

SPRING BREAK

~ Bob Price

Well, the snow is falling and so are the temperatures. The neighbors have all taken down their Christmas decorations and Kathy and I are the last of the hold outs. It's January, and we are deep in the bleak midwinter. Time to plan for, SPRING BREAK.

We had such a good time last May on spring break that we are going back again, this time in March. To the beach? Nah. We are going to beautiful downtown Guatemala City, Guatemala, where incredible people will spend fourteen hour days doing incredible things. And, lucky, lucky me, I am permitted to be a part of it all.

This takes a little bit of explaining, so, bear with me please.

For the past decade or so, volunteers from the Mission of Love have left their comfort zones, and travelled to places in Central America to share their time and talent to improve the lives of friends that we haven't met yet. My wife Kathy, the founder and prime mover of the Mission of Love, has been to Guatemala perhaps a hundred times. I was surprised to check the visas on my passport to find that I have accompanied her ten times in the past twenty years. The first nine trips were either an orphanage in a rain forest, where I helped other volunteers construct and repair buildings an orphanage, or build a pediatric hospice and a medical clinic from the ground up. While there, I have been introduced to the indigenous Mayan population, either in the jungle or in the mountains. I have seen things that most Americans have no idea even exist. And, I have learned so much, and I have grown as an individual.

In May of 2016, the journey was a little different for me. Instead of flying into the capital city of Guatemala and travelling to a distant building site, the volunteers stayed in the city itself. Every year for the past five years, dedicated teams of maxillo facial surgeons and their surgical teams have travelled to this exotic city to repair the faces of children who were born with deformities. They do this on their own time and at their own expense. This past year, I was invited to travel with the team.

I need to explain that all of my previous trips to Guatemala involved building something, and, I always learned something new. I am definitely not a guy who is handy with a tool, and usually, when I was working with a building crew, I could at least stand around, maybe lend a hand, or hold a ladder, and run for supplies. I also took a lot of pictures of other people working. Not a bad gig if you can get it. They work, I watch. This trip was different, though. The volunteers who travelled with us weren't carpenters, plumbers, and electricians. They were two highly skilled and very dedicated maxillo facial surgeons, Dr. Rick Sheetz, of Columbus, and Dr. Guillermo Chacon, of Seattle. They were assisted by Dr. Todd Bolotin of Girard. These doctors not only came, but they brought their surgical assistants with them. These men were not construction workers in the typical sense, but they rebuilt faces. To my later surprise, they did travel with hammers and chisels, drills and screw drivers. And, it was my privilege to observe them in their work. Their building sites were the faces of children and young adults who were born with cleft palates, deformed jaws, and misshapen noses.

There was an enormous amount of preparation that had to be done before the surgeons even unpacked their bags. First, we needed patients, and a place to perform the surgeries. This is where our Guatemalan counterparts came in. Dr. Edgar Moran arranged for us to use the operating rooms in Metropolitan Hospital, in Guatemala City. This is truly an inner city hospital in one of the rougher parts of the city. This street front hospital served the poor of the city. Besides the facilities, we needed appropriate patients. Again, Dr. Edgar came through. With the assistance of our friend, Astrid, they put the word out that American doctors would be donating surgical services.

After we arrived in country, I was surprised to see the prep work that had to be done before the surgeons could begin to work. We had arrived in the city on a Saturday and on Sunday morning we went to the hospital. The small waiting area available was filled with over a hundred people, children and their parents, all hoping to be among those chosen for the life changing procedures. The docs examined each child individually and used a rating scale to determine who they could help. Most of the children had been born with cleft palates. This means that the roof of their mouths never developed. When you looked inside, you could see into their sinuses. This type of surgery is routinely done to children in the United States at a very young age, and it can be simple if the repair is made early enough. Others had more serious problems that required more extensive surgery. One of those kids was Jose. I will tell you a little more of him shortly.

It is important to understand that the many of the people we saw in the hospital that Sunday morning were indigenous Mayans from the mountain village of Tec Pan, fifty miles from the city. They are very poor and do not own cars. It took considerable effort for them to come to the hospital. Most of the parents were moms, and they brought many of their kids with them. That small waiting area was filled with very anxious families, and because of the language barrier, we were not able to speak to many of them. They waited patiently all day to have their child evaluated, in the hopes of not being turned away.

Finally, the selections were made, and some families were told to return later in the week for surgery, and some were sent home disappointed. I was watching as they lined up to get their appointments, and that is when I saw Jose. He was ten years old, he had bright eyes, a wide smile, and, he did not have a nose. Due to a congenital deformity, he was born without any cartilage that forms the bridge of the nose. His nostrils were flat on his face.

Jose had spent ten years not breathing through a naturally formed nose. To make his life even more difficult, he did not go to school, because children can be cruel, and they mocked him. Jose was ten years old and he went to work in the fields every day with his father.

Jose stood out among the crowd because of his personality. He was a dapper dude, too. He wore a long sleeve white shirt, a little frayed and two sizes too big, and cowboy boots, also too big. That didn't stop him from swaggering a bit, though. He was full of confidence and had no fear. Jose was scheduled to return later in the week for a procedure that took five hours.

Now comes the interesting part of the story. I mentioned that I have no talent for construction, and usually would stand around and watch people work, while adding my meager assistance. When I asked the surgeons what I could do to help, they told me to stand around a watch, and to take pictures. My next question, was, you want me to stand and watch WHERE? It seems that I was needed for my limited duty in surgery. I thought that I was going to throw up on my shoes. Instead, it was my privilege to spend a week in the operating rooms, doing what I could to assist. Assist implies that I had a useful function, but I was really a gofer. I found, however, that once the surgery begins, the surgeons can't just walk away. They need somebody to fetch, and sometimes to take pictures of the procedures. To my surprise, after ten minutes into the first operation, I was fine.

During my week in the operating rooms, I saw remarkable things. The local surgeons permitted me to observe them as they worked also. I saw a couple of gall bladder removals, abdominal surgery, and a Cesarean Section. I also observed these American guys fixing the faces of tiny children. The most remarkable thing that I witnessed was the surgery on Jose, the tough little dude.

In order to build a bridge for his nose, the surgeons had to be able to work on the top part of his face. This meant that it was necessary to get to the area they needed to reach without leaving scars. The process for

this involves beginning behind the little guys ears, and cutting and pulling the skin of his face up and over his face from behind. This is called a coronal flap. As I was observing, my friend Dr. Todd told me that I might want to take a pass on this one. I will not tell you all of the details, except to say that once they peeled Jose's face away, they took a small piece of bone harvested from his hip, with a small hammer and chisel, and attached it to the bone in his forehead with a drill and screwdriver. Then, they simply pulled the scalp back into place and sutured it back in. This procedure allowed the surgeons to preserve all of the blood vessels and nerves in the scalp without leaving any noticeable scars.

They put Jose back into one piece, and sent him to the recovery room. The next day I visited Jose in his hospital room. He was running a fever and that was not a good thing. He was sick and miserable, and I can't begin to imagine the pain that he felt. There were no pain meds to relieve his misery. He had been cut in his hip, down to the bone, and a piece had been chipped away with a hammer and chisel. Then his scalp had been cut and peeled down over his face. Then, holes were drilled into his skull and the harvested bone was attached with screws. His head was shaved and then bandaged, and then he had another bandage across his nose. When I asked him how he was, I got a thumbs up. This is one tough little hombre. The next day, his mom packed him up and took him home to Tec Pan.

Jose's surgery took five hours. For the entire time, two surgeons stood in one place, bent over their patient. They never left him. I had no idea how incredibly hard these men work and the physical toll that it takes on them. I now have enormous respect for surgeons.

Thirty five surgeries were performed in five days. That means that thirty five lives were immeasurably improved. We are going to return this March and do it all again. This time I hope to help in a different way. I've been doing a little home schooling in Spanish. I know just enough perhaps to get myself in trouble, and just enough, I hope to be able to communicate with the parents who trust their precious children to Americans who promise to help. When the patients arrive on the day of surgery, they are told to arrive at 7 AM. The patients are not permitted to eat. Then they wait. The doctors may not take the kids to surgery until the afternoon, and still they wait, not understanding what is happening. Then finally, the kids leave their parents and are escorted in a scary place where parents may not enter.

No matter the language barrier, parents are parents, and they are terrified when their children go into surgery. I hope that with my fractured Spanish, and these grey hairs, that I can relate to them, not as an American, but as an "abuelo", a grandfather. It ain't much, but I hope to provide a little comfort during those long waits.

Recently, it seems like every day I have found something to be angry about. Leaving one's home and travelling to someplace very exotic can open a person's eyes to what real problems are. As the esposo to a remarkable woman, as the padre to four wonderful daughters, and as the abuelo to six very special grandchildren, I need to appreciate how good life really is, and I need an attitude adjustment that I get from that tough little hombre, Jose. I can't wait to go on Spring Break.



