spotlight

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uring the second week of my surgery clerkship, the phone call came while I was watching a colonoscopy. I stepped out of the operating room to anxiously answer the call that I had been waiting for. Later that night, I was on my way to Haiti, three days after the 7.0-magnitude earthquake on January 12, that had propelled the already precarious country to near ruin.

In March 2007, at the end of my senior year of college and a few months before starting medical school, I made my first trip to Haiti. Shortly after learning that I would be taking a weeklong service trip to a small village in the Central Plateau, the poorest region of the poorest country in the Western Hemisphere, I eagerly awaited my chance to visit the mysterious and complex country that had inspired so many to dedicate their careers to the people there. After visiting Haiti, I was hooked on the hardworking people, the rich culture, and the daily struggle to survive. I knew I would return often to this enigmatic country and work with the people there to improve access to health care, education and employ-

I've returned to that same village in the Central Plateau every year since. On my last visit before the earthquake, I brought some fellow medical students and a physician, and we treated more than 500 people in a makeshift clinic with very limited resources over the course of six days.

When I first learned about the massive earthquake from a glimpse of CNN



One Medical Student's Journey

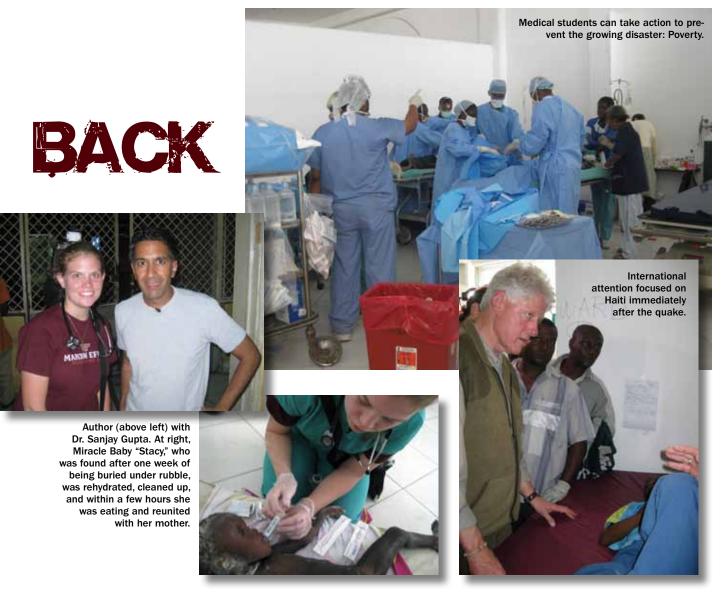
-ALISON A. SMITH

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in the OR lounge of the hospital, I knew that I had to be with the Haitian people to mourn with them and find a way to bring hope and assurance that a more stable future was in sight. I was able to find a family physician from Florida who had chartered a plane to Port au Prince through the Dominican Republic. I walked out of my surgery rotation and asked permission from the dean of the medical school and the surgery department heads to go. I was

given their blessings immediately.

En route to Haiti, I was very apprehensive about what I would find and how a third-year medical student could assist with relief efforts. From my numerous visits to the country, I was acutely aware of how unruly and disorderly Port au Prince could get. I could not even fathom what the situation would be like now. When our small plane touched down in Port au Prince, my greatest fears could not even



come close to the actual devastation that was there. The airport was a war zone: Military planes, U.N. vehicles, private planes, and search and rescue teams crowded the tarmac, along with forlorn-looking U.S. citizens waiting to return home.

The situation on the streets was even more dire. Gas was scarce and the wait at gas stations was hours-long. Dead bodies littered the streets. People were breaking into crypts and burning the corpses to make room. Every inch of the roads and town squares were filled with people and their belongings, seeking shelter.

The night of our arrival, we learned of the situation at the General Hospital in Port au Prince. Thousands of injured and very sick people were waiting to be

triaged, but there were very few doctors and nurses on site. Contrary to the advice of some local Haitians fearing for our safety, I convinced a small group of volunteers from the United States that I had traveled with to visit the hospital. The drive was very dangerous: Looters were rampant on the streets, debris from collapsed buildings and dead bodies blocked the pitch-black roadways, and we were almost out of gas. But we found our way to the most shocking scene that I have ever seen in my life. When we arrived at the General Hospital, the people waiting outside to be seen were crying out in pain and anguish, and there were no physicians or nurses on site, only a Haitian university student brave enough to stay the night. There were only a few overthe-counter medicines in the whole hospital. I felt powerless in the situation but I did what I could to change some dressings, to comfort the wounded, and to make comfortable those who were too ill to hang on much longer. After a few hours, we departed from the hospital and returned at the break of dawn with three doctors, a nurse and more medical supplies.

The next week at the General Hospital was one of the most challenging and rewarding of my life. I witnessed so many unnecessary and senseless deaths that were a direct result of the lack of infrastructure and fair distribution of resources in Haiti. I will never forget the night when I watched a man die from tetanus, a completely preventable disease in the developed world. I helped Dr. Sanjay Gupta from CNN desperately try to convince a U.S. Army team to evacuate a young boy with a skull fracture, only to be told no because the boy was not a U.S. citizen. I watched a man come back from the dead—he was left to die when surgeons refused to amputate his leg because he was already chronically ill, most likely from TB or HIV. He was left outside in the sun to die and was even taken to the morgue, only to be found alive and to have his operation days later. I cared for a small baby girl pulled from the rubble after seven days and helped her get strong enough to be discharged in the arms of her grateful mother. I watched people wait for days and days outside on cardboard boxes and worn-out mattresses to receive medical care. I listened to women singing songs of hope and sorrow amidst the cries of pain and suffering from our patients as the sun set and the hospital grew dark each night. The stories of survival and death were infinite and unforgettable. The people, those we lost and those we saved, have touched my life and my future as a physician in ways that I cannot even begin to comprehend.

I stayed in Haiti for two weeks, working at the General Hospital, before returning to the United States. I went back late last month with some of my classmates to provide medical care in the village in the Central Plateau, which is now overrun with refugees from Port au Prince. The community leaders in this village are counting on our continued partnership in the wake of this disaster.

Medical students have a critical role in the ongoing relief efforts in Haiti.

However, the country, which did not have a strong medical infrastructure before the earthquake, is now overrun with foreign medical professionals. Some of the most important ways that medical students can assist is through supporting groups with a strong presence in Haiti, such as Dr. Paul Farmer's organization, Partners In Health. Most importantly, as the upcoming generation of physicians, we can continue to be strong advocates for the fair distribution of medical care and resources to people of developed and developing nations. We cannot sit back without taking action to prevent the ongoing and growing disaster of poverty.

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