

義務工作發展局 AGENCY FOR VOLUNTEER SERVICE

**Paper Presentation Topic: Volunteering of Professionals** 

## International Ophthalmologic Services to Sri Lanka

Kwok-Kee YIP<sup>a</sup>, M.D., M.P.H., Ching-Yao TSAI<sup>b</sup>, M.D., Lin-Chung WOUNG<sup>b,c</sup>, M.D., D.M.Sc., Min-Ling HUANG<sup>d,e</sup>, M.D., Chun-Chyang HSU<sup>t</sup>, M.P.H., Shu-Ti CHIOU<sup>g</sup>, M.D., MSc., Ph.D.

<sup>a</sup>Taipei City Hospital, Zhongxing Branch, Consultant Room No.145, Zhengzhou Road, Taipei City, Taiwan 103, Republic of China. <u>kky3@tpech.gov.tw</u>.

<sup>b</sup> Taipei City Hospital, Zhongxing Branch, Department of Ophthalmology. <u>tsaikimo@yahoo.com.tw</u>,

<sup>c</sup>National Taiwan University Hospital, Division of Ophthalmology, <u>wounglc@zx.gov.tw</u>,

<sup>d</sup>Member of Board of Director, Taiwan World Vision;

<sup>e</sup>Director of Doctor Jo & Joe's Clinic. <u>jo195712@ms11.hinet.net</u>,

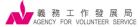
<sup>f</sup>Deputy Commissioner, Department of Health, Taipei City Government. <u>sgch@health.gov.tw</u>,

<sup>g</sup> National Yang Ming University, Faculty of Medicine, Department of Social Medicine. <u>stchiou@ym.edu.tw</u>,

### Abstract

To comply with the international cooperation policy of Taipei City Government, International Affair Unit of Taipei City Department of Health planned and extent its good will and friendship to those people or countries who need and appreciate foreign supports and relief. We have been planning a few ideal spots such as Mongolia, Thailand, Border of India and China and Sri Lanka for our first trip to foreign relief with medical support and friendship. Final decision was made to return and show our gratitude to their donation of almost 2000 eye balls during the past 20 years is a very good reason for us to extend our good will and friendship to Jaffna of Sri Lanka, a city ripped off by civil war for more than 18 years, situated 360 Kilometers from north of Colombo had been chosen on behalf of its urgent need of everything. Especially on behalf of more than a thousand near blindness caused by cataract had been waiting too long to be relieved by surgical intervention due to the lack of material (Intra Ocular Lens) and qualified Ophthalmologists. There is only one qualified Ophthalmologist in Jaffna and its neighboring area and has to serve more than 500,000 of its populations





right after the peace talk started from the beginning of 2002<sup>1</sup>. Our counter parties Rotary Clubs of Colombo, Kent and Jaffna specially nominated this eye camp relief trip as "Sight through Peace" or "Peace brings Sight". There were altogether 12 Ophthalmologists, 2 physicians of internal medicine, 2 OR nurses, 2 technicians and one administration personnel, leaded by our former Commissioner Dr. Chiou joined in this international aid trip from November 10<sup>th</sup> to 17<sup>th</sup> 2002. There were 190 cataract operations accomplished within 4 operation days. Average age of patients undergone cataract surgery was 65. The eldest patient was 85 years old. Among them 29%(74 cases) were male and 61%(116 cases) were female. 54%(103 cases) had their right eye operated and 46%(87 cases) on the left. As for the method of operation, 21%(39 cases)underwent Phacoemulsification with IOL implantation, 79%(151 cases) went through traditional Extra Capsular Cataract Extraction (ECCE) with IOL implantation due to those lens were too hard or over ripe to receive Phacosemulsification which was the first time that they had ever been experienced. As for the Leaders of both sides, Dr. Chiou, Mr. Sajith Premadasa (Deputy Minister of Health and Nutrition), Mayor of Jaffna, Chairmen of Board of Director of Monlai Hospital, Eye Center of Colombo Teaching Hospital, Jaffna Teaching Hospital, they met, held press conference together, communicated and exchanged opinions and experiences. Thorough communication and preparation between both sides involved individuals and their whole heartedly devotion, very detailed operation manual and clearly defined work description and responsibilities of each members of mutual operational team and their unselfish supports and cooperation ensured the success and safety of this operation.

### Introduction

International Eye Bank established by Dr. Hudson Silva is well known internationally as well as the other famous products of Sri Lanka, such as sapphire, tin and tea. Major medical centers in Taiwan and City Hospitals of Taipei City had been using its donated corneas to re-establish more than 2000 eye sights since 1980 provided free of charge by Eye Bank Foundation of Republic of China. In return to Sri Lanka's past hospitality and support, ophthalmologic services by our City Hospital Volunteer Cataract Surgical Team to help Jaffna's cataract elderly to regain better eye sight. Jaffna<sup>1</sup>, a city situated more than 360 kilometers north from Colombo, had been suffering from civil war for the past 18 years. It also expresses our good will and ability to support international community.

#### Objective

1. According to statistic information of WHO, major reasons of blindness among developing areas and countries is cataract, which can be prevented by timely and proper surgical intervention<sup>2</sup>. But unfortunately, most of the

www.volunteerlink.net

本文屬義務工作發展局出版。All right reserved 2006. 歡迎轉載內文以推廣義務工作,使用時請列明出處。





elderly of some developing areas and countries are so remote and poor that both material and technique seem to be impossible, that will lead to loss of eye sight<sup>3</sup> in result of neglect and unavailability of timely and proper surgical intervention. This becomes one of the most important issues to prevent and correct blindness caused by unattended cataract among developing areas and countries<sup>4</sup>. Taipei City Hospital Volunteer Cataract Surgical Team will actively participate and involve in international medical relief services to those friendly and in need international areas and countries so as to gain back our international visibilities.

- 2. Other than returning our gratitude to Sri Lanka's hospitalities to provide more than 2000 corneas to several medical centers and Taipei City Hospitals during past 25 years, it also shows our willingness and abilities to serve and support those in need international communities.
- 3. Establish communications and friendship of medical related personnel internationally. Promote and enforce cities' and citizens' informal foreign diplomacy.
- 4. Express our good will and willingness to serve humanitarian relief internationally so as to regain public and international recognition.
- 5. Learn and practice international medical cooperation experience.
- 6. Explore possible medical relief or cooperation areas and countries for our medical relief force of Taipei City Hospitals.
- 7. Search and develop future international opportunities of technical support, teaching, training, or cooperation.
- 8. Continue develop from present cooperation to future substantial formal or informal and mutual beneficial linkage or cooperation.
- 9. Cumulate experiences of co-operate and communicate technique, international courtesy etc. to edit a handbook for future reference use.

### Method

Leaded by previous Commissioner Dr. Chiou, Taipei City Hospital Volunteer Cataract Surgical Team started their first trip to Jaffna's teaching hospital from November 10 to 17, 2002 for an eight days ophthalmologic services to those unattended cataracts of Jeffna's elderly (fig.1 & 2). Within that 8 days period, we also visited Mayor and City Council of Jaffna; hospitals of Jaffna, Monlai, Colombo and Kendy; vocational training center sponsored by local Rotary Clubs; Deputy Minister of Health and Nutrition, Mr. Sajith Premadasa (Fig 3.). We could sense the urgent need of resources, materials, funding, specialists and technique of rebuilding the City where there had been the center of 18 years civil war through a quick and brief visit. We are pure medical professionals, and cannot participate or evaluate for our city government colleagues of other different specialties, but we still highly appreciated by local officials and inhabitants for our provision of their currently in need of intraocular lens (IOL) and surgical technique. It was greatly and broadly covered by media during the first few days(Fig 4.). It also attracted thousands of inhabitants who wished to be taken care of in neighboring areas. Fortunately, this was expected and had been smoothly handled by volunteers from local Rotary Clubs and did not affect our emotion and schedule. We had also well prepared for this event by dividing our team into following groups to





ensure all surgical procedures will be smooth and safe:

- Technical group: responsible for screening, suggestion and arrangement of surgical 1. procedure of patients, detail explanation of pre and post op medication and important points (including slit lamp, funduscopy, measurement of IOL and conclusion of evaluation).
- OP Group: responsible for surgical procedure, table and floor assistant. There will 2. be 3-4 operations simultaneously to achieve maximum effectiveness.
- 3. Post OP group: responsible for post OP care and evaluation as well as health education.
- 4. Logistic group: responsible for preparation of all necessary equipment, material and medication before, during and post operations.
- Administration group: responsible for all administrative work, transportation, 5. board and meal, communication, news release, etc.

190 cataract surgical procedures were accomplished within 4 operation days. Average age of patients undergone cataract surgery was 65. The eldest patient was 85 years old. Among them 29% (74 cases) were male and 54% (116 cases) were female.54% (103 cases) had their right eyes operated and 46% (87 cases) on the left. As for the method of operation, 21% (39 cases) underwent Phacosemulsification with IOL implantation<sup>5</sup>, 79% (151 cases) went through traditional Extra Capsular Cataract Extraction (ECCE) with IOL implantation due to those lens were left unattended too long and became too hard or over ripe to receive Phacosemulsification.

### Suggestion

Other areas in Sri Lanka seems to be more luckier because they do not have to suffer the civil war for the past 18 years which halt all social progress and drove most of the professionals away. Areas where need time and resources as well as profession technique to rebuild, such as Jeffna, should be better off to receive continuously funding or donation to provide sponsorship of both material and charges of surgical procedure which cannot be afforded by local inhabitants. This will comparatively provide more lens and chances for their local inhabitants to regain eyesight than paying travel expanse to foreign surgeon to do a job that some of their neighboring surgeons can and will do. Other than above review of the funding and manpower, team members particular for the future success of the same mission had raised following suggestions:

- Collect information more detail before event will be more beneficial to the 1. preparation and post op care, such as exophthalmia syndrome will cause pupil more readily miosis instead of mydriasis and stronger post OP reaction. This kind of information will help arrangement of material and manpower for post OP care.
- If some of the medical material and medicine can be provided or purchased locally 2. will save some trouble from buying and carrying them all the way from Taipei.
- 3. Arrangement of communication with those helping hands from the local hospital about the standard procedures of the operation and learn some simple instructive colloquial will sure make every working manpower easier and earlier to fit in.
- The extra atropine and time taken for the patient to be myriad before the 4. examination and operation should be told and well calculated before the planning.
- 5. One level higher than standard arrangement of surgical equipment and medicine should be prepared to increase the ability to cope with the unexpected situation.

Bring and use your own most acquainted and convenient OP equipments. 6. www.volunteerlink.net 本文屬義務工作發展局出版。All right reserved 2006.





- 7. Surgical theater should be kept aseptic all the time to avoid any possible infection.
- 8. Safety should be the first priority, avoid any infection and complication to ensure a higher successful operation rate.
- 9. Enough time to communicate with local medical personnel should be arranged to ensure and increase understanding of mutual background and need.
- 10. Increase extra-professional activities or visit so that there will be more chance to understand local social and culture.

### Conclusion

Other than the Taipei City Government's policy of city diplomacy, Taipei City Hospitals Volunteer Cataract Surgical Team extended their love and specialties to Jaffna, a city 360 kilometers north of Colombo of Sri Lanka, a country who had been donating more than 2000 corneas to Taiwan for the past 25 years. Volunteer Cataract Surgical Team consisted of 16 members (one leader and one administrative personnel, 14 medical and paramedic personnel) carried out 190 cataract surgeries from November 10 to 17, 2002. As for the Leaders of both sides, Dr. Chiou, Mr. Sajith Premadasa (Deputy Minister of Health and Nutrition), Mayor of Jaffna, Chairmen of Board of Director of Monlai Hospital, Eye Center of Colombo Teaching Hospital, Jaffna Teaching Hospital, they met, held press conference together, communicated and exchanged opinions and experiences. Thorough communication and preparation between both sides involved individuals and their whole heartedly devotion, detailed operation manual and clearly defined work description and responsibilities of each members of mutual operational team and their unselfish supports and cooperation ensured the success and safety of this operation. It also opened the possibility of future cooperation with financially through NGO and medical technique through local Medical Council or our City Hospital if the future development of non-governmental and humanitarian connection and relationship allows.

### Acknowledgement:

Special thanks to the following organizations and people to their devoted help, support and information to ensure this mission successfully and smoothly accomplished: Special Funding Executive Committee, Department of Health, Taipei City Government; Taipei Fu Yung Rotary Club; Taiwan World Vision; Alcon Taiwan; ORBIS Taiwan; Eye Bank, Republic of China; Taipei Overseas Peace Service; Taiwan Root Medical Peace Corps; Cathy Pacific Air Line; Taipei Custom; Doctor Jih-Shiun Huang; Miss Rui-Mei Song; Rotary Clubs of Colombo, Kandy and Jeffna, Vocational Training Center, Lions Airway, and Teaching Hospitals of Jaffna, kandy, Colombo of Sri Lanka.

### References:

1. Bi-zhien Liu, Countries of the World Series (2 1)Sri lanka and Malta (Chinese only), p.1-117 Jou-Liu Publisher January 1, 1996, 6<sup>th</sup> Editions.





- Limburg, H et al, "Forecasting cataract blindness and planning to combat it," World health forum, v 17, n 1, 1996.
- 3. Arnold, J., "Global cataract blindness: the unmet challenge," **British Journal of Ophthalmology**, June 1998, vol. 82, no. 6.
- 4. de Venecia, Guillermo, "A Brighter Vision -12,300 blind patients who could not afford surgery are now able to see," (Philippines), **Milwaukee Journal Sentinel**, July 21, 2000.
- Ruit S, Paudyal G, Gurung R, Tabin G, Moran D, Brian G., An innovation in developing world cataract surgery: sutureless Extracapsular cataract extraction with intraocular lens implantation, Clin Experiment Ophthalmol. 2000 Aug; 28(4).

Fig 1 : Taipei City Hospitals Eye Camp Team member and local hospitals helping hands



Fig.2 : Taipei City Hospitals Eye Camp Team members are carrying out pre/post and operating inside the surgical theater

www.volunteerlink.net 本文屬義務工作發展局出版。All right reserved 2006. 歡迎轉載內文以推廣義務工作,使用時請列明出處。







Fig.3

Deputy Minister health and Nutrition Mr.Sajith Premadasa (middle), Previous Commissioner Chiou(left), and Chairman of Colombo Rotary Club Mr. Bernie

Dole(right) walking in Press conference venue held in the Galadari Hotel.



www.volunteerlink.net 本文屬義務工作發展局出版。All right reserved 2006. 歡迎轉載內文以推廣義務工作,使用時請列明出處。





### Fig.4 : Media covering news of Taipei City Hospitals International Eye Camp in Jeffna.

# பக்கம் 03 யாழ்.மக்களின் மருத்துவ தேவையை நிவர்த்தி செய்ய உரிய நடவடிக்கை! தாய்வான் நாட்டு சுகாதார அமைச்சர் வாக்குறுதி

யாழ்ப்பாணம் தவ.12 மங்களில் மருத்துவ தேவை ஸ்கானப்பட்டு, அவற்றை செப்ப உரிய நடவடிக்கை 15 கண் வைத்திய நிடிவரிகள் வர்த்திரெய்ய உரிய நடவடிக்கை

போதுட்டு பேற்று பாற்பானம் கைகற்குது. நேற்றுக்கலை 9.30 மணியாயில் நகை தற்க இந்நக்கு ரூடிவின் நகு வீஜயம் தொடர்பான தகைல் லாந் தேரிவிக்கும் கணையில் நயன் பேட்போ கூடத்தில் செய் ாளர் மாறுட்டுக்குத் தலைமை தேர் உரையாற்றுவை பில்லே நன், அமைச்சர் இவ்வறு தேரி தனர்.

KANDY M ROPOLI et.

க்கிரகைகளின் செய்சியாளர் பத்திலைகளில் சய்தயாள்களுக தேன் இலங்கை செய்தி ஊடகங்க வின் செய்தியாளர்களும் கலந்து கோண்டனர்

கொண்டனர். முனினதாக நேற்றுக்காலை 9.30 மணிபளவில் பாழ்வருகை தந்த இவர் களை வரவேற்றம் நிகழ்வு "உதவன் அலுவலைகத்தில் நடைபெற்றது. மேற்படி குழுவினரை பாழ்மாநகர

முதல்வர் செ.கந்தையன்.'உதயன்', 'கடரோளி' பத்திரிகைகளின் நிரவாக இயக்குநர் ஈசரவணபவன் மற்றும் ாழ்.றோட்டறிக் கழக உறுப்பின காழகுமாடதாக அலிவீத்து வரகேற்றன். குழந்த குழுவினரு.ன கொழுட்டி கோல், பொற்றோ பொ கீழந்த குழுவினரு.ன கொழுட்டி இராட்டர்க் கழகம், பாற்றோ கழந்தை நோட்டர்க் கழகம் கழற்து போல்றிலீறாட்டர்க் கழகம் கழற்து போல்றிலீறாட்டர்க் கழகம் கழற்து கால் குழிப்பிடத்தக்கது.

பினர்களும் வந்திருந்தனர். தொடர்த்து 'உதயல்' கேட்போ கூடத்தில்' நடைபெற்ற செய்தியாஎ மாதாடொன்றீலும் அமைச்சரும், வை

திப நிபுணர்களும் கலந்துவெ தொடர்ந்து யாழ்.ஆஸ்பத்திரயில தொடர்த்து யாழ.ஆன்பத்தனை மேற்படி குழுவினர் நடத்தும் கன சத்திரிக்கின் முனம் ஆறம்பானத யாழ்.ஆஸ்பத்திரியின் கண் சத்தி சிகிச்சை நிபுணர் எஸ்.தகதாச சிகிச்சைக்கான நோயாளர்களைத

# நேற்று 15 பேருக்கு கண் சத்தீர சக்ச்சை

கெரிவுசெய்கிருந்தார். கொழும்பு கிழக்கு கழகம், கண்டி மெற்றோ பொரைன றோட்டறிக் கழகம், யாழ்றோட்டறிக்