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HAND SURGERY

Q U A R T E R L Y



HARD THERAPY AND AFFILIATES' CORNER

Vargas 2004: Guatemala

Sharon Dest, PT, CHT

Last August, I had the privilege of traveling with Dr. Miguel Pirela-Cruz, Dr. Mukund Patel, and Dr. Warren Schubert to Guatemala as the 2004 Vargas International Hand Therapy Teaching Award recipient.

Guatemala is one of the poorest countries in Central America. More than half the population has no access to healthcare. Congenital deformities are commonplace because of malnutrition. Burns occur frequently as 60% of the population is without electricity, relying on candles and fire for their needs.

"Childproofing" is unheard of.

The Vargas committee and chairperson Lynn Bassini, MA, OTR, CHT created a very ambitious 11 day mission program consisting of a 2-day hand surgery/therapy conference followed by a week of surgery and

therapy. The mission team was comprised of surgeons, therapists, nurses, OR technicians, and lay volunteers from New York, Connecticut, Texas, and Minnesota.

Paula Galavitz, OTR, CHT was co-recipient of the 2004 Vargas award. In the conversations she and I had in preparing for the trip I had come to find great comfort in the idea of having another therapist, especially one as skilled and personable as Paula, to share in this experience. When Paula had to withdraw from the trip she generously shared her splinting lecture materials for the conference. Her presence was missed and her generosity appreciated greatly.

I arrived in Guatemala City as part of the New York contingent. There the Guatemalan Pediatric Foundation acted as host to our

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The waiting room of the Pediatric Foundation on "clinic day."



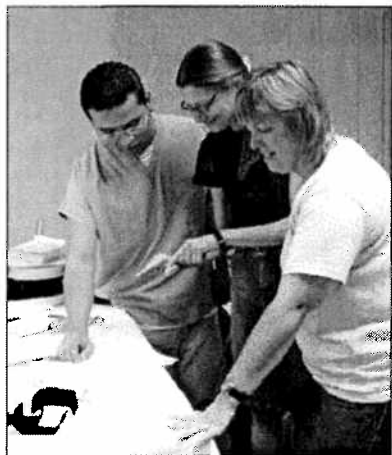
Sharon Dest, PT, CHT, at right, with patient at therapy clinic.

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mission. The Foundation facilitated customs, provided drivers and vans, co-sponsored the conference, and allowed us to use their clinic, surgical, and therapy facilities for our mission work.

Our first two days were spent in Antigua City where we were joined by the other mission members and



Lynn Bassini, MA, OTR, CHT and Sharon Dest, PT, CHT teaching local orthotist splinting techniques.

their families and an American nurse now living in Antigua. We used our time there to become better acquainted with the people and customs of Guatemala and the other members of our team. While there, we toured Hermano Pedro, a charitable facility that provides virtually all the healthcare needs of the community. This facility has very little government funding and subsists mainly on donations and volunteerism. There we met our first patient, a young woman named Velma, a quadriplegic. I returned to Hermano Pedro the next day with my splinting tools to fabricate bilateral opponens splints for her. We also arranged for Velma to meet us in Guatemala City for the surgical portion of the mission for a flexor tenodesis to further improve the functionality of her grasp. After visiting some local spots, including a marketplace, art gallery, and jade

factory, we then moved on to Guatemala City.

First business in Guatemala City was a two-day Hand Surgery and Therapy Conference, co-hosted by AAHS, the Guatemalan Pediatric Foundation, Guatemalan Association of Hand Surgery, and Help the Children. The bi-lingual conference was offered free of charge to healthcare providers and students. We anticipated 100 attendees and hoped for 150. Attendance was over 375 the first day and surpassed 400 the second! Speakers included local dignitaries, educators and surgeons, and mission members Lynn Bassini, Drs. Cruz, Patel, Schubert, and Cho, and



Left to right: Miguel Pirela-Cruz, MD, Warren Schubert, MD, and Mukund Patel, MD at conference.

myself. I might mention at this time that I had never lectured before. (My daughter had to teach me how to do PowerPoint and Dorit Aaron provided last minute assistance with one of my three lectures.) Everyone in the team was very supportive. Dr. Cruz was especially helpful in giving me pointers on my presentations beforehand. Thankfully, my anticipated case of nerves never came about. Lynn Bassini and Tzippy Cohen, the other hand therapists accompanying our team, assisted me with a splinting lecture/demonstration. The reception from the people attending the conference, their enthusiasm and attention, was



Splinting lab at conference (from left) Lynn Bassini, OTR/L, CHT, Tzippy Cohen, OTR/L and Sharon Dest, PT, CHT.

overwhelming. The opportunity to connect with our Guatemalan counterparts was exciting. The conference promises to be the foundation for other cooperative efforts between peers and new friends, including Dr. Gustavo Lopez, the Guatemalan Hand Surgery Association, and the newly established Guatemalan Hand Therapy Society.

After the conference, there was no time to rest on our laurels. The next day was clinic day at the Pediatric Foundation. Local churches and other organizations put out notices about the arrival of specialists. People came days ahead of time from all over Guatemala's adjoining areas to register. The team, now joined by Dr. Cadena, evaluated over 100 patients in one day. I've never experienced the unending line of children with burn contractures and congenital deformities and the occasional mismanaged or untreated orthopedic problem. A few families anxious for medical intervention brought patients with other "non-hand" conditions to be seen. For the patients and their families, emotions varied from desperation to hope, from disappointment to relief, but always gratitude for having the chance to be examined. I felt amazed, fatigued, and overwhelmed, but ultimately reconciled to the limitations of time and

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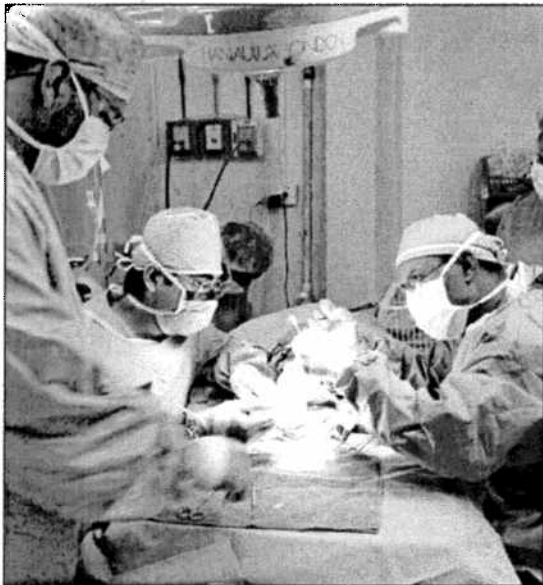
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resources of the mission. Forty patients were scheduled for surgery during the week. Others were scheduled for therapy for splinting,



The Hospitalito operating room

home exercises and scar management education.

The surgical teams worked at the "Hospitalito", a house converted into a surgical center by the Foundation. The days consisted of long hours in very basic conditions. Surgeries included releases of scar contractures, grafting, and correcting congenital deformities. The population was primarily pediatric with a few adults. The availability of follow-up care for the patients after our departure was always a critical factor in the surgeons' decisions as to who would have surgery and which procedure could safely be performed. One boy was deemed so involved that they reluctantly deferred surgery. Later, arrangements were made for him to come to Texas for his contracture releases.

While the others were at the Hospitalito, I was at the Foundation's therapy clinic. I was



The Hospitalito recovery room

warned that I shouldn't count on being able to acquire anything when in Guatemala and brought many supplies with me from the US. As prepared as I thought I was, I found myself scavenging for some unanticipated supplies. Live and learn! Helpers came in the form of Lynn, Tzippy, the orthotists whose casting room I had taken, and college student translators. Over five days, I saw patients identified on clinic day, and post-op for evaluation, exercises, and splints. These children and their parents all stole my heart away! The final day, an enthusiastic therapist who had

attended the conference brought a group of elderly patients to the clinic for splinting. The week's total for therapy: 45 patients evaluated and treated, 60 splints made. We tried to never lose sight of the primary goal of the Vargas: education. In the midst of patient care, time was made in the clinic to teach basic splinting to the orthotists and therapists so follow-up would be available to the patients.

It was a week of long busy days but we still took time each evening to get together for dinner to relax and regroup. I like to say we "ate" our way around the diverse



The "team" visiting an art gallery in Antigua City.

cuisines available in Guatemala City. The Fundacion also treated us to a goodbye dinner where we were able to discuss what we had accomplished in our time in Guatemala and what we wanted to see grow from these efforts. The most exciting development was the establishment of The Guatemala Healing Hands Foundation by Lynn Bassini with several mission members on the board of directors, including myself. GHHF will be returning to Guatemala November 2005 to continue its mission to provide hand surgery and therapy education, and surgery/therapy services to the underprivileged.

After the rest of the mission team left, I stayed on in Guatemala on my own for several days to visit the Mayan ruins of Tikal in the rainforests, Chichicastanango (the largest open air marketplace in Central America) and Lake Atitlan, a magnificent lake ringed by three volcanoes. It still amazes me that a country can be so poor yet so stunningly beautiful.

I was told that I'd never be the same after going on a mission. I know now just how true that is. The people of Guatemala touched my heart with their quiet dignity in spite of abject poverty. The opportunity for me to be part of this team of amazing, caring, talented people was truly a gift. Every day we try to improve the quality of peoples' lives by using our skills as therapists or surgeons. To be able to offer these things to people who would otherwise go without is gratifying beyond description. My only regret upon leaving Guatemala was that there was so much more to be done. I'll be part of the mission returning to Guatemala in November and I suspect more times in the future. Thank you, AAHS, for the wonderful "gift" of the Vargas Award. **H**

HAND THERAPY PROFILE



Sandy Robinson, OTR, CHT

Sandy Robinson, OTR, CHT

Education/Career Experience: BS in Occupational Therapy from the University of Buffalo followed by continued formal classroom and clinical education at the Medical College of Virginia in the early years of the Hand Master's Program. I had the good fortune to begin my career working with Wyndell Merritt, MD and Maureen Hardy, MS, PT, CHT at the Hand Management Center, MCV in Richmond Virginia. For the past 20 years, I have been the Clinical Director of the Hand Management Center of St. Joseph's Hospital in Elmira, NY.

AAHS Involvement: Affiliate member since 2000. AAHS is appealing because of the more informal nature of its meetings, the combination of therapist and surgeons in the same meetings and the wonderful settings for each meeting.

Best Part of My Job: Mentoring a group of "thinking" therapists who plan individualized treatment for each patient despite what the protocol may be.

Major Accomplishments: Directing the development of a high quality rural Hand Center that has grown from one therapist to five, and from four referral sources to over 90.

Clinical Specialties: I most enjoy working with the arthritis patient population but also enjoy the challenge of managing the patient with a complex injury involving multiple systems.

Greatest Challenge: Staying focused on quality patient care in a rapidly changing health care and social environment and helping patients take "ownership" in their own health! **H**

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