

The “No Cavity Club” in Siquatepeque, Honduras

By Anne Schacherl

From October 31 to November 8, 2014, the dental team from Main Street Dentists in Verona, WI, saw 145 patients at the clinic in Siquatepeque. This included all of the children who attend the local school, members of the teaching staff at the school, the clinic’s head physician, foster parents, orphans, guards, extended families associated with the Honduras clinic, and children from two orphan group homes. In addition, the local school reached out to seven older children who attend a nearby school who had never seen a dentist. Our team saw and treated these children as well.

This year’s team members included Drs. John and Kate Schacherl, dental hygienists Denise Jacobsen and Tanya Kudinenko, and dental assistants Brenda Maxwell and Jean Foley. On this mission, the team was assisted each day by Spanish language interpreters who are fifth grade students at the local school.

Over the past five years since the clinic was established, teams have traveled to provide care nearly every six months. At the beginning of this endeavor, it was Dr. Schacherl’s goal to work with the school community to teach the value of good dental health and especially preventive dental care. Most of the children who were initially seen five years ago had never brushed their teeth, had never learned about the value of good dental health, and had never seen a dentist. Many children had rampant decay, mostly in baby teeth, and more than a few were experiencing chronic dental pain — some

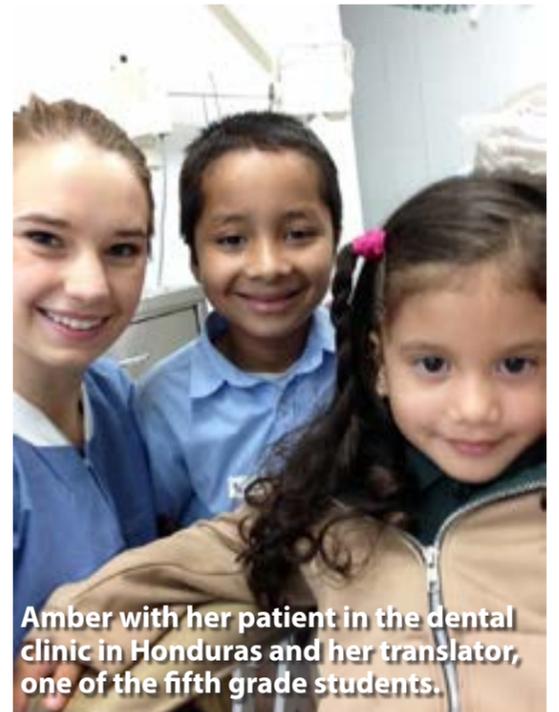
so severe that their parents told stories of how the pain kept them from sleeping through the night.

This meant anesthesia and hours of work for the teams, together with pain and fear for the young patients. The results, five years later, have been nothing less than miraculous. We were most encouraged by the improved oral health and good brushing and flossing habits of the local school children. All are brushing after lunch each day at school with the help of their teachers, as well as at home with their families. On this mission, many children that we saw were accompanied by both mom and dad, which was an added bonus. We instructed numerous parents in proper dental care techniques and sent all family members home with new brushes and floss.

The biggest news was that nearly all of those children who braved four quadrant restorations in the past, many a recently as six months earlier, were cavity-free!

And then there’s the clinic itself. Over the past several years, numerous improvements have been made to the dental clinic. The most recent was the new air conditioning, which was “asombroso” relief from the 90 degree heat and humidity. The two-room clinic now boasts four treatment chairs, and dedicated areas for radiography, medical records, sterilization. Plentiful storage cabinets have also been added, providing multiple supply stations. All of these additions are significant improvements from the two-chair, (noisy) indoor air compressor facility we used just five years ago.

It is a privilege to share our services with the



Amber with her patient in the dental clinic in Honduras and her translator, one of the fifth grade students.

people of Honduras. Each patient we see is so appreciative of the care they receive. With each trip, we see improvement, and that is most gratifying. Our long-term goals are to train local Honduran dentists to use the clinic for the benefit of area patients, and to recruit other dentists, hygienists and assistants to join the missions. If you are interested in learning more about this humanitarian work, either as a participant or to make a donation, contact Dr. Schacherl at john.schacherl@gmail.com. ●

An Eye-Opening Experience

by Keaton Read

Five days seems like a short amount of time, but it is amazing how many lives can be changed in that span. Recently, I was fortunate enough to join one of Sharing Resources Worldwide’s medical missions to Honduras. In just five days, the 11-member team, with the addition of two Honduran medical students that were greatly beneficial in their translating abilities, was able to perform 37 oculoplastic surgeries on Honduran children. These surgeries ranged from fixing ptosis (drooping eyelids) to dacryocystorhinostomies (a procedure that creates a new tear duct - also called DCRs). Prior to these surgeries, the children suffered from obstructed vision, extremely dry eyes, and pussy build up among other symptoms. The SRW mission performed surgeries that the families would not otherwise have been able to afford, even if they found a doctor that could perform the operations.

I was very lucky to go on this trip, especially because I’m only 18 and still a high school

senior. My role on the team was mostly to help organize the clinic and translate for other team members, but I still got to see how the whole process worked. I’ve wanted to go into medicine since I was little, and this trip reinforced that dream. I was able to see the children before and after their surgeries - to see the results of our hard work and take pride in them. In the United States, ptosis and other eye conditions don’t seem as prevalent because they are quickly fixed at younger ages. Before my trip to Honduras, I hadn’t really ever seen anyone with eyelids as droopy as those of the kids at the clinic. Seeing the pre-op/post-op differences in the children was incredible.

One of the most rewarding parts of the trip



Anesthesia personnel Jim and Rose and nurse Judy talk to a young patient as they begin put him to sleep for his eye surgery.

was seeing how excited the children and their families were after the operations, even though their eyes were still swollen from the procedures. The prospect of being able to open their eyes fully and see without obstruction from the lid, or gunk from blocked tear ducts, was a new opportunity the children had never had before. Another gratifying part of the trip was

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Each year SRW serves several hundred children and a few adults in Honduras with our surgical, ocular and dental services. Our warehouse is usually brimming with medical supplies that are much needed around the globe. Many of our supplies reach destinations other than Honduras, including Cuba, African countries, Haiti and many more. We cannot do this without your support. No one in our organization receives a salary and everyone remains a volunteer. Our volunteers are the very best there are! We would ask, if you can, to donate something to help us help others. All donations are tax deductible and will be very much appreciated by someone you will never know, but they will realize life-changing services by our teams with your support. Thank you all.

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Deidra (CRNA) with one of her patients and his mom after eye surgery



The entire ocular plastics team

following up on surgeries performed during last year's oculoplastics mission. This gave us the opportunity to see the end results after all the swelling went down. Several members of the team had also gone on last year's mission, and seeing the change they were able to make in the children's lives was one of their favorite parts. The children that returned recognized the doctors and nurses, and they were extremely excited to see them.

We worked at the John Eaves Clinic, part of La Providencia near the city of Siguatepeque. La Providencia is a program that combines an elementary school, foster homes, and the clinic. One morning of the trip, I was able to visit the school. The children were celebrating Earth Day, and it was really neat to see how similar the curriculum to preserve Earth was to mine at school. Along with some singing and English practice, the celebration involved cleaning up the grounds of La Providencia. After lunch and recess, which included soccer practice, the students visited a small village near the school to do community service. The students were all very welcoming and were excited to get a chance to practice their English with me. I took the opportunity to practice my

Spanish, and many conversations turned into bilingual chatter. This wasn't unusual at the clinic either. We found that if you made the effort to speak in Spanish, the kids would open up and those that could would reply with as much English as they could - and some of them were very proficient (if not fluent). There's even one more Guns N' Roses fan in Honduras now after a question about the music playing in the OR. Another memorable moment of the trip came when one of the kids casually corrected Rose's Spanish, proving that he wasn't too nervous about his impending operation. On her way out of the clinic, one of the girls said, "Thank you all for being so nice to us." This compliment had a lasting impact on the team, and made us feel the importance of our work. The happiness, graciousness, and sincerity of the patients made the trip all the more fulfilling.

Mission work can be hard and the hours can be long. However, every second of the work is worthwhile and changes lives. I will carry memories of this trip and the children we were able to help with me always, and I hope to go on more missions in the future after I enter the medical field. The success of the trip was due to the incredible cooperation of the team

members, many of whom had never worked together before, and the endless coordinating efforts of Mary Dowling. Although the children were the ones receiving surgery, I feel like my eyes have also been opened up a lot wider from this unique experience.

This team screened 46 patients and 37 had surgery in Honduras. They ranged in age from 8 months to 18 years. This was our second ocular plastics team to travel to Honduras. The team worked fantastic together and accomplished much. Thank you all!

Team members were:

- Cat Burkat, MD
- Erin Lembcke, RN
- James Albrecht, CRNA
- Rose Silveira, CRNA
- Joe Hilgers, RN
- Judy Hilgers, RN
- Wendy Read, RN
- Deidra Rouhomaki, CRNA
- Pimkwan Jaru-Ampornpan, MD
- Keaton Read, Student
- Jo Lippitt, RN
- Mary Dowling, RN ●

Seven Days in Honduras

By Sylvester Youlo, MD
 Orthopedic Surgery Resident, UWMC
 Author of *The Boy from Pleebo*, a memoir.

It has been dreary and rainy since we left Madison, Wisconsin but we are now descending into the airport near San Pedro, Honduras, for a seven-day medical mission trip. This is SRW's twelfth orthopedic mission to this part of the world since 2005.

My seatmate, Dr. Dave Mann, a retired pediatric orthopedic surgeon in his early 60s, is a thin, greying man with a very strong voice that belies his build. Dr. Mann has spent the seven years since his early retirement sailing the world with his wife.

I learned of this medical mission trip from Dr. Kenneth Noonan, a world-renowned pediatric orthopedic surgeon who works at the University of Wisconsin (UW) Hospital in Madison. While I was working in his operating room one day during my second year of residency, he said to me, "It is great over there. I mean on these trips, we arrive the first day, see patients, then the rest of the week we operate. The Honduran people are so thankful. But the best part is going back a year later and seeing kids walk into our clinic, who once couldn't ambulate but for a few steps!"

Mary Dowling, co-founder of SRW, went on her first medical mission trip as an RN in 1993. Today, as the organization's director, she organizes multiple medical missions each year. Mary reminds me of my elementary school teacher. She's a woman of few words and strict

discipline, who sweetly but firmly puts all of us on our best behavior. I'm not sure what her screening process is, but she builds her teams only of volunteers who are 100% committed and responsible.

This medical team is made of up veterans, except for three of us. Besides myself, the other rookies are Lindsay and Mr. David Noonan. Mr. Noonan, a 77-year-old retired hospital administrator, handyman, and the father of Dr. Kenneth Noonan, was inspired by his son's accounts of medical mission trips, and he knew he had

something to offer, even if he wasn't sure what part he would play. Lindsay is a young nurse who heard that Mary needed an RN to help in the operating room. "I always wanted to go on a mission trip," she told me. "There was no way I was going to pass on that opportunity." In fact, she suspended her wedding preparations in order to be a part of the team.

Kristan, a young nurse practitioner who writes and speaks Spanish fluently, is one of the seasoned volunteers on this trip. She fell in love with this country over five years ago, during her

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first mission trip with Mary. Christine, a physician assistant, took her first trip three years ago. She had wanted to go on a medical mission trip her whole life, so she jumped at her first opportunity, and she hasn't stopped serving since.

Our final destination is Siguatepeque, a town located in the middle of Honduras. Its name, which means "beautiful woman," was given by the Indians who once lived here. It doesn't take long to load our bags into the back seats of the bus in San Pedro. The drive to Siguatepeque is beautiful—the terrain is green and hilly or mountainous. Homes are perched on the sides of hills as if hanging sideways. Colorful farms are everywhere, producing bananas, plantains, coconut, corn and pineapples. The paved roads are riddled with potholes caused by rain, sun and poor maintenance. Just 15 miles from San Pedro, our bus suddenly comes to a complete stop behind heavy traffic, and no one knows why. After almost two hours, we learn that the road passes over a bridge which can only accommodate one traffic lane, so the police alternate traffic directions every two hours. The reason is that half of the bridge crumpled during an earthquake six years ago, and has not yet been repaired.

Even the hospital where we will work—at La Providencia—is built (through donations) on the side of a hill about 20 minutes from our hotel. Our first day, while some of us evaluate patients in clinic, others prepare for every phase of patient care. Marge, who has served on medical mission teams for most of her 30 years as a nurse, sets up operating rooms. As she attends to every detail and arranges all that's needed, the team benefits from her experience managing the operating rooms at Beaver Dam Community Hospital in Wisconsin. Rose, a petite, smart and friendly CRNA (Certified Nurse Anesthetist), helps our two anesthesiologists, Dr. Tracy Cotter and



Patient with his mom after orthopedic surgery on our January mission

Dr. Robert Groshek, set up equipment. Dr. Groshek has been on several SRW missions to Peru. Dr. Cotter has traveled to almost every developing country, serving on mission teams ever since his third year in medical school.

Bob, who supervises the operating rooms of UW Children's Hospital, joined an SRW mission team after Dr. Noonan invited him while chatting in the hallway one day. This is his second trip. Ric, a former scrub nurse, now procures surgical

equipment for UW Hospital. In Honduras, he does both jobs—procuring and caring for equipment, and serving in the operating rooms. Liz, an energetic young physician's assistant, is on her fifth trip to Honduras and bubbles with excitement about working on medical mission teams. Kathy, a nurse for over 30 years, is a 25-year medical mission veteran

In recounting my adventure to my wife and daughter, I marveled at the spirit of the organization you have created. I couldn't discuss the tragedy of the children's lives pre-op without tears nor could I stop smiling when I projected their future.

I was privileged to participate.

—2015 January Ortho team member David Noonan

and was part of SRW's first mission trip to Honduras. She's here with her husband, Mike, who takes pictures of the children for pre- and post-op planning. Wendy is a nurse who always wanted to volunteer overseas in developing countries. She started going on mission trips when her husband, a pilot, retired several years ago. All these people collaborate in preparing for what looks to be a busy week.

When we arrive at the hospital on the first day, about 250 people are waiting outside under tents. The senior surgeons, Dr. Noonan and Dr. Mann, and I examine 140 children, consult, and choose the 44 best candidates for surgery. For the next five days, we will run both operating rooms, using multiple small teams. Each day runs from 6:30 a.m. until after 8 p.m. The group works together in small teams, logging more than 72 hours of complex surgical procedures.

Finally, our week of intense work comes to an end. Even as our yellow bus leaves the hotel for our trip to the airport, Mary is planning the next mission. "What date do you want us to set, Dr. Noonan?"

she asks the surgeon. Watching the exchange reminds me of Mary's determination on behalf of children whose only hope is the help of a medical mission team like ours. Her tireless enthusiasm brings a smile to my face.

Team members were :

Marge Abegglen, RN
Mary Dowling, RN
Ken Noonan, MD
Kristan Sodergren, NP
Kathleen Sweeney, LPN
Mike Sweeney, Photographer
Elizabeth Shimon, PA
Richard Choudoir, ORSA
Christine Longoria, PA
Robert Machotka, RN
Tracy Cotter, MD
David Mann, MD
Sylvester Youlo, MD
David Noonan, Helper
Lindsey Olds, RN
Wendy Read, RN
Rose Silveira, CRNA
Robert Groshek, MD ●

Happening in 2015 for SRW

- October 2–9, Orthopedic Hand Mission to Honduras
- October 30–November 6, Strabismus surgery in Honduras
- Pediatric screening mission with no date scheduled at this time ●

MISSION

Through the delivery of excellent health care Sharing Resources Worldwide (SRW) endeavors to improve the quality of life of disadvantaged populations around the world.

VISION

By organizing and supporting medical teams, SRW will provide surgical, medical, dental care, and eye care for disadvantaged people. When possible, SRW will work closely with in-country partners to deliver these kinds of care. SRW will provide on-site medical professionals and institutions with donated supplies and equipment and allow them to consistently offer needed services for their needy populations. SRW's primary concern will be meeting the needs of children 18 years old and younger.

VALUES

SRW's board, director, and medical team members will provide needed care and treatment internationally, while consistently demonstrating the following core values:

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Compassion
Accountability

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David Mann, M.D.



SRW's Newest Board of Directors Member Patricia White, CRNA

Pat has been a Nurse Anesthetist for 35 years, with 28 years in civilian practice and seven years active duty in the U.S. Air Force. Her practice in the military included deployment in support of Operation Desert Storm. She's served on the Board of Directors for the Wisconsin Association of Nurse Anesthetists and is a member of the American Association of Nurse Anesthetists.

She's lived in Madison since fall of 1991 and has been actively involved with SRW for the last 15 years, providing anesthesia in support of orthopedic and ocular surgery in Guatemala and Honduras.

She will retire from active practice in July 2015 and hopes to serve as a Board member of SRW for many years to come. ●

Handyman Haefer

By Sylvia Boomsma

"I just fix stuff." That's how Gary Haefer describes his contribution to Sharing Resources Worldwide. The owner of Midwest Biomedical and Scientific Services, Inc., Gary is all about fixing things—specifically, laboratory equipment and medical machinery in hospitals, nursing homes and clinics. A married father of four, Gary, who's been in his line of work for almost 30 years, travels a lot for his job, but that doesn't discourage him from traveling to Honduras with SRW medical mission teams, something he's done at least five times.

When he's not on a mission trip, he's always willing to lend his time and expertise to SRW here in Madison. He procures needed equipment, often purchasing it himself and donating it. He refurbishes used machines before they're shipped to hospitals or clinics in need. "Whatever they need," Gary says, "I'll buy it, donate it, find it. It only takes a little bit of my time or money. And the rewards are a hundred-fold what I give."

You don't have to know Gary long before you see that he's a get-'er-done kind of guy, and a great asset to SRW. Power failures and equipment malfunctions and losses are a part of almost every trip. Having someone like Gary on the team—whether here in Wisconsin or on a medical mission—is a great help.

Gary first heard about SRW from Marge Abegglen, RN, who manages the operating rooms at Beaver Dam Community Hospital, one of Gary's accounts at the time. When a brand new hospital was about to open in Siguatepeque, Honduras, Marge and Gary served as the advance team for an SRW medical mission; it was Gary's first trip. Members of the mission team had purchased plane tickets, and planned to arrive in Siguatepeque to work in the new hospital one week later. All Gary and

Marge had to do was make sure the site was ready and everything was set up. But when they arrived, they found a hospital still under construction: it had no doors or windows, no plumbing or electricity. Welders and electricians were at work. There was water on the floor. "We were shocked at how unready everything was. We had sent down operating tables that weighed 1,000 pounds each. There were no trucks, no lifts. We recruited eight guys to move each table. They were all speaking Spanish, and I don't know any Spanish at all. Marge was so afraid someone was going to get hurt. Marge cried a lot during those days. She was the one who had to call Mary to say whether the trip was a go or a no-go. She kept putting off the phone call. I kept telling her we'd get it done, even if we had to work all night. A week after we got there, the medical team was on site, doing surgeries."

A veteran team member, Gary has seen it all and done it all—from helping to put out a wildfire on the hill behind the hospital in Siguatepeque, to joining a crew of 10–20 local men putting in telephone poles. "I do everything," Gary says. "Whatever they want me to do." Gary's cool head and know-how have saved the day on more than one medical mission. "You gotta go down there with an open mind. Be ready for anything. It's like a M.A.S.H. unit. You can lose power at any time and you gotta improvise. The medical teams are always cool and relaxed. Mary somehow picks people who can adapt. She's a great leader. I'm privileged to know the doctors, nurses, dentists, and others who make up the teams. At first I went as a favor, but when you see the results first hand, you want to help. I'm glad to be a part of it. I see the kids and the smiles on their faces. The team does so much more than I do. I just fix stuff." ●



Handyman Gary Haefer

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We wish to thank them and acknowledge their contributions to our efforts. There are too many to list here...but we thank you all!

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