

# PERUVIAN AMERICAN MEDICAL SOCIETY

## *VII HUANCAMELICA MEDICAL MISSION*

[www.huancavelicapams.weebly.com](http://www.huancavelicapams.weebly.com), Facebook: [Huancavelica Medical Mission](#)

The current Programs in Huancavelica, the poorest state in Peru, and according to the United Nations statements, one of the poorest areas of the Planet, started by specific request of "Cia. De Minas Buenaventura", a local mining operational institution with a strong and sincere Program of Social Responsibility, in 2005. The preliminary planning was created with support of the Department of Family Medicine, from the Southwestern School of Medicine from Dallas, Texas.

### **Main objectives were:**

1. To strengthen the only Government Hospital- at that time- for the whole state and its population estimated at 600,000 inhabitants.
2. To upgrade its capacity to deliver a basic but strong quality care for its people and improve the offered services by providing the tools that were lacking to the current physicians in the area.
3. To make the Hospital more attractive to new physicians within the most needed specialties by offering them the medical equipment they would need to practice effectively.
4. To obtain a most needed change in the ethical and legal compliance of hospital services towards the patients, including awareness of the Constitutional Rights to protection and health and the respect for their status and culture.

I am happy to report that these objectives are almost fully accomplished now.

### **VOLUNTEERS**

This year, we had 49 volunteers: physicians, nurses, technicians, students and logistic support personnel.

Please see attached roster of volunteers and rendered services. ( attachment 1)

**SURGICAL:** General & Laparoscopic, Orthopedics & Arthroscopic; Gynecologic & Obstetrics, Plastic & Reconstructive, Thoracic, Vascular, Pediatric.

**ANAESTHETICS:** General, Pediatric.

**ODONTOLOGY:** General, Odonto-Pediatrics and Implantology.

**MEDICINE:** General, Pediatrics, Pulmonologist, Laboratory

It is remarkable that most 2<sup>nd</sup> week volunteers were associates from Northern Texas PAMS Chapter and Dallas School of Medicine from Southwestern Texas University.

### **RENDERED SERVICES**

We were able to serve 1226 patients. Details in attachment number 2. From these, 116 were patients from the ESSALUD system.

30 surgical procedures were done and 36 dental procedures. Most of these procedures required high degree of specialized care. For example:

- 1- Child, 4 months old, 4 kg of weight was found with a congenital large liver tumor, weighting 2 kilograms. Successfully removed with our Pediatric Surgeon.
- 2- Two patients with large Thyroid Cancers. Final histopathological results not yet available.
- 3- The first four arthroscopic surgeries to be done in the Hospital and State. Equipment donated by Dr. Steve Mora M.D., member of Southern California PAMS Chapter. We brought the equipment in our luggage; it was installed by Dr. Mora who mentored the local Orthopedist, Dr. Yuri Drogo in the use of the devices.

### **DONATIONS**

- 1- Our illustrious partner, Direct Relief International from Santa Barbara, California donated two containers with a total value for 260,000 dollars. All the donated goods were consulted and pre-approved by the local Hospital and Regional Director of Health. So far, over 18 years, DRI has given us over 15 million dollars for the Peruvian Health system.
- 2- A second partner, AMERICARES, donated medical supplies like anesthetics, sutures, for a total value of 8,000 dollars, transported and delivered by our volunteers.
- 3- Dallas group from PAMS chapter, also brought and left to the Hospital a good amount of medical supplies, plus generous contributions to the local Orphanage.
- 4- One fully operational used set of arthroscopic tools and equipment was donated as aforementioned.
- 5- The local Orphanage needed serious structural repairs. A contract was made for total repairs for a cost of 60,000 soles, equivalent to 22,222.22 US dollars (change @ 2.7 soles per dollar). Documents attached (3). One half of these monies were disbursed by Cia. De Minas Buenaventura and one half by the Huancavelica Medical Mission.
- 6- Additionally, we bought new supplies, utensils, cooking ware and dinner ware for the Orphans who total a number of 50 children. Those materials were missing or severely deteriorated.
- 7- Bedding, clothing, two pair of shoes for each inhabitant at the Orphanage, known as Aldea de los Niños San Francisco de Asis were provided for a total cost of additional four thousand dollars.

Most of these donations in item 7 were gifted by the North Texas Chapter of PAMS.

## **PARTNERSHIPS**

### **1- Buenaventura Mining Company:**

As usual, our main Peruvian Partner donated Logistical Support, Land Transportation consisting in hiring four trips with Chartered Buses for all volunteers and a special Private Transportation for the National PAMS President Dr. Lleni Pach who visited us and is a witness of our activity for two consecutive days.

They also paid the daily room for volunteers. Not including personal hotel expenses.

Additionally, we obtained this Company to assume all the costs of the processing of the Two containers –that did not arrive to Huancavelica on time and are still having trouble to clear customs in spite of our efforts- by transferring the costs from PPP to Buenaventura.

Just in this issue more than thirty thousand additional dollars have been paid so far.

**2.- Peruvian American Medical Society, both Southern California and Northern Texas Chapter**  
Both Chapters provided integral and comprehensive support to the Mission in all aspects that were needed.

**3.- Direct Relief International =**[www.directrelief.org](http://www.directrelief.org)

Americares= [www.americares.org](http://www.americares.org)

**4.- Mrs. Luciana Puente's Association, named " Al Cole ...en bici" (To School...bike riding")**

donated this year 184 bicycles different school students in the State. She partnered with PAMS to give 38 bicycles to the Orphans in the city Orphanage.

## **SERVICES to Peripheral HEALTH POST IN CCOCHACCASA**

1-We delivered Medical, Pulmonologist, and Dental services to 300 patients in the Health Post, - category 2-1-, located in the district of *CCochaccasa*, 3000 inhabitants, located a 4,600m. above sea level, during two days of work for that poorly served population. We donated dental supplies for the local practitioner and medical supplies for a total estimated worth of five hundred dollars.

2- We traveled with 8 volunteers to explore the possibility of working in the city of PAMPAS, province of Tayacaja, the second largest city of Huancavelica State, by request of the local Director of Health and the Director of the Local Hospital. It is a modern, well built Hospital with 100 beds and all basic services. Like most, they are deprived of modern and useful medical tools and equipment. And Specialists. They lack good laboratory and auxiliary services. They have one single operative surgical room. They lack good imaging services. It is something to think and plan for the future expansion of Mission services to this area.

Still in planning, in association with the Illinois Chapter, is a second Mission to the district of Huaytara, February 2014, with Dr. Lucy Muñoz, as we did in 2012.

## **SUPPORT TO THE LOCAL ORPHANAGE OF HUANCVELICA**

Our support for this institution also known as "Aldea de los Niños San Francisco de Asis", although it has no relationship with the Catholic Church or the Franciscan Order, dates since 2007 when we learned of its existence. We also support although only in the medical care of

their elderly residents, a Guest House for abandoned elderly, lodging at the excellent living facility and receiving wonderful care for them , totally rendered by a Catholic Association of Nuns devoted solely to this goal. They only need us for geriatric medical support and we give them yearly check-ups and try to cover related needs.

However the Orphanage depends of the Regional Government and the attention they receive from the authorities is really deficient. Their minimalist and ever shrinking budget does not cover any maintenance, any upgrades, and as such after a decade since we first visited it, not only the structures are totally damaged and degenerated, but even the living conditions and personal care as basic as feeding the children, is deplorable to the point they are fed proteins only once a week and in minimal quantities, thus malnutrition is persistent and recurrent. Also the rooms, restrooms, water, sewer, kitchens, and the needed equipments and supplies, are not only minimalist but every day in worsening condition. As of today 50 children, from 8 months of age to 16 years, are living in these awful conditions.

We reached out to our Peruvian Partner, Buenaventura, and contracted structural repairs for a total worth of 22,222.00 dollars, under the local supervision of the engineering department of this partner. This encompasses: Repair of leaking roofs and their drainages, repair of broken windows, repair and replacement of damaged flooring, repaired of wall fissures and molding walls, painting of all the living modules, repair of bathrooms, repair of kitchens, bedrooms and lecture and writing halls. We shared the cost of the repairs with our Partner.

Additionally, we obtained water heaters for each living module, new kitchen stoves and independent natural gas balloons and connectors, kitchen and dining ware. Repair of beds and mattresses, new bed linen and pillows. We also repaired the broken and damaged children play ware like swings, and drying clothing lines. Each child and their keepers received two pair of new shoes, plus clothing, books, crayons, toothbrushes and dental paste.

Finally, refreshing courses on dental and personal hygiene, English, computing games, and drawing and painting, plus how to ride a bicycle and safety protocols for such driving were taught, while also sharing with the kids how to ensemble, disassemble and repair the newly donated 38 bicycles we brought for each one of them who was 6 years or older.

All these additional costs were done at a total cost of a 6,000 dollars budget. Not counting the bicycles which were donated by a joint effort from the Dallas Chapter and Mrs. Luciana Puente.

North Texas Chapter, led by Dr. Pablo V. Uceda donated the 28 bicycles and Mrs. Puente the transportation costs to final destination.

### **COMMENTARIES:**

What has changed at the Hospital Huancavelica? A lot.

Where there was nothing but the four medical specialties, Medicine, General Surgery, Pediatrics and Gineco-Obstetrics when we came the first time seven years ago.. . today there are ten specialties available: Infectious Diseases, Intensive Care, Cardiology, Pathology, Orthopedics, Pediatric Intensivist, Pulmonologist, Anesthesiology, Public Health and Radiology.

Great progress!

PAMS has helped a lot to this multiplication of services, since we have provided more than one half of the modern equipment available and needed to practice those specialties and even more, providing a lot of the materials needed to do so, every year since the inception of the mission. Just this year we bought almost two thousand dollars of materials to facilitate the work of the Hospital Laboratory Services, where they lacked them. By providing all the above, our specialized colleagues found they could indeed work and offer best care with tools we provided so they came...and they stayed. The Hospital now routinely performs laparoscopic procedures (there were none when we came) and now they can also do arthroscopies. Our colleagues feel happy and showed us this time a warm and friendly collaboration.

That is another big step: an old feudal staff regime and administration has disappeared and a gentler, much younger medical staff is open to foreign assistance without prejudices or fears.

**What is still missing?** Only ten per cent of the State inhabitants are regularly served by this medical center. We need to reach out. Specifically this year, we were disappointed by the lack of cooperation from the Health Services to attract patients from outlying areas, mostly due to the absence of good coordination with the peripheral networks to funnel the far away patients we used to see every year, and we missed in this 2013. Less patients from far away, and as a result less patients in the total sum.

This fact adds to consider expanding our area of services.

### **BUROCRATIC BARRIERS**

As a whole, PAMS has lost the grasp we had on top public offices who must deal with our activities in Peru. As a consequence we face marked increase in difficulty to process most requirements for the Missions. In 2013, we have worked for 8 months to prepare this Mission. We used to do it just in four months in prior years. And in spite of early start, and two trips to Peru to advance what we saw was not progressing as before, in spite of repeated personal meetings with functionaries at the Ministry of Health in Lima and Huancavelica, plus the Regional Governorship; with the local Office in Peru from PAMS PARA EL PERU, we did get NONE, repeat NONE, of the needed documents on time. Plus, we did not get through customs our donations within two containers shipped from USA.

In some ways it was fortunate there was a National Medical Strike in Peru at our arrival and our services were badly needed. Thus, all local authorities did not create any fuss for our work. But it could have gone the other way too.

PAMS needs to do a much better work to support the Missions.

Respectfully yours,

Ralph G. Kuon,  
Medical Director

Dr. Pablo V. Uceda M.D.

Co-Director.