

## Neysa, a youngster in waiting who might have a trip to the US in her future

Neysa has been waiting for “her” day for quite some time now. She has a heart condition that according to doctors from the US who had seen her, can be corrected through a surgical procedure. Unfortunately this 13-year old comes from a very poor family and they learned of her condition only a few weeks ago when the Geisinger Brigade examined her in our clinic. She needs an EKG and an echocardiogram, neither of which are available in La Entrada, and depending upon the results of those tests, she may also need a surgeon, a skilled heart specialist. None of these “next steps” are to be found in the area. The closest testing facility is 90 minutes away and then there is the cost of the bus ticket for her and at least one accompanying family member plus the cost of these tests. Neysa is the second of four children, all girls, in the family. Her grandmother in the barrio of Suyapa, looks after her as this 8<sup>th</sup> grader receives no support from her father. Her mother works as a maid 80 miles away in San Pedro Sula, which means she is not at home weekdays.



Fortunately, the Manos Amigas Clinic now has a small bus that can get Neysa to her next appointments which still are several weeks away. And then of course there is the question of who will pay the testing facility? Understanding the circumstances, Manos Amigas agreed to pick up the fees for this patient. Meanwhile “talk” had already started among the visiting doctors in the brigade, believing they might be able to arrange for Neysa to come to the US to their hospital where surgery, if needed, could be performed. Certainly this would be a life changing event for her, because without the surgery her days are “numbered” and her quality of life is apt to diminish rapidly.

Blessings seldom come alone – there is more to this story. One of the visiting brigade’s pediatric specialists who saw Neysa at the clinic, just happened to be from Latin America, herself. If the surgical procedure required is done in the US at her hospital, the specialist offered to become her interpreter and caregiver. In addition, she will live with her in her home; and see to it that her needs are met, at no expense to the patient.

After examining Neysa, the pediatrician traveled 2.5 hours to San Pedro Sula to give a seminar to Honduran doctors at a private hospital. When leaving the hospital at the end of the afternoon, the specialist heard American accents down the hallway and she went on to investigate, only to find out that they were a group of visiting heart specialists who periodically travel to Honduras to do surgery there.

You may know how “fairy tales” are supposed to end, but we do not as yet have the outcome to this story. What we do know is that this is not a “fairy tale”. It is a real life encounter the clinic faces often. Diagnoses are made, choices are offered and the outcomes may not be what we would like to see, but they are true stories where lives sometimes hang in the balance.

In this case, Neysa may have the option to have surgery done in a private Honduran hospital by a team of American attending physicians, if everything can be worked out and schedules and circumstances are aligned. In either case, because of the medical network SATC has in place, she will be attended to with the very best of care in the US or at home.