

A Gorgas Experience in Peru

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THE GORGAS DIPLOMA COURSE

- One of several widely recognised international diploma courses in tropical medicine.
- Named after US General Dr William Crawford Gorgas, whose application of sanitation measures eliminated the threat of yellow fever and malaria from the Canal Zone in Panama, thus allowing the building of the Panama Canal.
- Held annually in Peru over 9 weeks (usually from the end of January to the start of April) since 1996 at UPCH.
- An additional Gorgas Expert Course held over 2 weeks, has been run annually since 2000.
- Visit <http://info.dom.uab.edu/gorgas> for more information.

I must confess that managing nosocomial infections has never particularly appealed to me. But the combination of learning about exotic diseases in a strange land and travelling around one of the most beautiful landscapes on earth (not to mention escaping work for almost three months) proved too tempting.

PREPARING FOR PERU

Preparing for the trip was a major physical and financial undertaking. Tuition fees (US\$4,950!), air tickets, multiple requisite vaccinations (including yellow fever), food and accommodations (and holiday expenses) practically bankrupted me. Why would anyone in his right mind pay to leave a tropical "paradise" and learn about tropical diseases elsewhere? Well, other than dengue fever and the occasional cases of melioidosis and malaria (always imported...), one would have to look very hard to find tropical diseases in clean, "utopian" Singapore.

Fortunately, extremely detailed instructions and advice (including maps and emergency contact numbers) were sent to participants early by the course organisers. Airport transfers and temporary accommodations at a decent hotel had also

been arranged for us beforehand. This was a great comfort to those of us who only knew "darkest Peru" from the stories of Paddington Bear.

Situated on the western coast of South America and once the centre of the lost Inca civilisation, this beautiful country has been devastated by a series of dubious governments, starting with the exploitative Spanish conquistadors (with an economic hiatus during the rule of Alberto Fujimori from 1990 to 2000; but he was practically a despot who had purged the opposition, practised nepotism, and pressurised both the media and judicial system). The current president, Alejandro Toledo, "enjoyed" a public approval rating of 8% during my time in Peru. His possible replacement after next year's elections is former president Alan Garcia, whose previous term (1985 to 1990) resulted in inflation rates of 7,650% and the rise of the terrorist groups Tupac Amaru and Sendero Luminoso (Shining Path). Almost every guidebook about Peru has a warning about crime, and I saw security guards outside most "major" establishments like McDonald's in Lima, the capital city. Lima does not lack for casinos, although – superficially at least – economic benefits appear to be reaped only by casino operators and perhaps certain government officials.

However, the people (mostly Mestizos – mixed Spanish and Indian blood) are friendly and determinedly optimistic in spite of their economic situation. I am also hard-pressed to think of a country where you can surf on the coast, visit desert oases, trek through jungles, sail down the Amazon river, climb up mountains, and explore old ruins (like the incredible Macchu Pichu) all within its borders.

It is this unfortunate combination of factors – ineffective government and general poverty (facilitating continuing spread of diseases); multiple microclimates and altitudes (varied assortment of diseases); and friendly people (enthusiastic course faculty) – that results in a great part of the unique and enriching experience that is the Gorgas course.

ALL AROUND THE WORLD

My 29 course-mates come from US, Canada, Australia, Ireland, Norway, Chile, South Africa and Ethiopia. Not all of us were infectious diseases nuts – the majority were family practitioners, and there were also a couple of dermatologists, a gynaecologist, paediatricians, and even a nurse. Other than experienced UPCH and University of Alabama at Birmingham faculty, we had as guest lecturers, prominent tropical medicine physicians and field-workers from Canada, Germany (Dr Klaus Fleischer from Wurzburg, who had trained the team that played "host" to my colleague and his family in Frankfurt in 2003), Kenya, US Navy, and UK (the renowned Dr David Warrell from Oxford, who was actually born in Singapore).

Nine weeks was probably just enough time to get to know one's course mates without getting seriously riled with each other's idiosyncrasies. Everyone was happy to share their

About the author:

Dr Hsu Li Yang is currently training in infectious diseases at SGH. Realising early that there was no future with worms locally, he has compromised himself in an affair with MrsA immediately following a brief but sordid fling with a virus. Those who remain interested in the course despite surviving this article can contact Dr Hsu at email liyng_hsu@yahoo.com or log on to <http://info.dom.uab.edu/gorgas>.

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experiences, and so many diverse views from different parts of the globe were probably as useful as the course itself. Certainly, I could no longer keep a “frog-in-the-well” attitude – the health problems of the world take on greater significance than painted by our media, and there are different (and perhaps better) approaches to various aspects of healthcare than those resolutely espoused by our local authorities.

SURVIVING GORGAS

It was a grueling course. Each day at 7.15am, participants would take the half-hour bus ride from the wealthier and safer Miraflores district to the slums of central Lima, where the Instituto Medicina de Tropical and UPCH hospital were situated. There followed three and a half hours of lectures (split over morning and afternoon sessions), two over hours of clinical tutorials, and one and a half hours of laboratory practicals. Most of us re-learned medical student habits quickly – I observed several beautiful cases of ptosis and myoclonic jerks (when not demonstrating these “signs” myself) during afternoon lectures. Optional activities were available most Saturdays, ranging from hands-on experience with the WHO Epi-Info programme, to review of microscope slides of parasites.

Lectures were extremely comprehensive and included tropical parasitic diseases, malnutrition, poisonous creatures, vaccinations and altitude medicine. What made some of these lectures different from the ones I had received at the National University of Singapore was the great personal experience of the lecturers. One unforgettable anecdote was recounted in a deprecating manner by the director of the taskforce dealing with the cholera outbreak in Peru in 1991 (which affected more than 300,000 people): his problem then was to find a rapid and reliable way of transporting medical supplies to the “hot spots” all over Peru. Having rejected the Ministry of Health (“too few and too slow”) and Ministry of Defense (“even slower, which was why Peru lost so many wars”) vehicles, he hit upon the happy idea of “hijacking” the trucks ferrying Coca-Cola and beer, and achieved resounding success.

But the main strengths of the Gorgas course were the clinical cases and field trips. We saw patients with weird and wonderful diseases everyday – hydatid cysts, mucocutaneous leishmaniasis, bartonellosis, lobomycosis, neurocysticercosis, leprosy, brucellosis, tropical spastic paraparesis, AIDS (okay, we have this too), snake and spider bites... just to name a few, which our tutors would painstakingly explain to us. Examining real patients creates a different learning experience from just listening to lectures. In addition, there were four-day trips to the tourist city of Cuzco in the Andes Mountains and the Amazon jungle city of Iquitos, where we saw completely different spectrums of diseases. In Iquitos, we were also treated to a tour of the US Naval Medical Research Centre (an unmarked, nondescript building which was nevertheless known to all the locals).

Throughout the course, we were constantly exposed to the complex healthcare system of Peru. This seemed remarkably backwards compared to Singapore’s, and was literally creaking at the seams through lack of funding and support. Most patients were too poor to pay for treatment, and there was a limit to what kindhearted doctors and donors could provide. Healthcare professionals were themselves not well-off: public sector specialists earn an average of US\$600 per month (and most supplement their income via part-time private clinics), and nurses earn only about a quarter of that amount – not nearly enough to live comfortably even in Peru. There was a doctors’ strike during our course (over salaries, naturally), and the UPCH hospital was threatened with closure for a while until Ministry of Health officials initiated negotiations.



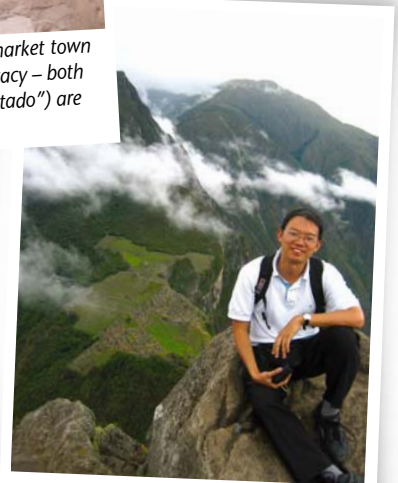
The fabled guinea pig castle in the Andean market town of Písaq. Peruvians consider guinea pig a delicacy – both grilled and roasted versions (called “cuy chactado”) are served to tourists at exorbitant rates.



The “Floating Isles of Uros”: This unique community – with islands, huts and boats made entirely of reeds – is found on Lake Titicaca which straddles Peru and Bolivia. It is the highest navigable lake in the world.



Macchu Pichu: The hidden mountain city of the Incas.



Fatigued after the climb up Wanay Pichu. Down below, partially hidden by clouds, is Macchu Pichu.

However, in certain critical areas, the Peruvians have done better than Singapore. Tuberculosis and HIV first- and second-line therapies are free, with the former existing in a very well integrated DOT (directly-observed therapy) system. Clinical research is also thriving, with a degree

of collaboration between different disciplines and hospitals that is beyond what is present over here. There is little competition between clinicians, and the main aim seems to be to attract foreign research investment into the country to help deal with the mounting health problems.



Ceviche "the national dish of Peru" comprises raw seabass marinated in lime juice, sweet potato and corn. As good as sashimi!



Our two course directors, Dr Eduardo Gotuzzo from UPCH and Dr David Freedman from UAB. Between them is the bust of Dr Cayetano Heredia, founder of UPCH.

A WORTHWHILE EXPERIENCE

I will mention little about my travels in Peru, and let the photos speak for themselves. Suffice to say that it was a great experience worth repeating.

In conclusion, participation in the Gorgas course was a wonderful experience for me, and I am sure my sentiments are shared by other participants (including Dr Wong Ting Hway – Her World magazine's Young Woman Achiever in 2003, as well as Dr Lim Poh Lian and Dr Annelies Wilder-Smith from Communicable Diseases Centre – the latter two had attended the Expert Course). Opportunities to see and learn about exotic diseases firsthand, and enlarge one's world health vision and experience by interacting with international colleagues, are rare and well worth all the money and time spent.

As the Gorgas course is increasing in popularity every year, it is imperative to be "kia-su" and register literally once applications start, lest you find that it is already fully booked by the time you make up your mind. ■



My clinical group, with Dr David Warrell and some local doctors. Fixed smiles are on everyone after a brutal rabies tutorial with the world expert.