

PHYSICIANS FOR PEACE

NEWS PEACE

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teach one. heal many.



OUR MISSION

To educate and empower local providers of surgical care to alleviate suffering and transform lives in under-resourced communities around the world

OUR VISION

We envision a more just and equitable world where access to life-saving and life-restoring surgical care is available to all people everywhere, so they can go on to live healthy and meaningful lives.

SEVEN YEARS LATER, PHYSICIANS FOR PEACE TRAINING SAVES LIFE & LIMB

Back in 2016, when Dr. Raymond Nyirenda was a young resident in Malawi, he had an educational opportunity that's rare in a country with few to no surgical specialists. He was able to train with an American vascular surgeon, Dr. Mark Asplund, who was teaching at Queen Elizabeth Central Hospital ("Queens") in Malawi as a volunteer educator with Physicians for Peace.

Fast-forward to 2023. A young man arrives at Queens with a life-threatening aneurysm in his arm—an injury that, in most Malawi hospitals, would result in death or, at best, amputation.

But Queens happened to have a surgeon who knew an awful lot about vascular surgery.

"Am I surprised now that I'm inclined to do vascular surgery? Not at all!" laughs Dr. Nyirenda, now a surgical trainer and Physicians for Peace Education Coordinator. "My first encounter with an international medical educator was with Dr. Mark Asplund, and I shadowed him. As he's a vascular surgeon, I picked up some skills."

When the young man arrived at Queens, Dr. Nyirenda was several hours away. "I was called and told there was a vascular case at the hospital," he says. "He was a construction worker, and a piece of metal had jumped and penetrated the brachial artery in his left arm." The patient suffered a hematoma and several blood clots.

"He had ruptured and was bleeding profusely and on the brink of death. I rushed there. When I arrived, he was in shock and being transfused," Dr. Nyirenda recalls. "We got him into the operating theatre and managed to repair it and do a debridement."

When the patient awoke from surgery to find his arm still intact, "he was the happiest patient on the ward!" Dr. Nyirenda says. "Not only did we manage to save his life, but also his limb—as well as his livelihood, because he's a construction worker. And now he's back at work."



Dr. Raymond Nyirenda leading a teaching surgery.

This outcome was a direct effect of Dr. Asplund's influence in 2016. "Had I not had this vascular exposure, most likely this patient would have ended up with an amputation," Dr. Nyirenda says. "You want to save the life, even if it means losing that limb. But in this case, we managed to do both."

The procedure also provided hands-on training in vascular surgery for the team assisting him. "The residents we were working with were very happy and satisfied with the outcome," Dr. Nyirenda laughs. "They said it felt like *Grey's Anatomy!*"



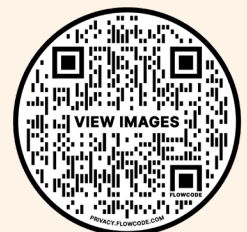
Dr. Mark Asplund & Dr. Raymond Nyirenda.

Pre-surgery X-ray, with visible swelling around the patient's elbow.



Post-surgery. (Scan at right for unredacted image.)

NOTE: There are more images from this case; however, they are medically graphic. To view them, scan here.



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“IN ONE SECOND, EVERYTHING CHANGED FOREVER.”

Ximena Cubides was supposed to start university, but the Colombian teen wasn't in class. She'd just been rushed to Hospital Simón Bolívar in Bogotá, burns seared into half her body.

“It took the ambulance 30 minutes to get me to that hospital,” recalls Ximena, now 30 and living in the U.S. “I couldn't understand why they weren't bringing me somewhere closer.

“But I'm so glad they did! I've found out it's one of the best hospitals for burn care in South America.”

At the time, Hospital Simón Bolívar was partnering up with Physicians for Peace to increase its burn-care capacity. The hospital had acute and reconstructive capabilities for burns, what Ximena needed after a horrifying accident.

A Long Journey With No Clear Path

Ximena, 17, was visiting family. Someone lit a candle too close to a gallon of industrial alcohol. It exploded, igniting her clothes. “My reaction was to run, so I ran until I heard someone yelling at me to stop, drop, and roll.”

Once the flames were out, Ximena lay on the floor, her heart pounding. “I was thinking—I'm okay. I have to go to the hospital, but I'll be okay.

“I didn't know what was coming next.”

Ximena had been hospitalized once before with a broken forearm. “I had surgery, and left the hospital to recover at home. That's what I thought was going to happen here: they'll do a surgery, and I'll go home in a week. I kept asking, ‘When is my surgery? Let's do this!’

“Then Dr. Norberto came and talked to me.”

Dr. Norberto Navarrete-Aldana is an emergency physician in Hospital Simón Bolívar's Burn Intensive Care Unit, and an International Medical Educator with Physicians for Peace. He's an advocate for burn-care training for medical providers, and one of Latin America's most impassioned voices for burn prevention.

“Dr. Norberto explained, ‘this is not about one surgery, it's not about 2-3 days in the hospital. The skin has to heal. There's a process, and this is going to take a long time.’”

The girl would need several procedures to debride wounds and place skin grafts. Her pain, and uncertainty, was often unbearable.



“LIFE IS AMAZING. I'M SO GRATEFUL FOR IT.”

Inspired by other burn survivors, Ximena sat for a photoshoot highlighting her scars.

“I kept asking, ‘When can I leave?’

Healing Physical and Mental Wounds

Her family and the burn team kept Ximena going in dark moments. “Dr. Norberto especially,” Ximena recalls. “He would say, ‘This is going to take some time, but you ARE going to make it.’ The nurses too—they're such a great part of that burn unit.”

Ximena had to relearn how to walk. She formed a support system with other burn patients. “We all had a different story,” she says. “I met people who didn't make it. I met babies and young kids who got badly burned.

“I realized there are so many ways people get burned. Fire, electricity, scalding. I went through a lot of emotions I'd never had to think about before. I grew up quick.”

Leaving the hospital after three months kicked off an even longer chapter: rehab. “I did physical therapy and wore compression garments for 2½ years,” she says. “I'm happy with the way my body healed. I can move, I can flex, I can do everything.”

Ximena knows burn survivors who didn't get the quality care she did, resulting in disabilities and disfigurements. It's her mission to promote burn prevention and help patients.

“The immediate burn care has to be good,” she says. “But after—there are a lot of things combined you also need, like physical therapy. And mental health,” she emphasizes. “Many people don't get that help.”

For years, Ximena visited patients at Simón Bolívar's burn unit. “I'd say, ‘I made it, and you can too.’”

“What Physicians for Peace Does is Amazing”

Today, Ximena works with kids, teaching burn prevention to their parents. She lauds Physicians for Peace burn-care programs, which include rehabilitation and mental health support.

“If doctors and nurses don't know how to care for burn patients, it can ruin lives,” she says. “What Physicians for Peace does is amazing, training them for situations that can happen—that do happen. If doctors, nurses and therapists are trained, they can make good decisions for burn patients.”

Ximena's ordeal revealed at least one silver lining: her resilience. “When you're down, you think, ‘I went through that, so I can handle this!’” she says. “That, in itself, is a gift.”

A GOAL SETTER WITH A PURPOSE

Long before 17-year-old Henry Kayera took a spill on his motorbike in rural Malawi, he knew he wanted to be a doctor. He'd recently started hitting the books harder in secondary school, trying to make the grades needed to get into medical college.

Then he wiped out on a motorbike, gashing his leg. At the local hospital, they stitched it up without any pain control—not uncommon in smaller Malawi health facilities. "I was treated without a local anesthetic to relieve the pain, and it was really traumatic," Dr. Kayera recalls. "From that moment, I thought maybe I can make a difference by relieving pain in the patients."

A Grueling Road To A Distant Goal

Despite major obstacles, Henry persevered in his ambition to graduate medical school. The hardest part wasn't the academics, but the logistics. "In medical school I was really struggling. Not necessarily the studies—I was doing well with those—but I was struggling with the finances," he says.

"I didn't have a laptop. I didn't have the chance to get accommodations near campus, and I lived about 20 kilometers (12.5 miles) away. When I had classes in the evenings, that was really a challenge."

For three years, he pressed on—doing his online coursework on his phone, spending hours every day on public transportation. Things got a bit easier three years in, when he was able to move closer to campus. He also married Naomi, a supportive wife who encouraged him to stick with an ongoing grind that seemed never-ending.



His resolve to become an anesthesiologist solidified in med school, during his rotation in the anesthesia department. "I happened to assist during a cardiopulmonary resuscitation on a patient. It was successful—we resuscitated him. This really boosted my confidence."

After six years of medical school and an 18-month internship, Henry started his anesthesia residency at Queen Elizabeth Central Hospital in Blantyre. With two children now added to his family, finances remained his biggest obstacle. When Henry heard about the Physicians for Peace scholarship, he applied right away. In May, he got the news he'd been hoping for.

"I was struggling so much, and being accepted as a Physicians for Peace scholar was a joy and a relief," he says. "This has really helped me. It's a competitive scholarship and I'm really, really happy to be one of the people chosen."

His Next Goal: Teach One. Heal Many.

Now immersed in anesthesia training, Henry enjoys the adrenaline rush when working under pressure. "There are times when you have to make quick decisions, because it's a life or death situation. You have to think and act quickly."

Dr. Henry plans to remain in Malawi and fulfill the Physicians for Peace motto to **teach one, heal many**. He's already coaching medical students. "I do feel an obligation to teach, and I enjoy it."

With fewer than 10 anesthesiologists in Malawi, "there are not enough, and there's really a lot resting on my back," he acknowledges.

"I will want to teach others in the future. So, maybe after five or ten years, we might have many more anesthesiologists in Malawi. Maybe 200, maybe 300! That is the goal."

MEETING A CRITICAL NEED THROUGH SCHOLARSHIPS



With 19 million people, Malawi has about as many residents as New York state. But, while New York has nearly 9,000 surgeons and anesthesiologists, Malawi has fewer than 65 surgeons and 10 anesthesiologists.

It's a healthcare gap that seems impossible to close. The only way is to support Malawian doctors wanting to specialize in surgery and anesthesia.

Medical specialists in Malawi have many hurdles to overcome, especially financial. In a country where the average annual household income is \$630, professional exam fees alone can cost between \$100-\$800.

Physicians for Peace Scholarships cover professional fees and memberships, coursework, exam and travel costs, a cost-of-living stipend, and Internet charges—crucial for accessing online textbooks and other resources.

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