

Introducing Hand Therapy to Egypt

Vargas Hand Therapy International Teaching Award 1999: Cairo, Egypt

By Katherine Schofield, OTR/L, CHT

Cairo, Egypt: a vibrant city of over 18 million, home of the monumental pyramids of Giza, a wealth of history that attests to the presence of a higher form of civilization. A city within a country of 65 million where no hand therapy exists.

Myself, along with three hand surgeons, introduced this specialty to plastic and orthopedic surgeons and physical therapists in this country over a three week period. Our adventure began officially June 12, when we all arrived on Egyptian soil, but the experience began to take shape long before that date. Prior to our arrival in Cairo, Dr. Nash Naam collaborated extensively with the Egyptian government and fellow surgeons in Cairo to organize our itinerary. We were considered formal guests of the government and were subsequently granted exceptional personal service while in Cairo which undoubtedly allowed us to accomplish much more than if we were left to our own devices.

Our arrival at the Cairo airport came at last, where we were greeted by two Egyptian hand surgeons whom we were to work closely with during our entire stay. We were escorted by our personal driver to our hotel which was adjacent to the Nile river in the heart of Cairo. Being in this incredible city places new meaning on the word TRAFFIC!!! There appears to be no

order to the flow of cars, buses, taxis, bicycles on the streets but everyone gets to their destination... eventually. The streets are filled with pedestrians, street vendors, cars, bicycles and noise. It was quite an experience just getting to

plaster. One to one contact between therapist and patient does not exist.

Our schedule was a busy one. We began with a three day structured course in the treatment of the hand and UE where surgical and therapeutic management principles



Therapist Katherine Schofield performs a sensory evaluation in the therapy unit with Dr. Safoury observing.

our hotel.

A visit to the infamous pyramids of Giza preceded our teaching itinerary where we walked inside these ancient burial grounds, marveled at the architecture and rode our first camels!! Then it was off to the El Hehel Hospital in Cairo where the first "hand unit" was due to open during our stay. The unit consisted of one exam room, x-ray facilities, a therapy room, space for completion of EMGs and a waiting room/reception area. It is the first of it's kind in Egypt; hand surgery as a specialty is not common. Most surgery, up until recently, has been done by plastic and orthopedic surgeons who do not devote all of their time to the treatment of the hand and UE. Hand therapy is non-existent as a specialty. Therapy is typically done by the surgeons themselves in the form of patient education; splinting is done with

were presented. We covered such topics as tendon repair, arthritis, RSD, fractures, splinting and nail bed injuries. The course and it's content were extremely well received by the audience of approximately 200 orthopedic surgeons. Dr. Fahamy, one of Egypt's first hand surgeons and thus honored by the International Society for Surgery of the Hand, presented issues that currently face surgeons in this country. What an honor to have him there with us!!

The next item on our agenda were lectures at Alexandria School of Medicine where we again presented on various topics in hand surgery and therapy to plastic surgery residents and nursing students at the university. We were almost late for our engagement here as we experienced an interesting delay on our way to this seaside city three hours from Cairo. We

were stopped along the way by government officials/security and from that point onward had our own escorts into the city. This consisted of no less than five armed guards in a vehicle in front and behind our van. Needless to say we arrived safe and sound but one hour late!!! While in and around Alexandria we had opportunity to visit with the chief plastic surgeon at the university and enjoy a few hours at his summer home along the coast of the Mediterranean. Beautiful and very peaceful, sitting on the beach and observing life here emphasizes the diversity and cultural differences that exist in our world. Women routinely would enjoy the waters of the Mediterranean fully clothed with veils, long sleeves, garments, gloves, etc. while men and children wore bathing suits or other summer type attire.

Upon our return to Cairo once again the moment had arrived for the opening day of the hand unit. The event was televised throughout Egypt and we were interviewed and photographed extensively by the media. The Minister of Health was present along with other government officials where the need for hand and UE services was emphasized to the public. Again, it was quite an honor to have the opportunity to participate in and influence such an important event. We also had opportunity to meet personally with the Minister and discuss our purpose and the need for hand surgery and therapy specialization in Egyptian health care. We appeared on "Good Morning Egypt", a morning program similar to Good Morning America here in the US where we again discussed our purpose, hand surgery and hand therapy issues currently facing Egypt and the need for development of such.

Our last formal engagement was with the Physical Therapy Institute of Cairo where we lectured on vari-

ous topics of hand surgery and therapy. Therapeutic management issues were emphasized. I also spent time discussing ASHT and AAHS, their roles in the continued development of hand therapy and surgery and hand therapy certification. I received very positive feedback from the audience and hopefully some of these therapists will contact ASHT in the future.

Throughout our stay in Cairo we spent time at the hospital with two aspiring hand surgeons, Dr. Yasser Safoury and Dr. Akeem Abdulla. These two surgeons were instrumental in the development of the hand unit at their hospital and they dedicate 100% of their practice to hand surgery. We participated in patient evaluation, surgery and discussed treatment options with the staff. I completed a splinting workshop and demonstrated various treatment strategies and evaluation techniques to the physical therapist and other staff members. It was incredibly enriching to participate in direct patient care where we had opportunity to interact with the patients and their families. We observed many cases of obstetrical palsy, compressive neuropathies

and late effects of trauma such as joint contractures, hypertrophic scarring and loss of function. We had several requests from patients and their families for "new arms". They had heard that the "American doctors" were in town and it is in America where they transplant arms and hands!!

As busy as we all were during our three week stay, we managed to have ample opportunity to see and experience the sights and sounds of Cairo, enjoy local hospitality in people's homes and tour the Nile on a three day cruise where we visited the infamous temples and ruins of ancient Egypt. The time spent in this wonderful country was so enriching and productive thanks to the unending efforts of Dr. Nash Naam. A native of Cairo, a gentle, caring, loving man who demonstrates his passion and love for hand surgery and therapy by giving so much of himself back to his country. He has been instrumental in the development of hand surgery in Egypt and continues to be diligent in promoting this specialty. He returns to Egypt regularly where he actively participates in lectures and

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Dr. Nash Naam enjoying time with a patient and her family.

THERAPY CORNER

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courses on hand surgery. Drs. Safoury and Abdulla have visited his practice in Effingham, IL where they spent 6 months with him and his staff further developing their skills.

Let me not forget the efforts of two other wonderful surgeons, Dr. Leonard Bodell and Dr. Richard Brown who accompanied us on our trip. They graciously volunteered their time to accompany us on our journey and their presence and contributions were simply immeasurable. I have been fortunate to



The splinting workshop proved to be very valuable to both the physicians and therapists.

work with Dr. Bodell in a private practice setting for nearly 10 years; the opportunity to share our experiences and expertise as a team was extremely valuable to our colleagues and friends in Cairo.

Walking away from such an experience leaves behind so many wonderful memories and opens up and builds on future hopes and dreams. I sincerely hope that we may return to Egypt over the next few years to develop our ideas further and see some form of hand therapy in practice. I also hope to participate in the education of future hand therapists by sponsoring a student to come to this country where they may take back the core, necessary skills needed to foster the growth of this profession in Egypt. **H**

HAND THERAPY PROFILE

Colette Jewell, OTR, CHT



COLETTE JEWELL, OTR, CHT

Personal: I was raised in Denver but have spent the past 15 years Visalia which is an agricultural community in Central California. After work I switch to the "second shift" which consists of raising two daughters and a son. I enjoy spending time with my family, soccer games, movies, and mountain activities like hiking and skiing.

Education: I graduated from Colorado State University in 1977 with a BS in Occupational Therapy. I received my hand therapy certification in 1991.

Employer: I manage the outpatient hand therapy clinic of a 500-bed hospital, Kaweah Delta Health Care District (the only regional care facility between Fresno and Bakersfield).

AAHS Involvement: I originally became involved with AAHS in 1987 when I was in private practice. I found that I enjoyed the meetings as well as their location and the way therapists were included in the organization. Since then I have served as the chair for the hand therapy committee, received the 1997 Vargas Hand Therapy Teaching Award, which involved traveling to Kenya with Dr. Paul Weeks. I currently serve on the Vargas committee.

Best Part of My Job: Guess it sounds kind of "Hallmarky", but it's the people; the ones I treat and the ones with whom I work. I have learned so much about the things that really matter in life from my patients. When they come to me for therapy, with mangled hands and feeling hopeless, I get great satisfaction from being a part of their journey towards physical and emotional healing.

Major Accomplishments: Combining career and family; clinical specialties; splinting, cumulative trauma, arthritis, wound care.

Greatest Challenge: Remembering to treat the patient as a person, regardless of insurance, hectic schedules, understaffing, or personal problems.

Three Words That Describe Me: Principled, tenacious, spontaneous.

