

TEACH, TRAVEL, LEARN: AN ORTHOPEDICS OVERSEAS VOLUNTEER IN PERU

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Almost a half a century ago, several internationally-minded American orthopaedic surgeons founded the Orthopedic Letters Club in 1958 to exchange scientific ideas by shared correspondence. This scholarly newsletter club evolved into the Orthopedic Letters Club Overseas Program, whose membership was devoted to teaching musculoskeletal medicine to physicians in resource poor countries abroad. In 1963, the condensed name of Orthopedics Overseas was adopted; and by the 1980s, the organization had a full time office staff based in Washington, D.C.¹ The author

joined Orthopedics Overseas in 1985 after being introduced to the organization and its teaching mission by Mark Coventry of the Mayo Clinic when both crossed paths at a remote hospital on the Caribbean island of St. Lucia. Dr. Coventry mentored the author's interest in international volunteerism, and the author was soon invited by Orthopedics Overseas (OO) to be the Director for a new program at St. Jude Hospital, St. Lucia, West Indies.² From 1986 to 1994, the author administrated the recruitment of orthopaedic surgeons and physical therapists to staff the hospital until he was



Figure 1. In Lima, Dr. Gainor instructs young Peruvian hand surgeons about the importance of observing a pediatric patient's hand skills before formulating a treatment plan by having the child demonstrate the functional level of a congenitally anomalous hand. The mission of HVO is education, the gift of knowledge.

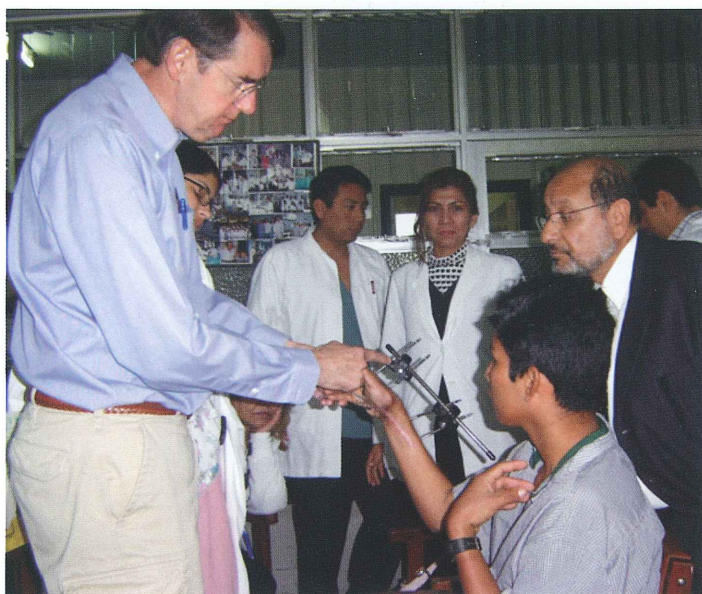


Figure 2. Dr. Gainor answers questions about the options of reconstructive surgery of a damaged wrist in a patient who was injured in a propeller accident in the Amazon River. Although the patient's fracture is stabilized with a modern external fixator, discussion is focused the next stage of treatment.

called to briefly be Vice-Chairman of the Board of Directors of OO. He served from 1994 to 1998 as Chairman of the OO Board and oversaw re-writing of the organization's bylaws to upgrade its infrastructure and accommodate its expansion from 70 to almost 700 members who were traveling to worldwide programs. In 1999, Orthopedics Overseas gave the author a "Leadership Award" for modernizing its governance.

In the mid 1980s, OO was so successful that it became the founding division of the multi-specialty organization of Health Volunteers Overseas (HVO), which was established in 1985, and HVO now has more than 2000 members. The author served as Chairman of the Board of Directors of HVO from 2000 to 2003 during which time he traveled to Istanbul, Turkey, for an international seminar to explore the concept of global coordination of volunteer medical service organizations. In late 2005, the author journeyed to Lima, Peru, for an assignment to teach hand surgery to young surgeons in training at an inner-city hospital in the sprawling South American city of 8 million inhabitants (Figure 1).

The Mission

Health Volunteers Overseas (HVO) and its core division Orthopedics Overseas (OO) comprise a non-profit and non-sectarian, private organization that is dedicated to improving health-care quality in undeveloped nations through the education and training of local health-care providers (Figure 2). The individual programs worldwide vary according to the needs of each country, and volunteer sensitivity and respect for the local culture and history is a priority. HVO and OO volunteers teach skills that are relevant and realistic with a focus on local diseases and prevention. Lifelong learning is encouraged with the goal that the local health-care personnel will assume the role of educator and provider. The use of local available medical equipment is encouraged rather than focusing on state-of-the-art but unavailable Western technology

(Figure 3). The unofficial motto of HVO is the old Chinese proverb:

*Give a man a fish
Feed him for a day
Teach a man to fish
Feed him for a lifetime*

The core values of HVO are embodied in medical professionals who are culturally sensitive and work in partnership with host governments and local medical personnel in a spirit of mutual respect and cooperation (Figure 4). To celebrate its recent 20th anniversary, Health Volunteers Overseas held a contest among its members to create a so-called tagline to summarize the volunteer experience, thereby branding the organization's main product-education. The winning entry was: Teach, Travel, Learn. The author, who is a semi professional musician and fundraiser, wrote and recorded a CD of original music to celebrate the 20th anniversary of HVO with whimsical songs about the adventures of overseas service. (More information is available at www.hvousa.org.)

The American Academy of Orthopaedic Surgeons (AAOS) has partnered with Orthopedics Overseas to encourage their mutual memberships to consider medical volunteer service abroad in impoverished countries. The AAOS and OO have held joint workshops at the Academy headquarters in Rosemont, Ill., to acquaint potential volunteer orthopaedic surgeons with all aspects of the overseas medical and cultural experience. In 2000, the AAOS inaugurated an annual Humanitarian Award to be given at its yearly meeting to recognize outstanding volunteer medical service by one of its Fellows.

The Challenge

Not every physician can or wishes to do medical service work in a far-flung outpost of civilization. For the first-time volunteer



Figure 3. Using a prized but shopworn Chinese power drill supplied by the operating room, Dr. Gainor (center) teaches the stepwise progression of fracture care in a severely traumatized hand. HVO focuses its efforts on utilizing local supplies and not on high-tech but unavailable equipment.

who lives immersed in state-of-the-art Western medicine, it is a discomfiting medical culture shock to arrive at a resource-poor hospital in an undeveloped country. There is little or no public health infrastructure in an impoverished nation. If there is an emergency of any kind, you cannot call 911 or get a Life Flight to evacuate a patient. Computerized health-care records do not exist except in distant and affluent corners of the world. It takes a pioneer spirit to leave the Comfort Zone of the high-tech North American medical environment and go far away to where there are no high-resolution CT and MRI scanner imaging systems to confirm or refute a differential diagnosis.³ In a humble overseas medical facility, a physician is left to depend on medical instincts and physical diagnosis acumen. This intellectual and professional challenge is the fabled Fun Zone.⁴ Because of shortages of such items as antibiotics, sterile gloves, syringes, and crutches, a physician will have to be imaginative to improvise effective treatment modalities.⁵

There are other worries, such as AIDS, terrorism, and civil strife that must be studied and evaluated prior to departure. An AAOS/OO Workshop is a useful forum to weigh these issues, and post-assignment reports by experienced volunteers are available for each program site at the HVO central office and Web site for review by potential members. Other questions arise. When in a hectic medical career is it a suitable time to become involved in this kind of work? The answer is very simple: never. You have to plan the time and decide to do it. Procrastination is an art form when it comes to

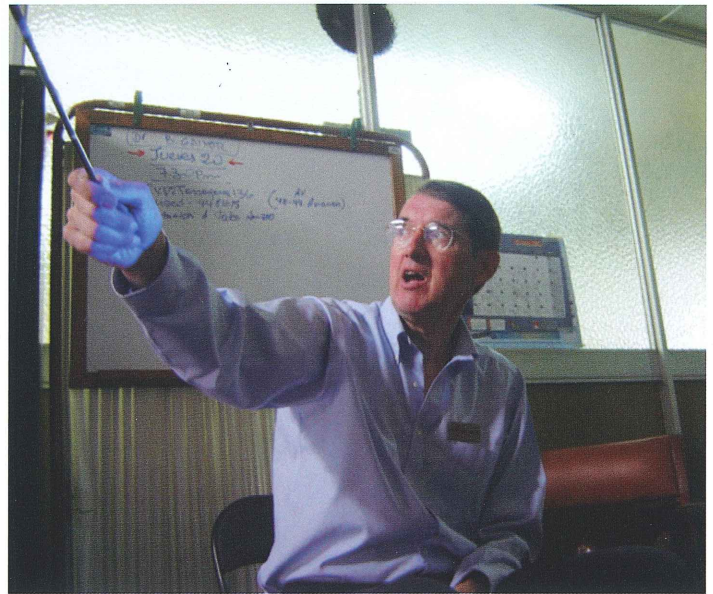


Figure 4. With educational tools in short supply, Dr. Gainor uses a portable blackboard to teach anatomy of the hand to a roomful of eager learners during a five-hour session of grand rounds and case presentations at an inner city hospital surrounded by Lima's 8 million inhabitants.



Figure 5. On a weekend excursion in the Andes Mountains recommended by his host physician, Dr. Gainor rests and acclimates himself to the thin air before scaling the smaller peak at Machu Picchu, a world renowned national landmark of Peru. Cultural enrichment is an important part of an HVO volunteer's assignment.

commitment to overseas voluntary medical service.

In addition to being a teacher and educator, each volunteer must be cognizant of the ambassadorial role that he or she plays abroad. When you are overseas, you are the face of America. The local health-care providers study your words and actions far more closely than ever expected, and it is vital to be a polite guest who is eager to learn from your host doctors and their culture. Flexibility and a warm sense of humor are indispensable in the often chaotic environs of a medical facility in a developing country. When invited to participate in local social activities, it is imperative to authentically share in the camaraderie. Although the host physicians cannot reimburse you for your services, they are eager to enrich you with the wealth of their culture, native cuisine, and nearby tourist attractions (Figure 5). These interactions are a reward not to be missed and enhance the bonding between the teachers and learners (Figure 6).

The Payback

The big payback of international medical volunteerism is an ethereal moment of moral superiority when you arrive home stateside again. This short-lived feeling promptly flees your psyche at the first cocktail party that you attend upon returning, when you learn that the other party guests have scant interest in your experiences abroad. This is understandable. Many listeners, however polite, do not have the gift of a medical education and the income security to stop wage earning and leave town for a month of unremunerated service work elsewhere. They cannot identify with your tales of volunteerism, no matter how spell binding and adventurous.

It is the joy of stewardship that is the big payoff. As trite as it sounds, you always receive more than you give. In the competitive Western medical landscape of market share, direct-to-consumer advertising, and conflicts of interest, it is redemptive to recapture the lost art of healing. Becoming reacquainted with the professional and bioethical value system of the Hippocratic Oath is restorative. Upon returning home from an overseas assignment, you appreciate your patients more and listen to the voice within them. All the paper work hassles and red tape of North American bureaucratic medicine become speed bumps. When overseas, you are reminded that the bare bones doctor-patient relationship, albeit in a faraway impoverished hospital, is the catalyst to a fulfilling medical career. There are many non governmental organizations (NGO) through which international medical service can be accomplished, and each organization has its unique mission.⁶

Conclusions and Reflections

The colossal devastation and death toll of the Indian Ocean tsunami in December 2004 temporarily captured global awareness for the suffering of the poor and medically underserved, but this surge of compassion has ebbed to baseline levels. Although overseas medical work is an experience that you can never get in your own back yard, many health-care providers have no interest in it; and this is to be respected. Not every physician can or wants to go abroad to practice medicine. There are myriad opportunities for stewardship in every American community, but physicians are reluctant to become involved in volunteer medical caregiving because of the carnivorous malpractice climate in the United States. More than 43 million Americans are



Figure 6. In the mutual sharing of cultures, Dr. Gainor records a bilingual song with the musician son of a host physician. This tune was included in a CD of original music released by the author to celebrate the 50th anniversary of the University of Missouri Hospital and Clinics and to raise funds for its Children's Hospital.

uninsured, and the inequalities in our health care are a national embarrassment. Because we do not have a just system to dispense medical care, a recent World Health Organization (WHO) survey was reported to rank the U.S. as 37th in health-care performance.⁷ A few states are beginning to accommodate inexpensive malpractice insurance for volunteer health care providers.⁸

Many imaginative opportunities beyond direct caregiving are available to doctors (and non-physicians alike) in the home community.⁹ There may be a needy family member or neighbor with physical or emotional issues or a teenager at risk who would benefit from mentoring. An isolated worker at the job site might need a kind listener or words of support. Skills such as being a fundraiser for a summer camp for disabled children, or a lobbyist for mandatory motorcycle helmet laws, or a health worker at the Special Olympics are fertile opportunities for service near home.

If a physician chooses to go abroad and has his family accompany him on an overseas assignment, it will be a unifying experience for all and an unforgettable adventure in cultural diversity. Your kids will grow up having seen a world where there are no shopping malls or fast food restaurants, and where parents cannot afford shoes for their children.

For those who dare, experimentation with the gift of stewardship at home or abroad is an education that is simultaneously humbling and exalting, but rarely dull. It is a risk worth the venture.

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