

DOCS ON A MISSION

RESIDENTS TAKE FAMILY MEDICINE TO FOREIGN LANDS

BY PATRICIA CORRIGAN

Getting a Kansas medical center's international fellowship off the ground took a cadre of young, mission-minded medical residents and a bit of serendipity. The idea cropped up in 2006 among a group of family medicine residents at Via Christi Health System in Wichita, Kan.

"Those of us in the residency program all became fast friends, and we realized we all had a desire to practice rural and international medicine," said Jack L. Kline, MD. "We thought it would be worth an additional year of study to become proficient, because most often, mission doctors are dropped off with no special preparation. That's trial by fire. We wanted experience before we hit the ground."

Kline and fellow residents Kevin Raymer, MD, John Epperly, MD, Paul McQuillen, D.O. and Richard Moberly, MD found a supporter in Richard Leu, MD, director of Via Christi's family residency program.

"When the residents first approached me in 2006, I went home and told my wife it was a fantastic idea and that I admired the residents so much for coming up with it," he said. "I also told her I had no idea how to begin to develop something like this."

A couple of months later, Mark Stephens, MD — a colleague at Via Christi — approached Leu. "Out of the blue, Mark said to me that his brother had spent time in missions in Rwanda and that he was looking for a teaching position," said Leu. "It was as if the good Lord was sending me a message."

The man looking for a job was S. Todd Stephens, MD, a family physician with a diploma in tropical medicine and hygiene from the Institute of Tropical Medicine in Antwerp, Belgium. He had

six years' experience as a medical missionary in Kenya and Rwanda.

"Back in 1994, when I was headed to the mission field, I was looking for a program like this," said Stephens, who now is director of the fellowship program and associate director of the Via Christi family medicine residency program.

"At that time, you often had two or three young docs heading out and two or three docs retiring after 25 to 35 years of experience," he said. "I kept thinking it was a shame we didn't have an informal program that put together these heroes of the overseas medical missions — who knew the language, knew the culture — and those of us who were going in green."

When Via Christi contacted him about the international family medicine fellowship program he now directs, Stephens did not hesitate. "I had been thinking and praying about this



Kevin Raymer, MD, center left, is one of the Via Christi residents who made a strong case for creating a fellowship program in international family medicine.

Photos courtesy of Via Christi Health System

for 10 to 12 years,” he said, “and I considered the opportunity a gift.”

He speaks with conviction about the great need in the developing world for well-trained, compassionate physicians. “In these countries, health care is declining, not advancing, and the governments cannot keep up with delivery of even basic health care,” Stephens said.

“Our work is a tangible expression of the Via Christi mission statement, which is to provide quality health care to all people, but particularly to the poor and underserved,” he said. “I’m here because my faith informs me, and most of our fellows’ faith informs their career choices.”

With two acute-care hospital campuses and a behavioral health facility, Via Christi is the largest Catholic not-for-profit medical center in Kansas. It is considered a regional leader in medical care and research. The fellowship program began as a pilot program in 2008 and got its formal launch last year. Its first group of fellows includes the five friends who helped create it. They finish their fellowships in May.

“Serving others is a way to live a life that counts,” said Stephens. “In Rwanda, I would walk down a hillside in the middle of night to care for a sick baby and comfort the mom, pray for them. The next day I would see that child breastfeeding, and the mother smiling at me. Nothing equals that — giving, serving, comforting the poorest of the poor in the remotest places, quietly, in obscurity. My deepest joy and fulfillment have come from helping others who can’t possibly pay me back.”

Leu, currently a faculty member in the family residency program at Via Christi, said the fellowship is the first formal, sustained program of its kind in the United States.

“I’m not sure if it will be duplicated



Richard Moberly, MD, right, had worked in several different countries before spending five months in Zimbabwe.

elsewhere, because it is not a money-maker — but it is in the mission of Via Christi to serve the poor and give care to everyone,” he said.

Leu acknowledges that the biggest challenge is funding. Back in 2006, the Via Christi faculty sent six residents to a board meeting of the Riverside Health Foundation in Wichita to explain the concept of an international family medicine fellowship. “The residents talked about places around the world they had served as medical students and as residents, and after about two minutes, they had a check for \$100,000 to get the fellowship program off the ground,” recalls Leu. The Via Christi Foundation matched that.

Next, Leu got a call from Jack P. DeBoer, a business developer in Wichita who had heard about the program. He told Leu that he was familiar with the World Vision Christian relief networks, and he had been to a lot of places all over the world and seen the need for doctors. After meeting with Leu, DeBoer offered to fund the pilot program in 2008-

2009. Kevin Raymer, MD, then a third-year resident at Via Christi, headed the pilot “to work out the kinks,” said Leu.

The fellowship offers two months studying tropical medicine at the West Virginia University School of Medicine and five months in Wichita, with training that includes:

- Clinical skills rotations through trauma, burn care, reconstructive plastic surgery, anesthesia, ultrasonography and dentistry at Via Christi

- A public health certificate-level course through the University of Kansas

School of Medicine-Wichita

- Sessions in cross-cultural adaptation and communication skills
- Clinical tropical medicine seminars with visiting lecturers
- Travel medicine training
- Fulfillment of some junior faculty responsibilities of hospital supervision and training of family medicine residents at Via Christi

An additional five-month stint takes place in one of two hospitals in Africa. One is Karanda Mission Hospital, a bush hospital in Zimbabwe with 130 beds, located 30 minutes from the near-



Via Christi resident John Birky, MD, left, treats a young patient.

est town and about two and one-half hours from Harare, the capital city. The second is Tenwek Hospital, a teaching hospital in the Western Highlands of Kenya, some 150 miles from Nairobi. Tenwek provides primary health care to 600,000 people in the area and serves other patients referred from small clinics in the region.

This past February, Leu and Stephens made a two-week supervisory trip to Zimbabwe and Kenya to check in with the fellows.

“We made the trip to evaluate them spiritually and medically, and to see how their families are functioning in their environments,” said Stephens. “We are excited by the passion of our fellows — and we encourage people to keep up with them through their blogs.” (See epperlyadventures.blogspot.com, mcquilleninternational.blogspot.com, or banksoffshore.blogspot.com.)

Leu adds that he and Stephens worked alongside the doctors. “It’s amazing, the work they do nonstop, day after day — they see a couple hundred people in the clinic and do eight to 10 surgeries a day in a place where 70 percent of the people have HIV/AIDS or malaria, and all the children are at risk,” said Leu. “These Via Christi fellows are providing a tremendous service, and they are receiving an outstanding education.”

The biggest challenge for medical practitioners in Zimbabwe or Kenya is the lack of resources, according to Kline, 33.

“No labs, no diagnostic scans — and also, there are no specialists, so you treat whatever shows up,” he said. “You routinely do work overseas that you don’t do here early in training, because you are the only doctor there. You just do whatever it takes.”

Kline said during his first week on

duty in Zimbabwe, a bus collided with a truck, killing 11 people at the scene and sending scores of injured to the hospital for weeks afterward. He also recalled treating a 13-year-old girl whose arm had to be amputated after a puff adder bit her.

But the saddest case, he said, was that of a 14-year-old boy who picked up a metallic object he found on the ground — “just like any boy would.” It was a land mine. “He had devastating injuries,” said Kline.

Kline is a native of eastern Tennessee and the son of a small-town family physician and a nurse practitioner. Two things drew him to this work, he said:



April McQuillen, D.O., during overseas training.

“My Christian compassion — I came to the Lord at a young age — and working with my church at a mission in Romania in 1998.”

Richard Moberly, MD, also had international experience before spending five months in Zimbabwe on the fellowship program. A native of Grand Junction, Colo., Moberly, 30, said a mission trip in high school sparked his interest in international medicine as a career. “The impact you have always seems so much greater in places where the need is so much greater,” he said. “Plus, doing this work is a good values re-set — you

realize how little the importance of the material world actually is.”

Before his fellowship, Moberly had worked in South Africa, Belize, Honduras and India. In January, just weeks after returning from Zimbabwe, he spent eight days in Haiti with Heart to Heart International, a Kansas City-based organization with humanitarian programs worldwide.

Though he and Kline were somewhat prepared for what they might experience in Zimbabwe, Moberly said, “still, Zimbabwe has its own challenges. There is a lot of disease, and it’s always farther advanced than you see here in America. For instance, many people with cancer present late, and in some cases, all we could offer was palliative care. That’s hard.”

In August, Moberly, Kline, Epperly and his wife, Shea Epperly, MD, and McQuillen and his wife, April McQuillen, D.O., plan a move to New Hampton, Iowa — a town of about 3,750 in the northeastern part of the state. They will go into practice together at Mercy Medical Center, which serves the citizens of New Hampton and surrounding towns. The six friends and colleagues say they will continue to participate in medical mission work overseas.

“This is a long-held dream for all of us,” said Kline. “We’ll set up our practice so that we can take turns staffing rural hospitals overseas.” Where will they travel? “We’re not yet sure what parts of the world we will work in. We’ll be open to whatever the Lord might have in mind.”

To read more about Via Christi’s international family medicine fellowship, visit www.vcfm.net/fellowships/international-medicine-fellowship.

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