



Dr. Ron Israelski amid the ruins that remain in Haiti after the Jan. 12, 2010 earthquake. "The rest of the world has essentially blown off the Port-au-Prince state hospital because it's such a difficult place to work – one of the most difficult in the world," says Israelski, who has given up two to three days per week of his private orthopedic surgery practice to mend the broken bones of quake survivors. Inset, Haitians continue to live their lives while enduring the harsh conditions that have persisted since the earthquake struck more than three years ago.

THE LITTLE HOSPITAL THAT COULD

How one doctor powers a movement to rebuild Haiti's bones

By ANDREA KENNEDY

The days and months following Haiti's 7.0-magnitude earthquake summoned an epic and immediate international relief effort. But when most good stewards departed Port-au-Prince once they deemed their jobs done, orthopedist Ron Israelski knew his work was just beginning. Like the buildings still in rubble throughout the region, one of the most vital structures of the human body also remained widely untreated – bones.

"Nobody supports orthopedic musculoskeletal services on a regular basis other than me," he says. "I'm it."

Israelski has visited every two to three months since the devastation of Jan. 12, 2010, deploying millions of dollars worth of orthopedic equipment and clinical care to Port-au-Prince through his nonprofit Orthopaedic Relief Services International (ORSI). Born of Holocaust survivors, he likens the tragedy to the terror his parents endured, calling the earthquake "arguably the worst event to affect the human condition in our hemisphere in our lifetime."

"When I saw the bodies being propped like limp rag dolls on the front steps of the morgue, I realized this may be the closest to the sights, the smells and the sounds that my parents saw in the death camps," he says. "That might have been the lead motivation, seeing those limp bodies drop off the trucks. ... How could you not respond?"

Working directly with Haitian medical leaders and



Dr. Damon DelBello (right) operates with residents at HUEH. Courtesy Damon DelBello.

the Ministry of Health, he's helping build stable and sustainable clinical care, education and infrastructure at the country's only state hospital – a destitute cinder-block hovel called Hôpital de l'Université d'Etat d'Haïti (HUEH).

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Port-au-Prince state hospital because it's such a difficult place to work – one of the most difficult in the world," Israelski says.

Nongovernmental organizations steer clear of the sordid region, yet several miles out of town private hospitals provide better care to smaller populations, he explains. By necessity, Israelski has started operating on some patients at a private Seventh-day Adventist hospital outside Port-au-Prince. And though a new multimillion-dollar state hospital is on the horizon for the capital, Israelski says, it will likely absorb any hospital-directed funds. In the several-year interim, patient care and medical training at HUEH – also the only training ground for new doctors – remain abysmal.

"Sterility is a myth down there," says Damon DelBello, a pediatric orthopedist at Westchester Medical Center (WMC) who, with his wife, Jill, a nurse, took their first mission trip to HUEH with Israelski in the spring. "We didn't even have running water in the hospital. We washed our hands and flushed toilets using buckets of water."

Power outages delayed treatment, DelBello says. Equipment was sparse or nonexistent. Water came from a nearby well. Meanwhile, patients with their families lined up out the door for hours and even days – pharmacy-bought antibiotics and surgical equipment in hand – to

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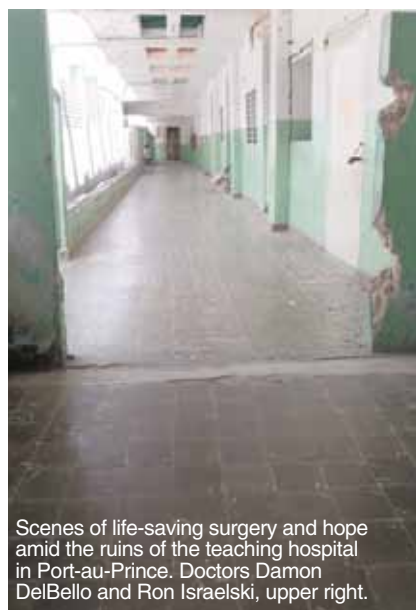
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Scenes of life-saving surgery and hope amid the ruins of the teaching hospital in Port-au-Prince. Doctors Damon DelBello and Ron Israelski, upper right.



get treatment before it's too late.

Patients "were draining pus for all these years since the earthquake," says DelBello, who managed to perform life-saving and life-changing operations on about a dozen children and treated dozens more in the clinic. "There are a bunch of kids still in the hospital I never got to for a variety of reasons due to the dysfunction of the hospital."

Time-sensitive bone infections, or osteomyelitis, resulting from earthquake injuries and other limb maladies have risen to epidemic proportions, Israelski says.

"I was there six weeks before I went with Damon, and we saw kids with osteomyelitis where you could still see the bones on X-ray," he says. "By the time I went back with Damon – the same kids who languished in those beds for another month, – their bones disappeared. There's pus coming out. They've got rubber legs and arms. They lost their limbs, and they may lose their lives."

To Israelski, saving more lives in Port-au-Prince isn't just about fixing people; it's about fixing the system in a country with only 45 orthopedic surgeons to a population of 10 million; where 80 percent of doctors who train in orthopedic surgery leave the country within five years; and where the country's only medical training takes place at a hospital with no running water.

"That is the teaching hospital in Haiti, the residency program in Haiti," says DelBello, who is also an assistant clinical professor in orthopedic surgery and pediatric orthopedics at New York Medical College. "The state is not funding it, not staffing it. There are millions of people in need in that area, not to mention they're training all their future doctors and nurses at that institution."

So in addition to providing doctors to administer health care through ORSI, Israelski also brings structure – and hope – to the medical resident training program as de facto assistant program director. No stranger to program development – he was the capital campaign manager and former director of medical education at Orange Regional Medical Center (ORMC), founder of its Bone & Joint Center and the driving force behind the new TouroCOM medical school in Middleton – Israelski asks visiting physicians like DelBello to lecture to residents and has sent hundreds of textbooks donated from ORMC and New York University, where he is assistant professor of orthopedics.

"I also sent down to all the residents thumb drives of all the textbooks in orthopedics, so every resident in the program literally has a library in their pocket," he says. "How beautiful is that?"

ORSI even sent 17 full surgical suites donated from Orange County hospitals – "They're all bubble wrapped. Just unpack and you're good to go," he says – complete with anesthesia equipment, instrumentation and OR tables, plus thousands of plates and screws donated from other area medical centers. Those same suites, however, got held up in customs for six months and, if they break, will sit dormant due to lacking biomedical expertise – both dire reminders of the challenges goodwill faces when working in a developing country. Not to mention the cost.

"I've probably spent \$100,000 out of my pocket and I have given up orthopedic surgery two to three days a week to do this," Israelski says. "I'm poorer than I've ever

been economically, but I'm richer than I've ever been in terms of all the great satisfaction and gratification I get out of doing this work."

But since good deeds don't seed money trees, ORSI predominantly depends on donations of time and talent from like-minded physicians like DelBello at WMC, who says it won't be long before he returns to Haiti with ORSI – with even more reserves of equipment and WMC physicians in tow – to expand care even to children with scoliosis. Israelski also calls Westchesterite Kenneth Egol, vice chair of education at NYU Langone Medical Center, a "godsend" to ORSI for, among other contributions, organizing the funding of three trips costing tens of thousands of dollars.

Doctors aside, Israelski also depends on the public for donations to cover expenses like equipment, travel and medicine. And with conditions in Haiti so grim, checks don't need to be in the thousands to make a change at the ramshackle hospital that is HUEH.

"It would take so little to put some water, electric and someone in charge of some equipment," DelBello says. "So little would make a huge difference."

Antibiotics, simple as it sounds, are a top priority to Israelski to treat those infections that – as you read this – melt away children's bones until Israelski's return. It's just one of the scenes that power his cause.

"Even though I'm not in Haiti all the time, I'm there every day. You know?" he says. "My heart is always there."

Donations to ORSI may be mailed to P.O. Box 269, Goshen, N.Y. 10924. For more, visit orsinternational.org. ■