderful Haitian food for us, and we all have a marvelous time toasting one another and our plans for our future work together for the benefit of his district. Nurse Eric Miller donates a tandem bicycle (which came down on the container and was provided by his foundation to donate these bicycles to blind children) to an orphanage for the blind.

Feb 19th: After a final check on our post-op patients, we board an air-conditioned bus (unbelievable to those of us that have been to Haiti before this!) and travel 2/3 of the journey to Port au Prince to spend the night at Mon Ruis, the Episcopal Diocesan retreat camp on the coast for our last night. We swim in the ocean and make merry with members of two church youth groups who are also staying there at a dance they are having there that evening to celebrate Carnivale (Mardi Gras).

Feb 20th: Awake early and board the bus to go to the airport and return, via Ft Lauderdale and Dallas, to Colorado Springs.

Jim Smith