Surgical Support Program

RMF continued our Surgical Support Program in Haiti that we had started in 2012, providing complex surgeries and longer term follow up treatment for children and adults suffering from chronic or acquired orthopedic conditions, ranging from congenital deformities to posttraumatic impairments, in many cases caused by the January 2010 earthquake. Over the past two years, generously supported by Child Survival Fund, Real Medicine Foundation has been able to provide specialized orthopedic care and follow up treatment for 40 children and adults who were desperate for treatment of their posttraumatic or congenital ailments, preventing them from thriving or taking care of responsibilities and their families’ needs.

Most of our child patients were selected at a facility, St. Vincent’s School/Hospital, that cares for children with cerebral palsy, orthopedic congenital, acquired and trauma related deformities. St Vincent’s was once the only recourse for these children, providing schooling, ambulatory clinic and surgeries but was destroyed in the 2010 earthquake. It is currently operating with only outpatient services and no surgical capacity for the foreseeable future. These young children and young adults came to St. Vincent’s from the metropolitan area of Haiti’s capital Port-au-Prince as well as the remote provincial towns located in the far southern and northern departments of the country.

In 2013, in addition to following up with the 2012 cases, the program concentrated on children with lower limb deformities and patients with severe conditions and deformities, focusing on improving their overall health, functionality, and optimizing their chances to thrive as active members of their communities. There were five young children selected who were all affected with a fairly common lower limb deformity known as Blount’s disease, afflicting them with increased weight and specific morphologic features, including moderate to severe progressive medial leg bowing and tibial bone changes. After careful screening by a dedicated surgical team including two orthopedic & trauma surgeons and an anesthesiologist, the patients were prepped for their surgeries, which were then performed at the Lambert Santé Surgical Clinic in Pétion-Ville, through an ongoing collaborative effort with RMF dating back to the early weeks after the January 2010 earthquake. Some of these surgeries were conducted with the help of Dr. Kaye Wilkins, a renowned pediatric orthopedic surgeon from San Antonio, Texas, and longtime collaborator of the Haitian orthopedic surgeon community. He was able to graciously donate some of his time and expertise to procure astute treatment to our most severe cases of this disease.

Josefina Saint-Louis

Josefina Saint-Louis, 8 years old, our second youngest patient, suffered from a moderate right proximal tibia deviation resulting from Blount’s disease, while her other limb was insignificantly affected. With a lateral closed wedge osteotomy, we were able to correct her tibia to offer her a more anatomically aligned lower limb while relieving pressure on her medial growth plate, hopefully impairing the disease’s chance to progress. Josefina, due to her being overweight, a usual component of Blount’s disease, is still in physical therapy and not yet allowed complete weight bearing until her osteotomy has completely healed radiologically.

Julien Edouard

Julien Edouard, 12 years old, was one of our heaviest young boys in the group, weighing close to 115 kg. A classic textbook case of Blount’s disease (obesity, specific morphotype and bilateral deformity), overweight and having lower limb deformity which impeded significantly his day-to-day activities, prevented him from practicing any sport. We had to address one limb at a time and performed a corrective high tibia valgus osteotomy procedure on his right leg and with some over-correction. Two months after surgery, he was already showing radiologic signs of bone healing. Weight bearing has been allowed already and Julien is very happy with his surgery and the overall appearance of his right leg now. He is hoping that he will have the chance to have his other leg corrected, too, as he is looking forward to being able to practice a sport that he likes very much: soccer!
Stevenson Francois

Stevenson Francois, 16 years old now, is a strapping young teen with a different outlook on life after his two knee surgeries. He underwent his second surgery for bilateral medially deviated legs in mid-2013. His first operation, done more than a year ago on his left leg, has healed with very satisfactory results, both anatomically and functionally.

Very happy with his first procedure, Stevenson is the first of our patients to complete his course of treatment for his bilateral condition as his second proximal tibia osteotomy was done with a bit of over-correction since this deviation was more pronounced on the right side. Now able to stand straighter/more balanced on his feet, Stevenson is looking forward to using his new found legs in sports activities as well as future work endeavors.

Cherley Etiene

Cherley Etiene, now 13 years old, was a young girl who came into our care more than a year after she was injured during the earthquake. She suffered from a closed distal femur growth plate fracture, which in the midst of all the emergencies being treated in the aftermath of the earthquake, failed to receive proper care. The resulting turmoil following this catastrophe prevented her to access adequate continuity of care and resulted, as these injuries sometimes can, in progressive deviation and shortening of her left lower limb, due to partial growth plate arrest.

She is by far the most operated on and the second patient in our program to complete her course of treatment. After a successful procedure in 2012 aiming to restore a more anatomical alignment of her knee joint with an external fixator, she managed to restore more than adequate knee mobility with an intensive physical therapy regimen. This year, we were able to complete her treatment course by addressing the more than two inches leg discrepancy she had left from her injury.

Through an escalator technique, we lengthened her thigh bone to recuperate the difference and provide her with an equal limb to the non-affected side. Cherley just turn 13 after her third surgery and is now a young girl, looking forward to all usual activities of teenagers and not afraid anymore of her appearance and gait. As she is continuing to attend physical therapy to strengthen her lower limb, she has already recuperated almost all of her previously attained range of motion. Her overall appearance has changed much since her first evaluation.
Pédaline Louis

Pédaline Louis, 12 years old, this young girl from a very remote provincial town has been dealing with a very severe deformity as a result of a malnourishment syndrome (probably rickets) and shows overall visible signs of growth impairment. She was brought by very poor but concerned parents to St. Vincent’s School in search of a solution. Her severe bowed legs are a result of changes in both her thigh and shin bone, giving her a duck walk gait, which sadly was source for much mockery by children in her hometown.

With the help of our surgical program, Pedaline underwent corrective surgery on both bones of her right lower limb, a double osteotomy realigning her severely deformed limb and was rewarded with a straight leg postoperatively, showing a striking difference. Her follow-up x-rays showed a much better position of her knee joint and her smile at the removal of the cast after bone healing confirmation, spoke for itself. The very satisfactory results gave this young girl hope that she might be able to walk “normally” someday and stand straight. Her only wish is to see both her legs identical now.

Claudenson Alfred

Claudenson Alfred, 5 years old, was also suffering from a progressively acquired growth defect, referred to as “wind swept deformity”, with severe bilateral and divergent leg bowing. His condition, of course, prevented him from emoting a normal childhood and exposed him to the same mockery as Pedaline. Because of his young age a bilateral approach was feasible and we were able to fully correct both his limbs in one surgery, leaving him with more anatomically correct and aligned legs. The healing process of his osteotomies was rapid because of his young age and allowed this young boy to be able to have his casts removed after only 6 weeks of immobilization. Without any rehab, Claudenson was soon normally ambulating and even running with his friends in his hometown. Upon follow-up three months after his procedures, Claudenson is now a happy boy, no longer, as he says “the kokobe” which means cripple, of his village.
Rachel Justable

Rachel Justable, one of our older patients at 24 years old, she was working at one of the most busy hotels in Petion-Ville and on her way to work on a motorcycle-taxi she suffered an open compound fracture of her leg. Lack of access to quality care led her to a private non-profit hospital where an external fixator was used but not followed up on, which resulted in a non-union of her fracture and incapacity to walk on her limb for more than 8 months. That’s when we evaluated her and were able to offer her a viable treatment for her complication: a rigid fixation with plate and screws and bone grafting of her non-union.

Right after this surgery and even as she is starting what will be a slow and long healing process, she was able to start an adequate rehab protocol aiming to restore strength and function to her badly atrophied leg and thigh muscles. Her ankle motion had been severely restricted by the prolonged immobilization and inadequate initial fixation and may require additional surgery on her Achilles tendon later. But even though she is still far from returning to work, Rachel at least now has a fighting chance to hopefully do so, as we continue to monitor her progress and recuperation.