## HELPFUL HINTS FROM DR. HENRY CARTER (Veteran Team Physician)

After a number of mission trips to Central America with Baptist Medical & Dental Mission International, several observations have been made which may prove helpful to future medical team members, especially those who do not normally practice clinical medicine, who are preparing for their first experience.

First, from the perspective of current medical practice in the United States, one may be inclined to feel, at first, that the medical practice your team provides is too superficial to be useful. But by keeping in mind several principles, it can be concluded that it IS worthwhile:

The primary purpose of these efforts is to help bring people into the permanent proper relationship with God. Indeed, this is the most important lasting good which can result.

To that end, perhaps the most important thing one does is to express love and concern in his/her smile and demeanor with the patients.

At the same time, all of us are concerned with the first principle of medical practice: "First, do no harm!"

Perhaps the most meaningful part of a patient-medical professional encounter is the touch. The willingness to listen to and physically examine the patients, albeit very briefly, has value.

Although most of us have been dependent on laboratory and imaging data, we all know that the history and physical still yields more important information than anything else. And although there is a language barrier to the history and time and place constraints to a thorough physical exam, proper use of our overall medical knowledge, of the interpreter, and of our otoscope, stethoscope, and sensitive fingers and eyes can result in a reasonably complete assessment.

Second, we have to remember that the patients we see are not accustomed to the standards of care our patients at home are used to. They DO appreciate a sincere effort to help them, and they rarely see any other medical professional than a team member.

Third, they tend to enumerate all of the symptoms they can recall in listing their problems.

Fourth, the person registering them does not have a medical background and will list complaints as best they understand them. It is important to remember that most of the patients are not having all of these problems acutely at the moment, and the terminology used may be grossly inaccurate diagnostically; one should not accept a complaint as diagnosis.

Among the most frequent complaints listed are:

Diarrhea Poor Appetite Open or Crusted Sores Cough

Asthma" Fungus Vaginal discharge

Flu/Cold Infection Abdominal Discomfort
Fever Skin Spots Headache Arthritis

Parasites Weakness

**Diarrhea** is no doubt a common and chronic problem, partly due to parasites, as well as bacterial, viral and dietary causes. Judging from their appearance, it is not usually acute or life-threatening, although it certainly can become so, especially in infants and children. It should probably not evoke an automatic prescription of Lomotil, and this medicine should probably never be given to infants or children under 2 years of age. Treatment of Kaopectate for PRN use and treating parasitic infections are probably more appropriate. Emphasis should be placed on rehydration with salt-sugar-lemon juice-water solution.

**Cough** - "Asthma" ("Tos", "Asma") are frequently listed, and one seldom hears rates or wheezes or coughing during the exam. The expectorant mixture used is helpful. Antibiotics are seldom needed. Much of this problem is the result of smoke inhalation from the cooking fires in their tiny homes. If there is evidence or a reliable history of true asthma, Theophylline tablets and liquid are available, and these patients may be already taking it. "Bronquitis" is often listed also. If one suspects a true bacterial infection, certainly an appropriate antibiotic such a Tetracycline or Erythromycin would be prescribed as well as the expectorant.

**Flu/Cold** ("Gripe") refers to the flu-like constellation of symptoms, and the patients are not often actually acutely ill with this. An analgesic and cough medicine usually suffice. "Calentura" (fever) is often listed, again, without evidence of acute illness. Fever is never an illness in itself and only requires treatment if it is very high. Temperatures are not usually taken in the clinic or in their homes, so this is simply an estimate. It does not call for an automatic order for antibiotic, but Acetaminophen or Aspirin can be used when needed.

**Infection** ("Infeccion") is frequently listed without any explanation or localization. An effort to obtain additional history and evaluate with physical examination is worthwhile but often unyielding. Unless specific evidence of bacterial infection is found, antibiotic usage is inappropriate.

**Poor Appetite** ("Falta de apetito", "desgaño", "desnutricion") is used to describe their nutritional state. "Anemia" is also frequently used. Most no doubt do have some nutritional inadequacy, although the large majority appear quite well nourished. Treatment with anti-

parasitic medications and vitamins is expected to improve these problems, and probably is the most helpful thing we can do medically for most of them. There are always children with obvious severe nutritional deficiency, and it is hoped that they will improve with extra vitamins as well as parasitic treatment.

Parasites ("Parasitos", "animales", "lombrices") appears on most cards, especially in the more remote areas. No doubt there are multi-parasitic infections, but the one which is treated is ascariasis, or infection with large roundworms. These may cause not only "dolor del estomago", nutritional problems and diarrhea, but in their life cycle pass through the respiratory tract and may be coughed up or found migrating through the nose and mouth. Respiratory problems may result from heavy infections, and respiratory deaths in infants and small children can occur. The Albendazole that is currently being used for patients above the age of 2 is effective and is usually given I tablet taken on the spot. The taste is not good and it helps to have small candies or crackers to give after the pills, especially for the children.

Piperazine liquid is used for children age 2 and under. Dosage is calculated in the pharmacy by weight, and it is necessary for the weight to be on the card; if it has been missed, send the children back to the weight station before going to the pharmacy. It is unlikely that the patients are ever "cured" of their infections, since they are constantly re-exposed by their lifestyles and sanitation practices, but by lightening their burden for a while, they are given an opportunity to improve physically.

Skin Spots and skin problems are frequent and are no doubt uncomfortable at times. The skin is constantly exposed to their environment, which usually includes limited opportunities for cleaning. Many Central Americans are quite conscious of variations in pigmentation and list "pano blanco" or "panos negros" (white sport or dark spots) as problems. While there may be some underlying metabolic reason for these, they are not correctable with any medication we have. You may point out freckles on his or her own skin and explain through the interpreter that skin pigmentation varies in most people and actually may enhance your appearance. "Granos" are usually open or crusted sores and can be treated with antibiotic ointments and, if need, systemic antibiotics; emphasizing cleanliness and providing soap will also be useful. "Hongos" (fungus) is a frequent complaint, especially on the feet. Taking time to have them remove their shoes and socks, clean the feet with a Wet One (be sure paper towels are available to dry their feet) and close inspection of the intertriginous areas will reveal actually evidence of tinea pedis in only a small percentage. Only these and the ones with evidence of ring worm should be treated with antifungal ointment, the supply of which is always exhausted before the Mission is completed. Some will have contact dermatitis and may respond to Hydrocortisone cream. Scabies and head lice ("piojos") are present although not listed as often as one would expect. Kwell is apparently a familiar medication and can be prescribed safely. Unfortunately, ectoparasites

are not likely to be cured any more than the internal parasites as long as living conditions remain unchanged.

**Vaginal Discharge** is referred to by "flujo blanco". Since vaginitis may be due to several causes, specific identification would require a vaginal exam, wet prep microscopic examination, and possibly gram stain or even culture. None of these can be done, so treatment is empirical. It is appropriate to explain through the interpreter that there are several causes, that we are giving her the only vaginal medication that we have, and that it is possible that it may not cure the problem.

**Abdominal Discomfort** may be listed as "vientre" or "dolor de vientre" referring to low abdominal or pelvic discomfort. This may be due to PMS, PID, endometriosis, and probably other causes. Without good reason, it would not justify an antibiotic, but the anti-inflammatory analgesic medication may provide some relief.

**Arthritis** ("riñones", "espalda", "dolor de cerebro", "dolor de huesos') describes the musculoskeletal discomforts in the joints and muscles. Considering the lifestyle, work habits and sleeping conditions, one should not be surprised that these things are common, and even though the relief of the Aspirin, Tylenol, and Ibuprofen is temporary, it surely must be welcomed.

**Headache** ("dolor de cabeza", "dolor de cerebro") refers to frontal and occipital headaches and are frequent complaints. Again, the analgesic offers as much help as we can give.

This list is far from complete, but it does cover the more commonly encountered problems recalled fresh after a trip to the Mission field. Hopefully all of us will try to evaluate problems that are simply expressed as complaints. Trying to evaluate a hundred patients per day in the midst of 500 other chattering people, crying babies, music and preaching from the nearby evangelistic services, with no good communication and a sore back and seat is a real challenge. Maintaining one's composure and professional approach demands a lot of self-discipline along with God's strength and grace. Having a young mother or senior citizen smile and say "gracias" is worth the effort it takes, and remembering that our primary purpose is to assist in restoring a person's relationship with God gives lasting meaning to these efforts.