

THE COMMON LANGUAGE OF CARING

Each February, medical professionals from throughout the South work together to heal the bodies and spirits of children in Ambato, Ecuador.

By Tanner C. Latham, photography Cary Jobe



The children of Quisapincha sing Spanish songs and offer carnations to the visiting doctors and nurses. The team reciprocates with English versions of "If You're Happy and You Know It" and "The Hokey Pokey."



Ambato, Ecuador



Members of the team walk through the city market, their scrubs make them green and blue blurs.

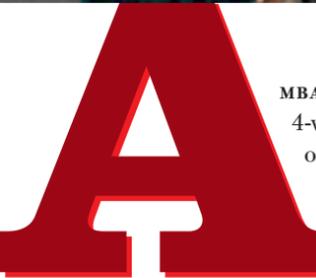


After 17 years of returning to Ambato, Medical Mission Ecuador has established its own permanent examination clinic at the regional hospital. The team uses that hospital's operating rooms for surgeries.



Pediatricians and nurses perform routine checkups and distribute vitamins and goodies to the uniformed children.

Want To Help?
For more information about Medical Mission Ecuador or to find out how you can donate money, supplies, or equipment to the trip, e-mail Beatrice Engels in Birmingham, Alabama, at beatriz.engels@ccc.uab.edu or medicalmissionecuador@gmail.com, or call (205) 934-2739.



AMBATO, ECUADOR | The 4-week-old infant squirms on the operating table.

Medical Mission Ecuador (MME) is a homecoming for the surgeon, Dr. Henry Vasconez, head of plastic surgery at the University of Kentucky Medical Center in Lexington. Having grown up in Ambato, Henry lives the ultimate story of reciprocity. He pioneered the mission 17 years ago, jumping in with just one anesthesiologist and one nurse. That splash still ripples.

Born with a severe cleft lip and palate, he can't nurse well, and he's badly dehydrated. This operation to repair his birth defects can save his life. The boy's parents took an hour bus ride here from a rural village. They also took a chance. The free clinic offers no guarantee—only hope.

The team, mostly from Southern states, now numbers nearly 80. It contains biomedical technicians, physical therapists, surgeons, nurses, pediatricians, and anesthesiologists, among others. The majority of the surgeries correct cleft lips and palates, malformed ears, and club feet. What differentiates MME from other foreign medical missions is the fact that it returns each year to the same city and the same two hospitals. Many times, the doctors actually follow up with previous years' cases.

The surgeon, his palms the size of the child's head, replaces his solid blue Kentucky Wildcats hat with a scrub cap. He knows the baby is malnourished. He understands this operation is a risk. His bright brown eyes peer over his surgical mask. They are focused, confident. A risk, yes, but better than the alternative. He speaks to his team with the same rich tone of assurance he shared with the baby's worried parents.

This infant is in safe hands.

Henry's understated charisma inspires the team of Americans and ignites hope in poverty-stricken residents of his hometown. Locals

swarm him like he's a famous athlete or movie icon. "When Henry's in the hospital, people touch him," says Jane Bryan, a registered nurse from Birmingham, Alabama. "They pull him close. Everybody wants to ask his advice."

Hundreds of families arrive before daylight the first day of the clinic. They have seen the flyers distributed by the Ambato Rotary Club, and they stand in staggered lines waiting for a chance to be seen. By week's end, 1,000 cases are examined, and 200 of the priority surgeries are performed. It's an amazing feat considering the team's finite time and resources. Even having done so much good, the team's desire to do more seeps through the seams. "That's the hardest part," says Henry. "We do the most pressing ones first, but every mother is begging and pleading. You just can't save them all."

Bilingual Ecuadorian medical students and volunteers serve as interpreters because only a handful of the team understands more

than the rudimentary *gracias, hola, or buenos dias*. Medical care speaks neither English nor Spanish however. A smile or a gentle touch renders the language barrier porous. "Happy children give us the universal thumbs-up from their hospital beds," says Julie Karnes, a general surgery resident in Temple, Texas. "We know how grateful the parents are without knowing their language."

During the week, gratitude emanates from the team as well. Everyone speaks of how much is taken for granted back home. The hospitals here, though sterile, lag about 30 years behind what's standard in the States. "I think those of us who come on the trip feel a need to give something back," says Dr. Jim Nagle, an otolaryngologist in Fargo, North Dakota. "We realize how fortunate we are in our daily lives."

In Ambato, Medical Mission Ecuador strips away health care's weighty layers to reveal its purest form: There is a need, and it is met. "It shouldn't just be that you

"IF I KNOW how to DO SOMETHING WELL, then WHY NOT SHARE it with THE REST of the WORLD?"

—KENYA KILLINGSWORTH, REGISTERED NURSE, BIRMINGHAM, AL

have the chance to live a normal life only in America," says Birmingham registered nurse Kenya Killingsworth. "If I know how to do something well, then why not share it with the rest of the world?"

In the post-op room, the mother cradles the infant to her breast. Surgery was a success, and the child begins to nurse. The father delicately strokes the baby's tender head. He wipes away his own tears and finger-combs his hair. He smiles, exhaling great sighs of relief.

The surgeon huddles with the family for a few minutes. In the same tone as before, he now assures them of the next days, the coming weeks, the waiting future.

This infant is in safe hands. ●

The editor and photographer were embedded with the medical team throughout the entire week. For more Ecuador experiences, visit southernliving.com/talesfromtheroad.