

Strong Medicine

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Edward slowly folded his lanky body to look into the child's eyes. The doctor's murmured Creole Francais mixed with his Southern drawl sounded strange to my ears, schooled in college French.

Our patient, a dark Haitian boy of seven years who appeared falsely rotund in this country of deprivation, gazed into Ed's eyes in wonder. Hovering in the doorway, wearing a clean but worn red jersey that hung from one shoulder, he clutched a white plastic bottle. He searched Dr. Edward Lilly's hazel eyes for truth.

The lean doctor placed a hand on the child's exposed shoulder, as much to steady himself as to reassure the youth. Ed looked over this frail shoulder into a room illuminated by stray sunlight coming through the concrete block windows. The boy's parents hovered behind.

Edward rose to his full 6'1" height, using the boy's shoulder for a boost. He tugged at the edges of his crisp white coat to straighten the folds, and spoke to the boy's parents in the dimly lit room.

"Your son, he is looking well."

Edward's warm smile encompassed the entire family. With a final pat to his small patient, he pivoted and rejoined our hospital rounds.

We were in Leogane Haiti, on a medical mission for Physicians for Peace. I was a new gastroenterologist, having entered private practice just three years before. I had jumped at the chance to come to Haiti with Edward, a local gastroenterologist. Our mission was to install a complete video endoscopy suite into L'Hopital Ste. Croix, the first in this country. A hospital in Suffolk Virginia had donated the equipment. The Marines, still on the island following Aristide's restoration, had delivered the gear by amphibious assault ship. We were to install and use it for a week as we visited. The hospital's chief of staff and fellow gastroenterologist, Jacques Lafontant, was delighted with this visit of colleagues and our bounty of modern equipment and donated drug samples. Ed had been to Leogane several times in the past and had been eager to return.

Haiti is a desperately poor country with an average per capita income of \$600. For the experience of one of our endoscopy procedures, local Haitians would pay the equivalent of \$12 cash. Then, with encouraging words in my stumbling French, we would tell the patient to "Avez, s'il vous plait. Maintenant, respirez, respirez. Soyez calme. Respirez."

After we completed our rounds, I asked about the child. Ed told me that he'd met the boy, Martin, the year before, on his most recent Haitian trip. By that time, Martin had been hospitalized for two months. With sunken ringed eyes, wasted to fifty pounds and unable to eat, with chronic diarrhea and rectal bleeding, his family had brought him to the hospital to die. They knew he would perish, just as they knew that a petro vodou curse had been placed on him by a bokor, or black magic vodou priest.

Vodou, which we refer to as voodoo, is the dominant religion in Haiti. The loa, or spirits which inhabit the body, may be petro loa, angry and bitter, or rada loa, sweet, kind and good. Martin's family believed that a bokor had made petro death curses on their son, and so he would die.

Ed had done a colonoscopy on Martin, and found he had Crohns disease in both his large and small intestines. Unable to absorb nutrients, the boy was starving regardless of whatever food his

poor family might procure. A prescription of Prednisone, the most effective management in this poor country, was started. Ed then returned to Virginia.

Jacques had watched young Martin rapidly improve with correct diagnosis and treatment. However, the boy's family had attributed his improvement to the talisman of the pill bottle along with being in a holy place (the Episcopalian hospital) that was a safe harbor from the vodou. Eventually his parents had moved into the boy's room, and all had been living at the hospital for over a year. The boy carried the

Prednisone bottle everywhere with him, for comfort and protection. Our week in Leogane was hectic. We installed the suite, and worked on so many improvements. We were such a small cog in this wheel.

Shortly after our return stateside, Jacques emailed Edward with a follow-up. Martin and his family had left the hospital, taking with them the medication, but leaving the safe haven of Ste. Croix. The rada loa, the white magic, of the foreign wiseman had convinced them that their son was healed, that the crisis had passed.

We in medicine forget the rada loa that we possess. There is power in the crisp appearance of our white coat, the tone of our voice, or the comfort of our touch. A hopeful word, a loving touch - even a smile can heal our patients. And our magic is without borders. "Your son, he is looking well." This was strong medicine indeed.

Virginia Beach gastroenterologist, Patricia L. Raymond M.D. FACG is an author and consultant, who speaks to nurses and physicians through hospital systems and medical conventions. With her company Rx For Sanity™, she humorously leads physicians and nurses to rediscover their joy in medicine and to learn to first "Turn Care Inward". Her book, "Don't Jettison Medicine: Resuscitate Your Passion For The Career

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