

Medical Elective Report
SSC 5c
Barts and The London Medical School

Project Amazonas – Medical Expedition in to the Amazon Rainforest

Masseh Yakubi, April/May 2014

Ampiyacu River Region, Amazon Rainforest, Peru

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Objectives:

- 1: Get exposed to tropical medicine
- 2: Treat communities of people living in the Amazon rainforest
- 3: Understand the difficulties of resource deprived medicine and medicine in a region where patients don't speak English.

Report:

After finishing medical training at Barts I embarked on my elective in the amazon rainforest with the charity Project Amazonas, a non-political, non-sectarian NGO working for the last 20 years as the only regular hospital boat in the Peruvian Amazon Rainforest. The amazon is the largest river on planet earth in terms of volume and has living along side it numerous communities and tribes that have been relatively untouched by the modern world. Unfortunately in the remote regions the people lack access to western medicine. Project Amazonas has almost monthly expeditions to different regions of the Amazon to treat and educate the local people there. I joined an expedition going the Ampiyacu river region in which we would encounter numerous communities, some with large populations of up to 200 people others as small as just 2 or 3 families living together.

So on the Elective we would spend the entire duration of it living on a boat, navigating the amazon. Our boat was called The Esperanza, inside there was a crew of 5 Peruvian men, 2 of which spoke English and would be translators and Amazon guides for us, they also cooked regular meals for us. On board there was a supervisor on the boat, Dr. Maria, a Peruvian FY1 equivalent and a dentist also.

We were joined by an American paediatric surgeon for a short part of the trip. With me was 5 other Bart's finalists and a group of 3 finalists from Bristol, all also on electives.

Our routine was as followed; generally the boat wouldn't sail at night, and we would anchor near a community late at night, early in the morning at about 7am we would dock near the village and we would get ready and have breakfast. We would then get our equipment ready and with the help of the crew move all medical supplies and drugs into the biggest building they had in the village, this would often be the school or perhaps the house of the village elder. If the community was very small as some were just 10-20 people we would invite them onto the boat and treat them there. Usually though we would set up one table as the pharmacy and it would be manned by 2 of us, and then set up 3 other tables with 2/3 of us in each as our clinics. Dr Maria would float in-between all 4 stations as a consult when needed. Several of us spoke Spanish and 2 members of the crew spoke both English so we could always translate what the patients were saying to each other. The communities along the Ampiyacu river had been visited by Project Amazonas before so they were familiar with who we were and were very welcoming and grateful of what we did. Initially there was always a long queue with all the mother and their children, and soon after the elder patients and the men of the village turned up. Most villages we saw had a population of between 50-200 people. We took histories and examined all patients and carried out investigations where possible, this was limited to just peak flow and blood pressure. We made diagnosis and prescribed medicines as appropriate. The pharmacy on the boat was well stocked with a wide array of drugs. Dr. Maria was happy to consult whenever we were uncertain. The clinics would wind down usually at about 2pm and then we were free for the rest of the day. We would often be shown around the communities by the enthusiastic children and they would show us their incredible pets, often they would have monkeys and other creatures. We would always end up swimming in the river! Before sunset we would have dinner on the boat and then head off sailing to the next village. It was incredible.

The clinics themselves were sometimes challenging. They were a world away from the clinics you would see in hospital or GPs in the NHS back at home. Firstly privacy didn't really exist, all clinics were done in a big room in front of everyone else, even examination most of the times. In such tribal communities we were told that privacy is less of an issue, and one can imagine in a community of 50 people everyone knows all of other peoples business and that is the norm. Even dogs/monkeys/pigs and numerous other animals would casually stroll into clinic and join us. It was tough not having a lab to back us up, we could order no x-rays and perform no blood tests. Sometimes this was difficult as in the case of a 70 year old lady with clear ankle fracture, moreover the plaster of paris cast we found so far past its expiry date it didn't work. Also although most people in the amazon are entitled to free health care in state hospitals in reality they cannot afford the transportation and accommodation costs to get to these hospitals, so when we could not help them and tried to plea with them to go to a hospital we knew it was unlikely they would go, one patient was so severely unwell with bilateral pleural effusions and hepatosplenomegaly of unknown origin we took him with us on our boat to the hospital Iquitos on our way back. By and large however most of the patients were presenting with non-life threatening GP like problems. Health beliefs in the amazon were different to what were used to, mothers demanded vitamins for the children as they thought it

would make them taller, there was the same belief as in London among patients that antibiotics were the answer to everything.

All in all the expedition was perhaps the most incredible medical rotation I have ever done and has inspired to return to work in resource deprived regions as you truly do help a great deal. I wont forget an asthmatic taking his first deep breath after being prescribed salbutamol and being in awe and a 80 year old lady who we gave reading glasses and was in tears as she hadn't seen the faces of her grandchildren in years. We also experienced and explored the true heart of the amazon rainforest and its peoples in a way that no tourist would ever, we were welcomed with open arms into the homes of the most incredible people I have ever met.

The trip also inspired me to improve my Spanish and return to work in Latin America, perhaps during an 'FY3' year.

I would strongly recommend any Barts medical student to carry out this elective.

Masseh Yakubi