

Medical Team - What to Expect

1. Running the Clinic

The team is split up to attend to different stations placed in the church (or orphanage).

Generally we have 4 stations:

- Triage - 1~3 health care professionals (HCPs) will ask the patient their reason for coming, do a quick set of VS, then send them to the assessment station
- Assessment - doctors and nurses will do a more thorough assessment of the patients, diagnosing and prescribing treatment as necessary
- Pharmacy - HCPs will fill prescriptions and provide necessary education regarding medication administration and other treatments (ie. wound care, eye wash instructions, formula feeding instructions, etc).
- Prayer - HCPs at any of the stations listed above can refer patients to a more in-depth talk/prayer time with any of the leaders/volunteers of the church

Interpreters will be with you to help talk with the patients.

2. Common Complaints and Requests

These are the most common reasons why Haitians have come to the clinic. This is not necessarily indicative of what they actually have (or not have).

- Cough, cold, flu, runny nose
- Headache and other various pains/aches of body parts
- Vaginal Infection (aka itchy or “scratchy” vagina)
- Dry, irritated eyes and other vision issues
- Stomach ache, indigestion, constipation, diarrhea, lack of appetite
- Something to help with mental alertness (ie. for school)
- Anemia
- Insomnia or sleeping too much
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- Breathing issues

3. Actual Issues and Illnesses

These are the most common illnesses/disorders/etc. we have diagnosed from our assessments.

- PTSD - which physically manifests itself in a variety of ways eg. hypertension, tachycardia, diaphoresis, anxiety, lack of appetite, constipation, etc
- Hypertension - many, many people have this and it’s not just the elderly but people as young as 30 or 40 years too. Often due to high salt, high fat, low fibre diet, PTSD and other issues.
- Infections - vaginal, bladder, abscess (mainly in digits)
- Severe malnutrition - mainly in infants and young toddlers

- Stress
- Heart murmurs
- Asthma
- Hyperopia - in more of the older generation
- Pregnancies - to-be mothers are often lacking adequate nutritional intake as well as general maternal education

4. Rare Cases

- Severe diastolic heart murmur leading to strokes
- Severe tooth infection/cavities leading to osteomyelitis
- Premature Infants
- Thyroid diseases

5. General But Important Notes

- The Haitians are a beautiful people but they lack health education and as well are influenced by a variety of religious/cultic beliefs when it comes to health. They do not have the knowledge of what is normal and abnormal for their bodies. Thus, education is a must in order for them to sustain a healthy lifestyle.
- If a patient does not need anything, it's important not to prescribe anything. Haitians do not understand medicine very well (similar to the general North American population). When prescribing, making sure they understand when to take it, how often to take it, dangers of overdose, etc is vital.
- Every moment can be used as an educational moment. Haitians are smart people, willing to learn, and often express joy when they understand something.
- It's easy to focus on the medical aspect of things but we are here to care for them holistically - remember that a person is physical, mental, emotional and spiritual. All these interconnect and influence one another.
- Because we are in an underdeveloped country, we will not always have the medications/products we need to treat. In many cases you will have to be creative (eg. we have limited eye drops so instead, we can teach them how to make their own by boiling water and adding salt). Be flexible :)
- You are working in a team - each individual has experiences and insights that are helpful. Remember that we are interdisciplinary and that we are here for the patients, not to advance ourselves.
- There will be cases where there is nothing we can do considering the situation we're in and thus feelings of helplessness and hopelessness may ensue. This is normal. All we can do is our best and trust God that He will do the rest.
- Because we are here only for a short while and cannot follow up on patients, it is wise to sometimes not treat a patient but refer them to MSF or other healthcare organizations that can do a better job of following them.
- The interpreters come from a variety of educational backgrounds and thus they are not all on the equal playing field. It will take time and patience as we get accustomed to their style as well as they get accustomed to us.