

Reflections for January

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HAITIAN ON THE COMFORT: DOCTOR AND PATIENT

As we approach the 1-year anniversary of the deadliest natural disaster in the history of the Western Hemisphere, a Haitian American neurologist reflects on his experience aboard the USNS Comfort.

I walked onto the 2 Forward (Pediatrics) ward to see a young girl, hearing the familiar sounds of Haitian spirituals being sung. The girl was screaming. I had seen her the previous night in the casualty receiving area when the pediatric surgeon was discussing the need for an amputation of one of her legs. Although she was 8 years old, I thought she did not follow the discussion. In retrospect, I realize that she understood but had the stoicism that was common among the Haitian patients we were treating on the USNS *Comfort* after the Haitian earthquake. Her mother, though, had refused consent for amputation, largely based on strict instructions from the girl's father.

When I arrived at her bedside on 2 Forward, someone from the physical therapy team was trying to work with her and she was screaming "Pa coupé jambe mwen, pa coupé jambe mwen"—"Don't cut off my leg." It was not the first time I had seen a patient on the *Comfort* fear an amputation, regardless of whether it had been suggested. Some patients were frightened of the x-rays, believing that the machine was a prelude to amputation and that afterwards they would lose an arm or a leg. The patients' suspicion of x-rays, as well as their fear that the CT scanner was a killing machine, prompted an early shift in the medical practice on the *Comfort*, with more detailed explanations of all tests being performed.

On the 2 Forward ward that evening, I spoke gently to the young child, and reassured both the girl and her mother that there would be no amputation and that they would continue to get the best possible treatment. She stopped crying and went to sleep smiling after agreeing to physical therapy the following day.

Although a neurologist, during Operation Unified Response, I had become accustomed to being asked to

speak to patients about end-of-life issues, informed consent, and many cultural issues that arose from the superimposition of a large tertiary care facility on one of the poorest nations in the Western hemisphere. I knew early in the mission, being the only physician on the *Comfort* who was a native of Haiti and fluent in Haitian Creole, my role would go far beyond that of a neurologist.

This amputation issue is a case in point. Amputations, which were rare before the earthquake, became the signature wound following the earthquake, and the *Comfort* was quickly becoming associated with amputations in the minds of the Haitian people. The director of surgical services informed me that by the end of the mission, of the 843 surgical procedures, only 38 were primary amputations. Some patients came on the ship following an amputation, which gave the appearance that even more patients had limbs removed on the *Comfort*.

In the young girl's case, we respected the mother's decision. The Healthcare Ethics Committee and the *Comfort* leadership made it clear to the medical staff before arriving in Haiti that the ethical principles of autonomy, beneficence, nonmaleficence, and justice as well as respect for the culture, traditions, and customs of the Haitian people and respect for sovereignty of the host nation would be of paramount importance.

A week before I met this young girl, a young man in his 20s, whose leg had been amputated on the *Comfort*, asked to speak with me. He thought I was the chief of the hospital because "I hear your name called overhead all the time." He was not the only patient with that misconception. Many of the patients had become accustomed to saying "Dokté Etienne," often with a smile and a great deal of pride as they truly believed that the *Comfort* was being commanded by one of their own. Correcting them enhanced the perception, since they saw this as a form of modesty.

This young man explained that, although we may be saving the patients' lives, we were creating a new problem. He spoke about how he is already discrim-

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inated against due to his dark skin complexion and now will be subject to even greater discrimination given his new disability. He explained that in Haiti everyone is expected to work hard and when you are missing a leg or an arm, you may be perceived as weak and lazy since you are not doing your part. He added that you are seen as different and may be outcast. He had been planning on running for public office before the earthquake. That dream appears to have been shattered, or at least put on hold, now that he is missing a leg. I offered reassurance by telling him that there will likely be organizations from around the world offering prostheses to the Haitian people.

This earthquake has devastated the Haitian population and has left many survivors with significant

disabilities. Although many countries have ended their immediate disaster relief in Haiti, there continues to be a need for humanitarian assistance to address the existing and emerging needs of this destitute island nation. The 7.0 magnitude earthquake on January 12, 2010, managed to destroy much of Haiti's infrastructure, and it has taken the lives of over 200,000 Haitians; however, the mountainous landscape of Haiti is ever present. While on the *Comfort*, at least once a day I looked outside at the high mountains which characterize Haiti and marveled at the beauty that remains. Likewise, the Haitian people remain beautiful despite their amputations and bruises, and they have good reason to be optimistic for a brighter future.

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