

Palm Beach County Doctors Bring Medical Equipment, Hope to Desperate Haiti

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By Stephanie Horvath, The Palm Beach Post, Fla.

Oct. 17--Paramedics wheeled the man's body, draped in a white cloth, through the lobby and out the front door of the hospital past men wearing suits with corsages pinned to their lapels and a group of Haitian journalists.

A wailing young woman, a relative, stumbled after the gurney. An ambulance had brought the man to the hospital from Cite Soleil, a nearby slum where he was shot multiple times. He died at the hospital here despite attempts to revive him.

That morning, United Nations troops had stormed Cite Soleil looking for gang members who allegedly attacked the peacekeepers. No one knew whether the dead man was a target or simply an innocent bystander caught in the crossfire. Within moments the ambulance transporting the mortally wounded man was gone.

The men in suits and the assembled Haitian journalists were at the hospital for a rare announcement of good news: Two doctors from Palm Beach County had collected \$750,000 worth of modern medical equipment that had just been delivered to the Port-au-Prince hospital. The men led the small crowd upstairs in the hospital to begin their news conference, delayed by the horrific event that would have brought life to a standstill in some places in the United States, but was merely a sad interruption here.

Haiti is a broken country, a place where 80 percent of the people live in poverty. Violence and instability are the rule rather than the exception. The two Palm Beach County doctors recently stepped into that instability, determined to create a health-care system in a country where the majority of people don't have access to basic medical care. Dr. Wilhelm Larsen, a Haitian native, and Dr. Albert La Torra brought the donated medical equipment from Columbia Hospital in West Palm Beach. They see it as the first step in a grand plan to build rural health clinics and medical, nursing and dental schools.

But before they will be able to fulfill their long-term dreams, they have to clear several hurdles inherent in bringing modern health care to a volatile, poor country, as well as rise above gaps in their own experience. Both men are skilled doctors, but neither has familiarity with raising money or running a humanitarian organization. And right now they don't have the millions of dollars needed to accomplish their lofty goals.

Despite the formidable obstacles, the doctors, both in their 60s, are confident.

"In 10 years, we should have everything," Larsen said.

"Maybe less," La Torra added.

This should be a simple story about doing good in a country that's experienced so much bad. Unfortunately, few things are simple in Haiti.

"Everything we bring down here gives them a headache. They won't complain because they need it and they appreciate it," said Larsen, who was born in Haiti and moved to the U.S. in 1974 to practice oncology. "But they have to find a way to use it."

The idea seemed easy. Donate used medical equipment in good condition to a Haitian hospital in need. Larsen, now semi-retired, got the idea in April 2004 when he visited the hospital, called OFATMA, an acronym for Office D'Assurance Accidents Du Travail Maladie Et Maternite. His brother had just been appointed its general director. Larsen toured the old cement building with its peeling paint and old medical equipment.

Because of a miscommunication, he thought some of the disrepair was the result of looting in the chaos surrounding President Jean-Bertrand Aristide's flight to exile in February 2004. In fact, the hospital was never looted. But it still needed help.

With help from his friend La Torra, a semi-retired general surgeon, it took a year to collect enough equipment from Columbia Hospital to fill a 45-foot long metal shipping container. The load ranged from gynecological exam tables to heart monitors to mammography machines. After getting tangled in yards of red tape at the Haitian port, the first load was finally delivered to the hospital here in early September.

Larsen and La Torra flew to Port-au-Prince to witness delivery of the first shipment. Later, the doctors filled and shipped two more containers from Florida, bringing the total to \$1.56 million in donated equipment.

Putting the medical equipment to use in Haiti will be complicated.

For example, a sophisticated X-ray machine will help doctors set bones precisely, but first, the Port-au-Prince hospital must build a large, lead-lined room to accommodate it. Two high-tech machines -- a mammography machine and a cryostat -- will help detect and preserve suspicious lumps in women's breasts. But without a pathologist to diagnose them -- cancer or no -- a crucial step is missing. And 24 electric hospital beds will make patients more comfortable only after the hospital installs enough electrical outlets so they can be used.

The hospital is short on money to do those things. The Haitian companies that fund it owe it 151 million gourdes, or \$3.6 million. OFATMA is funded by a kind of workers compensation insurance that the law requires the nation's employers to pay. The hospital's operating budget for next year is \$2.3 million.

The hospital must find a way to incorporate the medical equipment into its 37-year-old building. Built from concrete block, it has no central air conditioning and poor lighting. The hospital's emergency generator goes on at least once a day when the state-run power goes out.

Outside, a broken-down ambulance with a flat tire is parked near the emergency room. Inside, the room where surgical instruments are sterilized has a green army stretcher leaning against one wall, and its windows are open, letting in air and germs. The lab has one microscope, which the doctors say is inaccurate. Linens are hand-washed in sky blue sinks and hung out to dry on a wire. The hospital has three washing machines, but they don't work. Rooms hold three, five or six patients, and many are equipped with old iron beds.

Most patients interviewed at the hospital said medical care is good, though doctors and nurses work under challenging conditions.

"This is the hospital that I know. This is where they take care of people," said Santa Phillip, a 24-year-old lying in bed after a Caesarean section. She lost the baby, her first. "They're taking care of me very good. The nurses always come on time."

Phillip was lying on a bed made with gumball-machine-printed sheets. The intravenous tube hooked to her arm hung on a pole missing one of its wheels.

Lying on a bed in a men's ward, Frantzen Derilus, 23, whose left arm was hit by a stray bullet the week before, wore a homemade sling, a strip of cotton tied around his neck and hung in front of his chest like a man's tie. Outside on the breezeway, Dr. Jacques Pierre-Pierre held X-rays up to the sunlight while he talked to patients.

In the emergency room, a newborn baby girl, wrapped in a white hand towel, slept on a padded table. The hospital has no bassinets. She didn't move, and her face had a gray cast from fluids that had dried. Was she alive or stillborn? La Torra walked closer to investigate. Alive. Her lips were pink. She began to squirm.

Her name was Shama; a few hours later she was lying on a bed in a dark, hot room with her mother, Mary Ange Deli, a 32-year-old mother of three from a town north of Port-au-Prince. Established by Francois "Papa Doc" Duvalier in 1968, OFATMA treats working people. The hospital doesn't receive any money directly from the government.

The hospital also treats people from the surrounding neighborhood, many of whom are too poor to pay for care. Some of the high-tech medical equipment from Palm Beach County, once it's installed and running, will be available to poor Haitians for the first time. Alex Larsen said it's the first time a public hospital in Haiti has had a sonography machine or a mammography machine. Right now, he said, those devices are only at private hospitals, which charge too much for the average Haitian.

The hospital is in Cite Militaire, one of Port-au-Prince's dangerous slums. It's guarded by armed security, men in black T-shirts carrying large guns. During the past few months, many patients have been treated for gunshot wounds.

"The area is very hostile," said Rochelle Vernet, a lab technologist who has worked at the hospital for five years. "Sometimes when the violence is very high, you don't find many patients here."

On their recent visit, Larsen and La Torra traveled everywhere in Haiti in a convoy of SUVs protected by armed guards. They zipped through the crowded streets of Port-au-Prince with the aid of an official government vehicle with a siren.

"We demand protection because we are concerned," Larsen said.

On the drive to the news conference at the hospital to announce their big medical equipment donation, stability and security seemed far off. The driver, who had a handgun wedged into the seat next to him, sped around colorful trucks that carry people in their beds, and United Nations SUVs. He entered Cite Militaire, turning onto an eerily quiet road with no cars, only pedestrians.

A security guard in the passenger seat, a linebacker-sized man named Edourd Celestin, rolled down his black-tinted window, cocked his large automatic gun, and aimed it out the window, ready to shoot. The empty streets are a warning in Port-au-Prince. Indeed, the day before, on this same stretch of road, one of the hospital's trucks was attacked by three armed men and flipped over while trying to flee.

On this day, the doctors' SUV passed a U.N. jeep full of soldiers in blue helmets. Two more turns and they arrived at the hospital, which had its own armed security guards at the front door.

Larsen and La Torra plan to continue collecting medical equipment from Palm Beach County hospitals and shipping it to Haiti. However, they have bigger dreams. For 20 years, the two friends have talked about creating a health-care system in Haiti, and they recently formed the La Torra-Larsen Medical Foundation to raise money for their projects.

They want to build a medical school, a nursing school, a dental school and medical clinics with satellite-linked computers in rural villages. They want to bring in doctors from the United States to rotate in Haitian hospitals and provide training.

"It's exciting to plan the future for a whole country, which is what we're doing," La Torra said.

Haiti certainly needs more doctors -- the country has fewer than 2,000 for its 8.12 million people -- and more clinics in its rural villages.

On a drive outside Port-au-Prince, the doctors stopped at a small village just a few miles from the border with the Dominican Republic. When they arrived, the village's people, many wearing old, mismatched clothes, came out of their cement houses and mud shacks and surrounded them.

They were Haitian sugar-cane cutters deported from the Dominican Republic; their only health care was at a clinic a few miles away that was too expensive. One woman displayed an ugly burn on her arm she said she got while cooking; she treated herself with a cure-all oil. A man described stomach pain to La Torra, who diagnosed an ulcer. An outspoken 15-year-old named Jocelyn Jean said the villagers had problems with diarrhea, fevers and skin diseases, and that women often gave birth without assistance.

"When you see something like what we saw today, it only makes me more committed to the project," La Torra said later.

La Torra explained the doctors' long-term vision at the delayed hospital news conference, detailing plans for clinics, visits from American doctors and a medical school that would require graduates to work in Haiti for four years. He said later that he made so many promises in front of the Haitian press in order to give people here hope.

But the La Torra-Larsen foundation has no money. So far, the two doctors have paid the costs of collecting the used medical equipment. They declined to say how much they've spent, saying only that they no longer can afford it.

"The whole thing as I see it for us in the La Torra-Larsen Medical Foundation is to establish seed money to start the foundation. Our goals and dreams will never come true without seed money," La Torra said. "We're not talking \$5,000. We're talking millions."

The doctors' foundation needs money for a lot of things: To fly American doctors in to train the Haitians to operate the new equipment and to buy a second-hand truck to transport donated equipment. In the near future, it will need money to build and staff a rural clinic and run a mobile medical unit that will travel around the country. Eventually, it will have the gargantuan task of raising enough money to construct and staff a medical school.

The ambitious doctors hope to pull in up to \$150,000 during the next year, but neither man has raised money before.

"At this stage, we're very naive on what to do," La Torra said, adding that they are looking for help from experienced fund-raisers.

U.S. Rep. Mark Foley, R-West Palm Beach, likes the doctors' ideas and said he'd be willing to participate in fund-raising activities. Foley also said a proposed federal program waiting to be considered in the U.S. House could provide some money for the two doctors. Meanwhile, the doctors' ideas for raising money are grass-roots and sketchy. Their plans include asking Palm Beach County doctors and churches for donations and taking out newspaper advertisements asking people to send \$1 a month.

"Even if 50,000 people decide to give \$1 the first month, that will be some money," Larsen said. Veteran fund-raisers in Palm Beach County said that isn't the way to go.

"It's much more efficient to find one or two large foundations or gifts," said Pam Henderson, who has been fund raising for 15 years as the executive director of the Rehabilitation Center for Children and Adults.

Grass-roots efforts can work, if the mission and goals are clear, said Suzanne Cabrera, president of the Palm Beach County chapter of the Association of Professional Fundraisers and executive director of The Lord's Place, a West Palm Beach nonprofit for the homeless. Cabrera said her

charity raised its first \$130,000 when its founder slept in a trash bin for 30 days, driving home his plans to aid the homeless.

"People are really looking for accountability these days," she said. "Just saying it's a good cause and we want to do good things isn't enough."

Larsen and La Torra are undeterred, however.

The day after their news conference here, the Palm Beach County doctors, several of the Port-au-Prince hospital's administrators and their armed guards took a day trip through the Haitian countryside to the border with the Dominican Republic.

Along the way they stopped in the town of Ganthier, the hometown of Haitian President Boniface Alexandre, who had sponsored several projects in the town, including a new high school. As they stood in front of the school, the smell of fresh paint still hanging in the air, Larsen and La Torra decided to build their first clinic in Ganthier.

"This is a growing area. We could use the school to teach people. We could put health prevention in the school," Larsen said.

He estimated they could build and start running the health clinic for \$50,000. He was optimistic, saying the government will probably give them the land for a small fee. Before they left Haiti, the doctors hired an architect.

"By February, we should be doing a groundbreaking at least, maybe finished," Larsen said. "It's not going to take too long to do it... We'll find a way to get the money."

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