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CHILDREN'S SURGICAL CENTRE

Rehabilitation surgery for poor disabled Cambodians

Kien Khleang National Rehabilitation Centre

www.ChildrensSurgicalCentre.org

Providing free rehabilitation surgery for Cambodia's disabled children

Issue 3

3rd Quarter 2006

Greetings

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Unemployment Rate in Cambodia 20%

According to Sok Sina, a researcher from the Cambodia Development Resource Institute (CDRI), the unemployment rate in Cambodia has increased to 20 percent. Those who do who have jobs mainly live in cities, while most people in rural areas remain jobless.

Neak Samsan, a research official from the Economic Institute of Cambodia, says that every year thousands of university graduates who complete their education are unable to find jobs.

Source: *The Cambodia Daily*

Dear readers,

Welcome to the third edition of our newsletter. As usual, we've had a busy quarter that has included repainting the hospital with the assistance of the ever-enthusiastic staff from ANZ Royal Bank, along with hospital staff and some hapless Irish backpackers who all spent their weekend working up a sweat painting our building, resulting in a gleaming white edifice at the Kien Khleang compound.

A shortage of blood this quarter spurred us to arrange a Blood Bank drive. I usually manage to jolly, coerce and shame my staff and students into donating enough supplies to see us through the critical periods, but even having done so this time it proved to not be enough. The last thing we need when we're doing surgery is to run out of blood! Thankfully our local supporters, the U.S. and Australian

Embassies, responded with alacrity; their contributions netting enough supplies to last for another year – a huge relief.

As always, we have our experiences here that never let us forget how difficult life in Cambodia can be and there is always at least one case every quarter that serves as a metaphor for where the country is at in development terms. In August we were visited by six year-old San Lin, who accidentally stabbed himself in the eye while playing with a knife (parents out there – we know what you're thinking!!). His story is over the page.

While our supporters are familiar with the work we do, we are often confronted with a range of congenital abnormalities that more often than not have been neglected until the sufferer is an adult. This is usually due to a combination of factors,

such as the relative expense of the treatment and a lack of available surgical skills. In this newsletter we have an example of a rare cranio-facial deformity, a vertical nasal cleft, which required a lengthy and expensive repair that demonstrates why we continue to need your support and ongoing funding from our donors.

As Christmas rapidly approaches, we've introduced some sponsorship gifts as part of our fundraising efforts. There are postcards and T-shirts, each valued according to the cost of an operation. All profits of course will come to CSC to fund surgeries and you know how effectively we put these to use. See inside for ordering details.

As this will be our last issue before Christmas, I wish you & yours a very jolly & safe holiday season!

Jim Gollogly

Patient Profile: San Lin

Every parent's worst nightmare is to witness an injury to their child. In countries where there are few medical services available to begin with, any injury requiring specialist, sophisticated surgery is even more difficult to obtain. Harder still for parents is that they may have no access to government supported health care and may never have enough money to fund the surgery to save their child's faculties...

Such were the circumstances when six-year-old San Lin was presented to CSC in August 2006. He had accidentally stabbed himself in the eye while playing with a knife and his distraught parents had immediately recognised the risk of their only son losing the sight of one eye or the eye itself. They collected up their entire life savings of \$100USD and started on what was to be a long day's round of the hospitals and commercial clinics

of Phnom Penh, only to be told at every facility that the surgery to save his eye would cost \$200USD. San Lin's father, a moto-dop (motor-bike taxi driver), earns an average of about \$60-80USD per

month, leaving little to put aside for emergencies while his mother, a housewife, earns nothing outside the home.

Below: San Lin post surgery.



By the time the frantic parents arrived at CSC with San Lin in tow, some 12 hours had elapsed since the initial accident and this was not an optimum emergency scenario from the outset. While emergency surgery is not what we do or have ever aimed to do, given the circumstances we had little choice but to perform the surgery on San Lin's eye.

The surgery went as well as could be expected, with Dr. Phanny performing a repair to the corneal perforation. There was significant intra-ocular haemorrhaging and San Lin's eye was saved but it is uncertain that he will regain his sight in that eye. We will refer San Lin to Dr Judy Newman, our regular volunteer paediatric ophthalmologist when she arrives in October for her expert opinion on the possibility any surgery that may restore his sight. We will keep you posted on the outcome.

A big box of things

A forty-foot container was the latest of gifts to CSC donated from Dr. Mark Moser, our long-term supporter and Florida anesthetist. It has taken many days of unpacking and DIY piecing back together and was better

than Christmas for all the surgical goods it brought forth.

Pictured here are Kanya Gollogly and Maintenance man Sok Sary with some of the still-wrapped contents of the container.

Thanks Mark!



Visitor Profile: Geni Blythen

Geni arrived at CSC in June this year, halfway through a 12 month trip around the world. Previously working in London as a Reporting Officer in Biological evidence for the Forensic Science Service, Geni's experience at CSC has inspired her to make some life changing decisions.

"As much as I loved my job and the sense of helping the community, I felt that there was more to life than this. So I sold my house, gave up my job and set off for a year's traveling and undertaking short-term projects around the world. My first project was working on a game farm in South Africa, then around India before heading to Sri Lanka where I worked at an elephant orphanage. My trip was fun and hard work but nothing could have prepared me for my next stop, Cambodia. I arrived at CSC wanting to help, not wanting to be a burden and hoping it would be a mutually beneficial experience. I didn't know what I would be doing or what to expect from a hospital in the developing world.

My time at CSC has been spent shadowing and on occasion

assisting the nurses and surgeons in theatre, as well as helping visiting medical students with their projects. This involved going to local schools and researching how much children know about the prevention of fire and treatment of burns. These school visits were combined with the eye clinics that the CSC doctors hold regularly at schools around Phnom Penh. I assisted by giving the children vitamin A drops, which is critical to the development of children's eyesight. I also took photos of patients before and after surgery so CSC can accurately document the work carried out here.

I also attended the monthly acid burn survivor meetings, which provide a forum for acid burn patients to meet and receive assistance such as legal advice, skills training and counseling. It was very encouraging to see these patients come together and to know that there are people out there who are trying to help them rebuild their lives.

I have loved my time at CSC. Staff always took the time to translate consultations and explain procedures and

operating techniques. Many times I was in the operating room and surgeons haven't had the correct instruments and have had to make do with tools that aren't right, giving them greater complications, but instead of getting frustrated, they just get on with the job. I am amazed at the patients, firstly how long they leave their conditions before seeking treatment, but also how amazingly they cope. Patients are often in great pain and they don't complain, they just grin and bear it and are truly grateful for the help they are given.

Spending time at CSC has reignited my interest in medicine and has proven to me that I want to contribute. Seeing the need for doctors here has inspired me to research medical schools with the intention of going back to school to study medicine! CSC is a great cause and does such worthwhile work. It's the sort of place that is easy to make an emotional connection with and I hope to see the work at CSC continue well into the future."

Geni Blythen



Visitors, Events and Statistics

Training for Dr. Roo

Ophthalmologist Dr. Roo departed CSC this quarter for the Philippines to begin a two year Ophthalmic Residency at Our Lady of Fatima University Hospital in Manila. This was made possible in part through the kind donation of Dr. Judith Newman, our regular paediatric ophthalmologist.



Cocktails for Cambodia

Our stalwart supporter Don Hancey, creator of the Western Australian 'Cocktails for Cambodia', a hugely successful fund-raising night, visited CSC this quarter and made the most of his time by taking in some of the local scenery and visiting his favourite charities. Don is seen here making friends with Wat Phnom's most famous resident, Sambo the elephant.



Surgery from 01 July to 31 September 2006

	Adults >25		Children <25		Total	
	M	F	M	F		
Reconstructive Surgery	Cleft Lip	1	3	25	21	50
	Cleft Palate	0	1	7	10	18
	Polio	0	0	0	2	2
	Acid Burn	1	0	1	0	2
	Burn Contracture	2	1	6	3	12
	Skin Graft	6	1	8	3	18
	Fracture - ORIF	2	2	1	0	5
	Osteotomy	1	0	0	0	1
	Bone Graft	0	0	1	0	1
	Dislocation Reduction	0	0	0	1	1
	Quadriceps Plasty	0	0	1	1	2
	Z-Plasty	1	0	5	3	9
	Syndactyly	0	0	1	1	2
	Other	30	16	22	17	85
Eye Surgery	Cataract	39	60	1	5	105
	Pterygium	36	61	1	1	99
	Glaucoma	4	5	0	0	9
	Squint	0	1	0	1	2
	Corneal Transplant	2	1	0	2	5
	Lid Surgery	9	11	2	0	22
	Evisceration	3	3	1	0	7
	Other	21	25	12	9	67
	Total	158	191	95	80	524

Ministerial Visit

His Excellency, the Minister for Social and Youth Affairs, Ith Sam Heng visited CSC early this quarter, distributing gift parcels of necessities to all patients. The purpose of the visit was to observe the work of health related NGO's in the Kien Khleang compound.



Staff Profile: Dr. Chhor Nareth (Chief of Staff)

Dr Nareth was born in Phnom Penh in 1962 and in 1975 was sent to Pursat with his family in the evacuation of Phnom Penh by the Khmer Rouge. Upon his return to the capital after the fall of the regime, Dr. Nareth completed his schooling and despite his educational interruptions was fortunate enough to "come 90th" in the 90-place University application round. One of his big motivators in studying medicine, he says, was the thought of "being able to look after my family and other people".

He completed his medical training at the Phnom Penh Medical School in 1984 and has since studied overseas on three separate occasions; in France, Belgium and Thailand. Dr. Nareth started work with CSC in 2001 and was appointed to Chief of Staff in 2004. His gentle, unassuming manner make him popular with patients and staff alike. He says that he has been lucky to work at CSC and has "seen a lot of change here in this time, particularly in the equipment we have and can use now".

Dr Nareth is still very

conscious of the limited public health services available throughout Cambodia and he's qualified to comment as he currently also doubles as Chief of Emergency in Anaesthesia and ICU at Calmette Hospital.



"Health services in Cambodia overall are still much better than they were in 1979 but are still not as good as the health services in surrounding countries in the region" Dr Nareth says. He believes that the reason for this may be that doctor's salaries are still too low and there is little to entice doctors to remain in

rural areas where they are most needed or initially attract and retain them to a profession where remuneration is low.

Medicine is an area he would still encourage

provided so much training to local staff, as he has been able to learn far more advanced techniques than he would have been able to otherwise. "Before we used to just do simple cleft lips but now we know how to do many more complex operations", in particular his own specialisation of anaesthesia where he has learned more advanced methods, for example fiberoptic intubation in difficult cases. "It has been a good place to learn the advanced techniques of the many foreign volunteers", he says.

Overall, he says the health services in Cambodia are improving as there are currently 100 graduates per year from medical school and these should eventually cover the losses from the profession. But he feels these additions to the country's health care services should still be complemented by "an increase in the national expenditure on health with the free treatment to poor people." It is, he says, the only way for the country to make progress.

Cambodian people to work and study in, and says the only limitation for CSC now is "the lack of space. We could do a lot more but we just need more space". The forty-bed building is too limiting he claims, as it just cannot accommodate any more patients. He says he has been fortunate to work in an NGO that has

Chef and Bon Vivant, Don Hancey

When asked why I do voluntary fundraising the immediate response is "because I can!" I must admit fundraising was the furthest thing from my mind when I first visited Cambodia in March 2005 to see the legendary Temples of Angkor. The country and its people so moved me that I decided to spend my 50th birthday there in November 2005. On my second trip with fellow travellers Dave Gilmour and his wife Lorraine, we left Siem Reap by moto to the edge of the Tonle Sap, the largest inland lake in South-East Asia and glided along the waters as the dawn peeked through the morning clouds.

Back in Phnom Penh, the Cambodian capital, we were grateful for the hospitality of Peter Michelson, from International Red Cross, working on rural aid programmes in Vietnam and Cambodia and his wife, Lisa Filippetto, Australia's Ambassador to Cambodia. On the second last day of our Cambodian adventure Peter Michelson arranged a visit to the Children's Surgical Centre, run by the "larger-than-life" fella, Dr Jim Gollogly.

Without doubt this is

where Dave, Lorraine and myself were so moved by the conditions at this kid's hospital that we decided on the spot that we wanted to do something to help and this is where the seeds of Cocktails for Cambodia (CfC) were sown.

The Perth Academy of Hospitality was the perfect venue for this function as it enabled hospitality students to work gratis on this fundraiser and in exchange for their generosity we gathered Perth's top chefs and foodies who gave freely of their time and expertise to prepare a feast of foods. A charge of \$50AUD proved to be good value for the 180 guests who supported the event and an auction of sponsored items, raising \$11,000 Aussie dollars.

Well-known media celebrity and gorgeous lady, Verity James, hosted the evening with written endorsements for the aim of CfC were provided by Ambassador Lisa Filippetto and WA's Governor General. All the beverages were sponsored and at the cocktail party the 200 guests were treated to excellent food and wine and audio-visual

presentations provided by the Paul Du Brule School and the Children's Surgical Centre, giving the audience graphic insights into the conditions of the hospital and the school. This was no ordinary fundraiser as there was a lot of compassion felt by all.

Coffee for Cambodia is our next fundraiser here in Western Australia. On 19th November we will gather three of Perth's top coffee roasters (5 senses coffee, European Foods and Fiori) in the historic Fremantle Arts Centre for a fundraising brunch. The coffee roasters will provide their own special blends and roasts, along with baristas to explain the ins and outs of making the perfect cup. Entrance costs will go towards supporting

Awareness Cambodia's orphanage, the Paul du Brule School student scholarship fund and the Children's Surgical Centre.

I now have a better grasp on the many areas of need. I cannot but help be moved by the poverty, the lack of necessities like clean water, adequate nutrition and health care. Low literacy levels affects hundreds of thousands of children, especially the thousands of orphans so disadvantaged in their daily struggle for existence. Care and compassion spring to mind when people ask me to describe Cambodia and there was not a dry eye amongst us as we toured through the Children's Surgical Centre and saw the work they do.

Don Hancey



Patient Profile: Aun Veasna — Vertical Nasal Cleft

Twenty-year-old Aun Veasna presented at CSC on 12th September 2005 with a rare congenital midline facial cleft deformity. The nostrils and nasal cartilage were separated and Aun's eyes were spaced an abnormally wide distance of 91mm between the medial canthi (the inside corners of the eyes). While his visual acuity in each eye was good, Aun had limited coordinated binocular vision. Such a severe facial deformity caused Aun to be ostracized by his community.

The causes for these deformities in many cases may be multifactorial, including genetic risk - family history of a first degree relative in lineage increases the risk of deformity by 20 times. Environmental factors that can affect normal development in-utero can include drug use (diazepam, steroids, phenytoin), folic acid deficiency, alcohol consumption and organic solvents.

Aun was first underwent surgery on 12th November 2005 with Drs Lauwer, Pinzer and Ngiiep, pulling the nostrils together with a

bone graft in the first stage.

He then underwent a second operation on 12th December 2005 to release the adhesions in his right eye in an attempt to move the eyeball forward but this was prevented by internal swelling. It was decided to give this eye six more months to stabilise before being referred to an Ophthalmologist.

Aun's third operation was again performed by the German Maxillo-facial team of Drs. Lauwer & Pinzer on 9th March 2006, with Dr Bonvath assisting. The team reconstructed the nose on a now stable platform of settled bone and skin.

Once his eye is settled and repaired, an ongoing issue for Aun will be whether to undergo further surgery for cosmetic reasons.



Cambodian Acid Survivors Charity (CASC)

It has been decided that we will devote a separate section of every newsletter to the activities and achievements of CASC so welcome to our extended news page! Things are proceeding well at CASC and this quarter has seen the residence of Anna Kania, our volunteer Canadian Physiotherapist and burns massage specialist. She has been busy designing and managing a range of exercises and activities for the residents of Physio House.

As well as supervising these activities, Anna

Below: Anna Kania with patients at Physio House



Above: Our massage trainees practicing on their massage guinea-pigs.

has been overseeing the massage course being given by Chhum Sreya from Seeing Hands, who is herself an acid attack survivor.

Four of our patients have graduated from the course and we hope to be able to

consolidate this training with a return visit from Anna (if she is successful in securing funding to do this), who will give the trainees more comprehensive training in reflexology and acupressure.

We have organised our massage graduates to be placed in a guest-house in a coastal holiday resort for their first solo efforts as masseuses. At present they want to stay together as a group however finding enough clients and accommodation and working space for four masseuses may be a little more difficult than for one or two. We will keep you updated on this in the next newsletter.

Such has been the enthusiasm of our trainees that we are considering the establishment of a small massage centre/beauty

parlor in the suburb of Toul Kork. This idea has several advantages in its favor as the area is a popular one with resident expatriates who usually drive into central Phnom Penh for a weekend massage, but may instead be drawn to our services for the time and fuel savings this may offer. It also represents a good way of keeping our trainees together – a common cause of failure in occupational training courses for acid burns survivors is their anxiety of rejection because of their appearance. Staying together is one way of easing into a transitional stage where the trainees can gain confidence in their new skills while slowly increasing their independence from the group.

Little suitable training has been identified for our male victims who are keen to pursue training in the already over-supplied areas of moto-dop (motorbike-taxi) repairs. Some of the occupational training courses suggested to us have been exceedingly expensive and far beyond the realistic financial bounds of our commitment to occupational rehabilitation. We do continue to have to moderate some of the

CASC cont.



Left: CASC director Kanya Gollogly is seen here presenting Certificates of Completion to our four massage graduates; Ea Kimly, Khom Rany, Thoeun Sokhom and Men Sal.

training expectations of our acid burn survivors but can only commit to training that provides a realistic chance of self-sufficiency on completion. Not an easy task in a country where the unofficial unemployment rate is said to be in excess of 20 per cent.

More news on the CASC front is that Ellen Minotti, Director of Social Services of Cambodia, has commenced her voluntary counseling for all our CASC patients – past and present. Ellen is a US citizen and a long-term resident of Phnom Penh. She is a qualified psychologist

and has offered to visit Physio House regularly to provide counseling to those wishing to avail themselves of this service.

On the legal side of things, the local NGO Legal Support for Women and Children (LSWC), has commenced the voluntary legal counseling of our patients in this quarter, visiting patients at Physio house once per week. LSWC will

complete all the background research required to collect enough evidence required to begin legal proceedings against attackers. Many victims are reluctant to commence prosecution against their attackers - often a spouse - as they are often the only caregivers available to the children of the partnership and any imprisonment would leave them unattended, risking further family disintegration.

ANZ Royal Bank

A very big thanks is owed to the staff of ANZ Royal Bank for their enthusiastic volunteer painting efforts. Seen here are ANZ staffers hard at work and enjoying a well-earned lunch for their efforts. Thank you Sarah and her team from ANZ Royal Bank.



2,700 or 270 Good People

At CSC our surgical programs increase by around 10 per cent per annum. Coupled with more complex disabilities requiring more resources, the start of CASC and training for staff - it all adds up.

Our expenses used to be around US\$20,000 a month. They're now about US\$22,500 a month and continue to increase.

Is it worth it? Yes. We can provide complex surgery to people when they most need it and before it impairs their lives. Their limbs function, they can speak, use their hands, smile and look just like everyone else. Kids can go to school, college then have relationships and get jobs without ever being denied opportunities because of their appearance.

Our staff are becoming more and more skilled and are able to perform increasingly complex surgery, enhancing Cambodia's human resources and the overall development of the country. We can employ more people to be trained in more complicated surgery, complementing and enhancing our programs by adding specialist services to fundamental functions.

But to get there we need another US\$270,000 for the next 12 months. That's US\$100 per year from two thousand, seven hundred people. Or just US\$1,000 per year from 270 people. You choose. But please be one of them.

CSC

Soya Milk at CSC

A balanced diet is important for a healthy lifestyle, but it is even more crucial for individuals recovering from surgery, especially burns. Soya milk is high in protein and Hagar Industry's 'So Gold' with its added vitamins, means that it is a valuable food-source. We had enjoyed for some time a free ongoing donation of soya milk from Hagar, unfortunately this has now come to an end in a re-evaluation of Hagar's business practices. Thank you Hagar for your long-term support of CSC.

Right: A young patient at CSC enjoying Hagar soya milk.

Far Right: An example of a gift-card, the purchase of which will fund a child's operation..



Above: Carl Moller and In Lyna model the new T-shirts, the purchase of which will fund a child's operation.



A Gift of Surgery

Don't know what to give your family and friends this Christmas? Don't want to waste more money on presents that you're sure aren't used or needed? Give something useful, buy someone an operation!

See the gift-cards (below) and T-shirts (left) the purchase of which will fund an entire surgical procedure. In a range of prices from \$35USD for a sight-restoring cataract operation, to a \$250USD life-saving Meningoencephalocoele repair, these gifts keep on giving long after Christmas is over.

For payment and order details please contact Carl at csc@online.com.kh or Penny at tynanpen@gmail.com. For the T-shirts, please include specific size details — Extra Extra Large [XXL], Extra Large [XL], Large [L], Medium [M] & Small [S].



