

VOSH-ONE

Volunteer Optometric Services to Humanity / of New England

Winter/Spring 2012-2013



A Jamaican volunteer and Katie Ward do pre-testing as a youngster looks on.

Working with Icare in Jamaica

by Kathy Ward, OD

My teenage daughter Katie and I had the privilege of joining a VOSH Northwest team for a mission in Jamaica last October. This mission was in cooperation with a nonprofit called Icare which organizes dental and eye care missions in that country.

Our team included 5 optometrists, an ophthalmologist, a nurse, several opticians, several extra helpers from the US and several local Jamaican volunteers. We saw 200-300 people each day. In addition to dispensing glasses, sunglasses and artificial tears and referring patients for glaucoma and cataracts, we were also able to offer blood pressure and blood sugar screenings.

This was my second VOSH mission, the first being in Haiti just after the earthquake. With VOSH, even if you have never met anyone on the team, it will be a fabulous group of upbeat, enthusiastic, energetic folks who'll do whatever it takes to make the project work. It is a pleasure to work with such fun, good-hearted people.

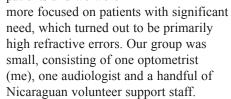
I will be returning to the Jamaica mission next October, this time with my son, Ryan. We are looking forward to it. A teenager gains so much from an experience like this. It is great to see them discover that they have so much to offer.

A VOSH sojourn to Jinotepe, Masaya, and Granada, Nicaragua

by Jay Jordan, OD

My VOSH trip to Nicaragua in late February of this year was very different from the many previous VOSH trips I've taken part in. Usually VOSH trips are

composed of large groups, well-organized, planned well in advance. Typically the team sees a high volume of patients. The goal is always to help as many people as possible. This trip was unique in that we saw a much lower number of Patients waiting to be seen patients and we were



The trip started in a typical way when we visited an orphanage of about 50 children located in a beautiful setting on the outskirts of Jinotepe, not far from the capital city of Managua. We examined all of the children (vision and hearing) and anyone else who showed up, including the staff and some parents. We moved along at a normal pace, prescriptions were fairly routine and there was

no significant pathology other than cataracts in some of the older adults.

The following two days of clinics were in poor, congested barrios (neighborhoods) in the heart of Masaya, a large city

about a half-hour south of Managua. We spent the last day of clinic in a barrio in Granada 30 minutes further south of Masaya. In the past, we have set up our clinics in schools and churches in the local community but this time we used a very different model: we set



up in the homes of two of our Nicaraguan friends who acted as our sponsors to the community, volunteers who help us with the eye clinics each year and know how our group typically works. Their homes were located deep within the barrios of the city and were typical of Nicaragua; simple, with dirt floors, minimal plumbing, an outdoor kitchen, and a latrina (outhouse). We brought in electricity by extension cord, although the power was sporadic with frequent outages - a fact of everyday life in the country.

Clinics were impromptu, being organized only the day before they were to take place. Since our sponsors have lived Please turn to page 2B

Chapter makes major website changes Check them out at www.VOSH-ONE.org

In early June we celebrated the official launch of the all new VOSH-ONE website. We know you will find it more user-friendly and we want to encourage you to visit it often. We welcome your feedback so don't hesitate to give us your opinions and suggestions.

Contact information for VOSH-ONE officers as well as past and present VOSH-ONE newsletters can all be found on the website. In addition to updating past VOSH-ONE website features, donations and membership dues can now be paid online via a link to our secure PayPal site. Special thanks to Safilo for their continued support as the sole sponsor of the VOSH-ONE website.

VOSH-ONE is a chapter of VOSH/INTERNATIONAL. The organization is dedicated to the preservation of human sight, mainly in developing countries where there is no welfare system.

VOSH-ONE accomplishes its goals through its own missions or by assisting other groups with the same purpose.

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From the president's desk

by Wendy Crusberg, OD, President, VOSH-ONE

As another year comes to a close, I look back in amazement at all of the wonderful accomplishments that VOSH-ONE and its members have been able to achieve. This year, VOSH-ONE built a new website (launched in June), awarded scholarships to two future VOSH hopefuls, and, as always, provided free eye care to places in need throughout the world.

The VOSH-ONE website was a project that I decided to take on personally this year. I had never designed a website before so I now have a new appreciation for just how much work goes into creating and maintaining one. Now that the website changes are complete, I can say for sure that all of the hard work and effort was worth it. You'll find that updates, changes, modifications, etc. will now be easier for us to make.

Also, the new website has the ability to accept payments via credit card for VOSH-ONE dues or donations, a convenience that we have always wanted to be able to consistently offer. Last but not least, by creating our own website, VOSH-ONE will be saving over \$1,000 per year on website fees. More information about our website can be found elsewhere in this newsletter. Please take a few minutes to review it and let us know your thoughts and additional suggestions for the future.

The VOSH-ONE student scholarship program continued this year for the second year. Joyce Le and Caitlyn Kennedy, both 4th year students at the New England College of Optometry, were awarded \$750 scholarships in honor of the active roles they already play in VOSH. Next year, VOSH-ONE plans to continue offering the scholarships and has decided to increase each of the scholarship awards to \$1,000. VOSH-ONE recognizes the importance of involving the younger generation in volunteer efforts and is happy to be able to acknowledge the efforts of those who have demonstrated VOSH-ONE ideals so early in their career.

In 2012, VOSH-ONE members brought sight to individuals in Nicaragua, El Salvador, Jamaica, and the Dominican Republic. Personally, I had the good fortune to



go on a mission to the Atlantic coast of Nicaragua. It isn't until we travel to places that are lacking in so many of the luxuries that we are used to, that we realize just how lucky we are here in the USA. With each mission trip that I go on, I become more and more enlightened about our fortunes here and more and more passionate about how much of a difference each of us can make by using our optometric skills to spread the gift of sight.

I'd like to pause a moment here to express again our appreciation to each and every one of you who continue to support VOSH-ONE endeavors simply by renewing your annual memberships. A number of you include added donations, some small, others sizeable. Thank you, thank you, thank you. Your financial support enables us to carry out our mission.

I know that 2013 will once again mark success for VOSH-ONE. I encourage those of you who've been wanting to get involved to do so. There are so many ways that you can offer help aside from maintaining your membership, including participation in a trip or helping with the administrative side of VOSH-ONE.

In May, my time as VOSH-ONE president will be coming to a close and I will be passing the torch to Dr. Karen Koumjian, current vice-president of VOSH-ONE. We all know she will do a wonderful job and we welcome her to the position.

As for myself, it has been a pleasure being president of such a wonderful organization for the past two years. Thank you all for giving me this special opportunity.

Medical Mission to Constanza, Dominican Republic, late April 2012

by Derek Feifke OD

The most recent bi-annual medical trip to Constanza, Dominican Republic took place from April 28 to May 5, 2012. Dr Joe D' Amico and I represented VOSH as part of a team of 24, led by medical director David Rudolph, MD. Our team was comprised of two optometrists, an ENT, pedia-

trician, internist and dentist as well as five nurses and an optician. We were joined by 10 other volunteers, including administrative personnel and Rotarians, as well as 5 local US Peace Corps volunteers.

The Constanza Mission was established by Deacon Joseph Vitello seven years ago to help provide care and support for this severely under-

served area of the DR. In 2007 the mission partnered with physicians from the South Shore Medical Centre to bring much needed medical care to this area. Their organization has since made remarkable progress.. They have expanded and modernized the facilities and operating room at the local hospital and full-time physician has been hired. The mission has also successfully implemented a clean water project thanks to the commitment and help of numerous local Rotary clubs.

Constanza is a poverty stricken region of the DR where most people earn a meager wage working the fields. It is considered the bread basket of the DR, providing more than 85% of the country's agricultural needs, for both local consumption and especially export.

We travelled to different villages every day. Clinics were typically set up in local school houses. Patients were first triaged by the nurses, and were then directed to the appropriate doctors. Patients generally required care from all medical specialties. As always, the need for eye care and vision correction was in high demand.

Our optometric team examined a total of 348 patients. We dispensed over 500 pairs of glasses including distance, near and

sunglasses. There was an unusually high incidence of high astigmatic refractive errors. Rxs we were not able to provide onsite were brought back to the US to be fabricated by our labs. The glasses were shipped back to the DR and to patients in the various villages, in care of the wonderfully helpful Sister in charge at the local

convent.

Among eye pathologies we identified were 11 patients with advanced cataracts, including 1 traumatic cataract. A number of patients presented with corneal leukoma and pterygia with at least three requiring surgical intervention. Other unusual pathologies included 3 advanced ker-



Drs. Feifke (l rear) and D'Amico pause for a photo with three sisters, all of whom have retinitis pigmentosa.

atoconic patients, one case of toxoplasmosis, and an entire family afflicted with retinitis pigmentosa. Binocular anomalies were also seen, including esotropia and a patient with Duane's syndrome.

A truly memorable moment on this trip was at the clinic in Surial, when a young patient paid me a return visit with her mother. She was a 25-year-old young lady with Down Syndrome I'd met on my initial trip a year earlier. The woman had been diagnosed with "blindness" since childhood. Despite going to different medical clinics over the years, the answer was the same, "nothing could be done to make her see." After a brief retinoscopic scan, it became clear that she was extremely myopic, -14D to be exact.

Holding the trial lenses in front of her eyes and witnessing her and her mother's reaction as she identified the facial features of the young boy (my son) at the other end of the room was a remarkably emotional event, one that I won't soon forget.

This was another successful and rewarding mission. The multi-disciplinary medical approach proved to be efficient in that many health issues could be addressed under the same roof. It appears likely that an ophthalmologist will join the Constanza Mission Team for the first time next May.

Upcoming VOSH-ONE Eve Clinics

Please don't hesitate to e-mail or call one of the trip leaders listed below to talk about taking part in a VOSH-ONE eyecare clinic. They are passionate about the project they are involved in. If these dates or sites don't work for you, go to www.VOSH.org for information regarding additional VOSH trips scheduled by other Chapters.

Jenifer Ambler, OD, of Vermont continues as leader of the eyecare section of a combined eve/dental care team that's been dubbed the "Sight and Bite" group. Dr. Ambler will be returning in the fall of 2013 and is seeking more ODs so they can see more people. Team will serve in El Salvador. Contact:amblerj@sover.net

Dr. Lee Lerner is coordinating plans for VOSH-ONE ODs to hold eye clinics in Vera Cruz, Mexico, joining a group of Lasell students who've been doing various volunteer projects there annually and have requested our services in early January, 2013.

Contact: eyedoclerner@aol.com

- In late January, 2013, Elise Harbe, OD will lead a return trip to the Bluefields area of Nicaragua to work with Bob Peck, program coordinator of a team of Williams College students. Contact: harbe@neco.edu
- Additional ODs are welcome to assist with a multi-disciplinary medical mission (ASAPROSAR) when it returns to Santa Ana and San Miguel, El Salvador, in late January 2013. Contact:

harryizeltzer@comcast.net

SVOSH-ONE, the student VOSH group at the New England College of Optometry, is planning a student trip during spring break, April, 2013. Faculty Advisor is Bina Patel, OD. Contact: PatelB@neco.edu or

Lung Nguyen@neco.edu

SVOSH-NECO 2012 Clinic in Batey San Ingenio Porvenir

by Kristin White

On April 7, 2012, after three years of volunteering, participating in local vision screenings and sorting through thousands of glasses, our SVOSH-NECO team departed for Santo Domingo, Dominican Republic. We were a group of 20 optometry students (19 third years, and 1 second year) and 5 optometrists who partnered for the sixth time with the Dominican organization the Batey Relief Alliance (BRA), a group whose mission is to provide health care, education, disaster relief, and community development programs to some of the most impoverished areas of the United States, Latin America and the Caribbean. In the Dominican Republic, the BRA works to provide these services to the Bateys which are historically Haitian refugee villages, communities that are mostly lacking in educational and medical services.

Our group worked for 5 days under the direction of Dr. Bina Patel (faculty advisor), Dr. Michael Ruby, Dr. Devina Patel,

Dr. Anna-Maria Baglieri and Dr. Brandon Harris in Batey San Igenio Porvenir, situated in the southern region of San Pedro de Macoris.

After flying through the night to arrive in Santo Domingo, we were ready to claim our luggage and head to the hotel for some much needed rest before setting up the clinic the next day. However, customs officials working that Easter morning had other plans. Much to our arguing to the contrary in Spanish at 4:30 AM, they

would not let us bring our 23 crates filled with glasses and ocular medications into the country. We had procured the required letters from the Ministry of Health and letter of invitation from the BRA, but there was yet another letter that needed to be signed by the Customs department in advance, unbeknownst to us or our host organization. They assured us that we would have our crates on Monday morning when their advisor could sign off on the entry of the crates into the country.

This left us unable to set up the clinic

on Sunday, so after months of studying, our students had a much needed day of rest. Monday morning we set out extra early to set up our clinic, only to realize

that we did not have any glasses and only a few bottles of diagnostic eye drops that happened to be in someone's personal suitcase.

Compounding matters, we also did not have any

Above: NECO student Kristin

TOP R.: Kids never tire of pos-

White examines a patient.

ing for the camera.

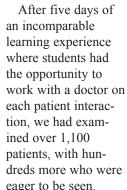
eye charts! Not to worry though - Jennifer Liao and Dr. Patel got right to the math and created some makeshift Snellen charts by calculating the letter size (well, actually number size as many of our patients had never had the opportunity to learn their letters) for our 10-foot working distance. We were still able to see roughly 150 patients that first day

and gave them a ticket to come back for their glasses, which by the end of Monday's clinic, still had yet to arrive.

Luckily by Tuesday afternoon, glasses, medications and toys (collected by a generous boy scout troop from North Andover) had arrived and we dispensed over 300 pairs of glasses and a number of medications for glaucoma and other eye conditions to those seen to that point. All team mem-

bers were flexible with their schedules, which really helped make the trip run smoothly. Now that the glasses had arrived, the word really spread throughout the community because on Wednesday morning, the line waiting to be examined when we arrived at 8 am was jam-packed; many had been waiting for hours.

Countless patients told us their last eye exams had been with the SVOSH-NECO group who worked in the same community about 5 years earlier. Knowing that we were able to provide this service to so many who otherwise would not have access to care, made the long hours worthwhile.



Students were exposed to so many conditions in such a short period of time - it was optometry boot camp: active toxoplasmosis one minute, traumatic glaucoma another, chemical burns, diabetic retinopathy, macular holes, high refractive errors, all in a day's work. Antibiotics, allergy medications, glaucoma medications and steroid eye drops were dispensed as needed, as were reading and distance glasses, sunglasses and artificial tears. For prescriptions that needed to be made at home, patients selected a frame which was bagged with their exam form. VOSH students will make the glasses in Boston to the required specifications and they will be mailed to the BRA's New York office, where the CEO of the company will then bring them to the community on his next visit to the Dominican Republic.

Thankfully, we had some great crowd control because it seemed that nearly every day a fight would break out among those waiting in line. The educational experience is something our group of 25 will carry long into our professional careers. The hospitality and the gratitude shown by patients was not to be rivaled. It is something we should each try to replicate as we progress in our careers.

We showed ourselves that eye care can be done in sometimes unconventional ways, while still providing the necessary services. Our team enabled many people to view their world a bit more clearly. Through this experience we now see the whole world through a different lens as well.



MAKE A NOTE:

Our Chapter website: www.VOSH-ONE.org

Our student Chapter website: svoshneco.org

Our parent organization website: www.VOSH.org

Also note these dates: *VOSH-ONE*

Annual Meeting/Elections, early May 2013

NECO Clausen Room, Beacon St., Boston, 9 AM

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VOSH/INTERNATIONAL Annual Meeting, October 2013

Puerto Rico

V-I Annual Meeting held in Phoenix

by Wendy Crusberg, OD President, VOSH-ONE

On October 28, 2012, VOSH Chapter leaders and members gathered from areas all around the globe to discuss the ever-important task of bringing eye care to those in need.

Over the last several years there has been a movement within VOSH toward sustainable eye care. Former President of VOSH-International Dr. Greg Pearl, and current President of VOSH-International Dr. Ellis Potter, spoke on how the world has changed since VOSH got underway some 40 years ago, and how these changes will impact our VOSH missions. They feel that our VOSH organization should be able to one day "put ourselves out of business." We should all strive to help the world help itself by not just bringing our eye care services to a region for

a week, but by supporting the development of optometry within developing nations so there will be eye care after we are gone.

Both Clive Miller from Optometry Giving Sight and Dr. Luigi Bilotto from the Brian Holden Vision Institute spoke about their current projects and what their organizations are doing to promote sustainability.

The 2013 VOSH-International Meeting will be held in Puerto Rico in October 2013. It is an extraordinary opportunity for anyone who is interested in VOSH affairs to experience the world-wide impact our organization is making, to network ideas, and to hear firsthand from world-wide leaders who are making a difference. It is also an opportunity to see up-close some of the amazing solutions inventive spirits around the globe are coming up with to solve problems in dispensing.

Solo sojourn to Nicaragua

Continued from page 1

in their communities their entire lives, they were able to get the word out in plenty of time to the patients who had the most need. Crowd control was easy as we took them in groups of 10-15 so there would be fewer patients waiting. No one who was asked to wait was denied care.

My audiologist friend Bjorn Eriksen set up in the same house in an adjoining room so that we could share electricity. I examined patients in a bedroom, sitting on one bed while my patients sat across from me on another bed. It was comfortable and the flow was efficient. We had a pre-test area where our Nicaraguan helpers took histories and screened visual acuity. Since patients were pre-selected, most of them had significant vision problems, mostly high refractive errors.

Where in trips past, I may have examined 80-100 patients on a given day, this time I was lucky to see 30-35 patients per day. In addition to complicated refractions, I also spent a good amount of time measuring PDs and taking seg heights, and making sure that frame selection was appropriate since we didn't have our customary optical team with us. We used the same dispensing model that we have used in the past, that is to dispense ready-made readers to the patients

who needed them and to have the patient choose a new frame in the case of custom prescriptions. They would then be made at home in the States and later sent back to Nicaragua. Of the nearly 90 patients seen in Masaya and Granada we had about 35 prescriptions to be custommade and sent back.

In addition to ensuring a high percentage of significant refractive problems, I think the pre-selection process also resulted in us seeing very little in the way of acute cases or pathology beside cataracts (a couple of red eyes, one foreign body, and one glaucoma case). We saw an inordinate amount of high myopia and high astigmatism. It was interesting to note that all the patients came from the same neighborhood and all their astigmatism was with-the-rule.

Although this trip was different in many ways, we often say on VOSH trips that everything seems to work out for the best when you just go with the flow, and there are always surprises. One thing this trip did have in common with all my past VOSH trips was a great feeling from rich experiences with a gracious people in a beautiful country and leaving with the satisfaction in knowing you helped make a difference.

Three patients

by Jay Jordan, OD

There are always patients who remain in my mind long after a clinic ends. From this trip, three stand out. Two were sisters. The first, a lady of 40 was a 12 diopter myope. She had not had glasses since her early 20s, when they were broken. She had received them from a medical team that had come to her town. This woman was followed by her 36-year-old sister who was a 4 diopter myope with 3 diopters of withthe-rule astigmatism, who had never had glasses before. At the end of the exam, I held the trial lenses up in front of her eyes and asked her to look across the bedroom at the picture of Jesus hanging on the wall above the bed. When I tried to lower the lenses, she grabbed my wrists to hold the lenses in place and continued to stare at the picture with a big smile.

I was also touched by a little eightyear-old girl who presented with a large strabismus, with nystagmus, and who had a low myopic prescription that gave her a slight improvement in her distance acuity. It was heartbreaking to hear her story as we learned that she was found on the street as a toddler and was taken in by a local family who continues to care for her as their own. by Wendy Crusberg, OD

This year I had the opportunity to participate in a trip to the Atlantic coast of Nicaragua (Bluefields region). Every year for the past ten years, Robert Peck, faculty member at Williams College, has been organizing trips to Nicaragua to provide free eye care and to expose college students to Nicaraguan culture. Dr. Katie Field of North Adams, Massachusetts and Dr. Elise Harb of Boston, Massachusetts, have traveled with this group for years. Usually one or two additional optometrists accompany them. This year I was the lucky one who got to tag along.

This trip differed greatly from trips I had been on in the past. Aside from being much longer than what I was used to (just under 2 weeks), the trip was set up in a very different way and really opened my eyes to a new type of mission. Instead of setting up clinic in one or two locations that we would go back to every day, we traveled in small groups via boat to different communities. I found this especially fun because it allowed us to see different landscapes and communities as well as allowed us to bring care to places that

aren't usually visited by mission groups.

Another aspect of the trip that was very different than what I was used to was the type of care provided. Very little emphasis was placed on ocular disease. Instead of tak-



Dr. Wendy Crusberg examining a youngster in Bluefields

ing the time to identify different causes for vision loss, we concentrated mainly on providing high volumes of people with glasses. Because of this, we were able to see many more patients than I had seen on past trips. This made for long days, but in the end it was worth it because of all of the people we were able to help.

Working with non-optometric students was also an interesting aspect of this trip. The expressions on their faces will stick with me forever as they realized that it was because of their hard work and volunteerism that a person could now see. I

could tell that it really made them think about how important sight is to everyday function, something that is often taken for granted. It was exciting to be able to help the students realize that they can truly make a difference in the world.

I am already planning to return to the Atlantic coast of Nicaragua for another mission trip in January, 2013. I feel lucky to be able to take part in such a wonderful mission once again.

SVOSH-NECO serves in El Salvador

Last fall, first-year students Vinh Vu, Nicole Horn and Stephanie Britton and third-year students Richa Garg and Rupal Bhagat from the New England College of Optometry joined a FUDEM team consisting of VOSH/International Immediate Past -President Dr. Greg Pearl, Quexta CEO Dr. Dreher, Chicago-based optician Kirra Denten, five students from Southern California College of Optometry and a student from Illinois College of Optometry.

Established in 1990, FUDEM is a nonprofit organization dedicated to developing and providing comprehensive, accessible, and quality health services to those who live in poverty in El Salvador. The mission trip was designed to serve five different municipalities of extreme poverty to provide vision health screenings, prescription eyeglasses, readers, sunglasses, treatment and vision health care awareness. Over a five day period 1,543 patients were seen and treated. This was the first time NECO has teamed up with FUDEM, but this was only the start of a collaborative partnership that will be continued.



Volunteer Optometric Services to Humanity of New England

Please join VOSH-ONE and help provide the gift of sight to needy individuals in other countries as well as within our own borders. All VOSH-ONE members are members of VOSH/INTERNATIONAL.

Whether you are interested in taking trips, making a donation, have glasses and equipment to offer or just want to be informed of our projects, we value your support. VOSH-ONE is a 501(c)(3) non-profit organization.

Please send your tax-deductible check to: VOSH-ONE Treasurer Dr. Andrea Murphy 18 Winter St. West West Lebanon, NH 03784

Note: You can now pay online at our website:

www.VOSH-ONE.org

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