

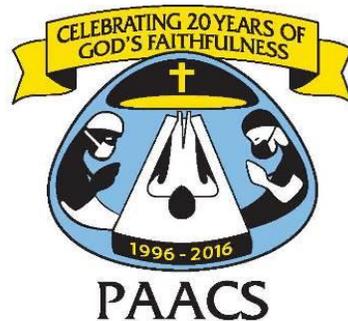
Dear Colleagues,

New residents, a new free textbook, a new memorial scholarship and a new Director for Development – all are introduced in this edition of the PAACS Bulletin.

We also have some special manpower needs for surgeons to fill the gap – please consider serving to make an eternal difference.

Thanks for being part of the PAACS team!

The Editors



The Pan-African Academy of Christian Surgeons (PAACS)

BULLETIN #141

March, 2016



Changing the spiritual and physical health of a continent

Our vision: PAACS trained surgeons living the gospel and ministering to the sick.

Our Mission: PAACS exists to train and disciple African surgeons to glorify God and to provide excellent, compassionate care to those most in need.

Our goal: To train and disciple 100 African surgeons by 2020.

After years of waiting, Dr. Agneta Odera is finally beginning her pediatric surgery training in South Africa. The PAACS team prayed for her before she went.

IN THIS NEWSLETTER

[From the Executive Director](#)

[Martin Salia Scholarship](#)

[Arusha White Coat Ceremony](#)

[Revised PAACS Textbook Available – and Free!](#)

[News Shorts](#)

Lassa Fever

PAACS Primary Exam

Accreditation Trips Being Planned

[Announcements](#)

CMDA-CMDE Conference in Greece

PAACS Annual Exams

Surgeons Needed in Tanzania

[Prayer Requests](#)

FROM THE EXECUTIVE DIRECTOR

Dear PAACS Family:

2016 promises to be a year of transition and change for PAACS in its administration and Commission. Let me share with you some of the major developments.

The most recent addition to the PAACS administration is Ms. Monique Wherry, our new Director of Development. Ms. Wherry assumed this position on March 14, 2016 and brings to PAACS fifteen years of development experience and a tremendous knowledge of non-profit organizations. Please see the article later in this edition of The PAACS Bulletin.

The new PAACS Chief Medical Officer (CMO), Dr. Keir Thelander will be assuming his role on July 1, 2016. He will spend six months transitioning with Dr. Bruce Steffes, our current CMO. Dr. Steffes will be stepping down in December from PAACS after almost eleven years of devoted service to this organization.

Change has also come to the PAACS Commission. The Commission has new officers and Commission members who were voted in at the end of 2015. Two new market-place and one spiritual representative will be added to the Commission later this year. This will be the first time the PAACS Commission will have non-surgeons serving in its leadership.

The Commission now has a new structure incorporating four surgical councils: General Surgery, Orthopedics, Pediatrics and Head and Neck Surgery. These surgical councils have already started their work in organizing, creating curricula and programs, identifying committee chairs, developing work plans, and creating timelines.

The upcoming PAACS Commission meeting will be May 20-21, 2016 in Chicago, IL. The newly structured Commission and Commission members will be fully engaged at this meeting, along with the new PAACS administrative staff.

Change might bring apprehension but is also the catalyst for new ideas, perspectives and opportunities. It is my hope that PAACS will leverage the talent and skill of these new individuals to strengthen, grow and solidify this organization for God's glory. Please pray for PAACS as we go through this time of transition and change; that we will be obedient to His call and will and that He leads PAACS in the right directions.

Blessings,

Susan Koshy, JD, MPH

PAACS Executive Director

INTRODUCING NEW RESIDENTS

Tenwek:

Dr. Marvin Simiyu grew up in western Kenya near Kitale in a family of three boys and one girl. He wanted to be an electrical engineer until high school when his father became ill and needed surgical care but was unable to get the help he needed. That is when young Marvin first decided to be a doctor. It was not until his medical school years in Burundi, years later, that he discovered that he was good with his hands and that he loved surgery. In his fifth year of medical school, he met Dr Jason Fader via e-mail as they corresponded on a research project on Sign nails for orthopedic fractures. That turned into a chance to go and work alongside Dr. Fader at Kibuye Hope Hospital which ultimately led Dr. Marvin to apply for the orthopedic residency at Tenwek Hospital. Dr. Fader had spent two years at Tenwek Hospital during his post-residency programs with Samaritan's Purse. Initially, Dr. Marvin was not selected for a residency position, but was offered a position as a medical officer at



Tenwek. But as providence would have it, six weeks into the program, a residency spot opened up and Dr. Simiyu was able to step into the role of first year orthopedic resident. After his residency, this young surgeon wants to return to Burundi to be a missionary orthopedic surgeon.



Malamulo

Dr. Lijalem Taye Garba is a 27 year old single Ethiopian who grew up in a rural area of western Ethiopia and received his medical training at Jimma University, graduating in 2013. He remained as a lecture for six months at the medical school and then served as a general practitioner and medical director of the Metahara Sugar Factory Hospital.

Raised in a home of unbelievers, his uncle's testimony spoke

loudly to him as a boy. As a teen, he fell away from the Lord until a Christian brother spoke to him about repentance. From 12th grade on, he refocused his life on Christ and has stayed faithful since that time.

He joined the Malamulo SDA training program at the beginning of this year, eager to train under his countryman, Dr. Arega Fekadu. He looks forward to the time when, “as a general surgeon, [I will go] to a place where I will be assigned and help my clients both physically and spiritually. In doing so, I will do my best to help patients get appropriate treatment for their illness and follow Jesus for their eternity.”

MARTIN SALIA SCHOLARSHIP

The Pan-African Academy of Christian Surgeons is offering a unique, one-time five-year scholarship to train as a general surgeon beginning in January, 2017. The Martin Salia Scholarship, named in honor of PAACS graduate who gave his life for the people of Sierra Leone during the recent Ebola epidemic, will provide a five-year training opportunity in General Surgery for a qualified applicant. Candidates from Sierra Leone, Liberia and Guinea will be given first priority, especially for those whose five-year bonded period upon completion will be served in West Africa. Other Francophones will be given priority after that. Applicants must be:



- Be a citizen of an African country.
- Be a graduate of a recognized medical program and completed an internship program.
- Be a sincere follower of Jesus Christ as evidenced by your words, your actions and your lifestyle.
- Be 35 years old or less and exceptionally fluent in English
- Have a strong written recommendation from your pastor and a medical colleague who knows you well and has worked with you in a clinical setting
- Willing to work one year at an approved site for each year of residency training.
- Able to maintain satisfactory academic and clinical progress throughout the five years.

Please contact admissions@paacs.net and place “Martin Salia Scholarship” in the subject line. Please share this opportunity with any good candidates.

Martin Salia was a 2008 graduate of the Bansa Baptist Hospital PAACS program in Cameroon. He was a graduate of the Medical College of Sierra Leone in 2000. He came to the PAACS-Bansa program in 2004, finishing in 2008. He had originally hoped to go back to Mattru Mission Hospital where he had been working prior to his general surgery program, but the lasting effects of civil war made that impossible.

Salia worked in several hospitals in Sierra Leone at Kissy United Methodist Hospital in Freetown, Sierra Leone and also worked at the Connaught Hospital in Freetown. He was a lecturer in anatomy and surgery at the medical school there and also strove with others to establish a WACS-approved training program in Sierra Leone for general surgeons.

Salia fulfilled his obligation to PAACS in 2012 but continued to serve his fellow countrymen. Kissy Mission Hospital is run by the United Methodists and is not designated as an Ebola center. Through unknown contact, he came down with symptoms of Ebola on Nov. 6 but test results were negative twice for the virus before they turned positive a few days later. On November 11, Martin Salia, 2008 graduate of the PAACS-Banso, was diagnosed with Ebola. On Monday, November 17, at the age of 44, he went home to his Savior.

The scholarship is not yet fully funded. Forty percent of the total amount has been given by Gail and Peter Ochs, the founders of the First Fruits Foundation which has recently made a generous donation for the support of other trainees. Their heart was deeply touched by the life and sacrifice of Dr. Salia. They said, "As supporters of PAACS, we have become even more aware of the need for qualified doctors in Africa. We were touched when we learned about the ultimate sacrifice that Martin Salia gave to Christ by serving during the Ebola crisis. Martin's story inspired us to support a scholarship in his name to help encourage a surgeon with the same dedication."

If you would like to contribute to this scholarship fund, please send your check to CMDA-PAACS, PO Box 1118, Bristol, TN 37621. Please include a note confirming the gift is for the Martin Salia Scholarship fund. Alternatively, you may give online at this page on our website, making sure to put Martin Salia Scholarship in the memo line.

ARUSHA WHITE COAT CEREMONY

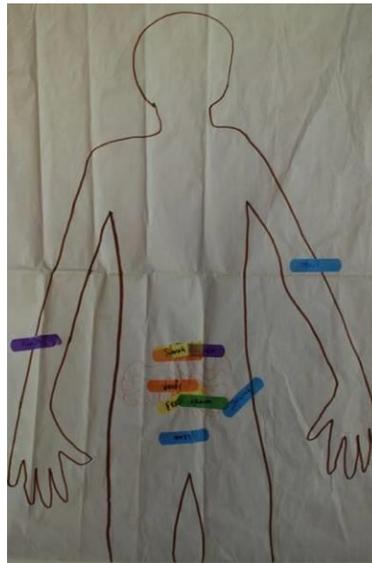
Meet Julius and Fred, the two newest residents who joined the Arusha PAACS program in January. At the beginning of their training, the residents are given their official PAACS white coat in a special chapel service. They are commissioned and the directors of the training program wash the residents' feet as a reminder of Jesus teaching and example that all who lead are called to serve.





All six residents and most of the surgical faculty gathered following the ceremony.

The following week, the residents and faculty gathered for an afternoon retreat, which included good food, playing games and sharing from the Word. It was a good time of fellowship and sharing life together.



They played "Pin the Plaster (Band-Aid®) on the Patient." The scenario was this: A six year old came to

the hospital with a perforated colon and the surgeons tried to fix it with their plaster. The newest missionary surgeon (Dave Halter) pinned his plaster on the forehead of the senior surgeon, who is a good sport and laughed as hard as everyone else.

They also played "bandage the patient" with the goal of determining which team can bandage the most of their patient's body with a roll of toilet paper and "who can build the tallest tower?"



Dave Halter and another surgeon are swapping months between the two hospitals, Arusha Lutheran Medical Center in Arusha and the nearby Selian Hospital (the previous mission hospital now turned over to the government). With the arrival of Dr. Halter, there are enough faculty members to send residents to Selian as well (currently one at a time).

Halter has very much enjoyed getting back into the swing of full time surgery and teaching but there are certainly adjustments. A series of texts that he sent to his wife recently illustrate a typical day at Selian *[with a few explanatory comments]*:

10:14am So far, typical day. 4 big cases, 1 is ready, 1 didn't show, 1 hasn't paid, and 1 has no blood available! Could be a quick big day, or a very long day waiting for these things to be arranged.

10:17am My mistake, the one who is ready for surgery can't be done. The OT *[operating theatre]* is not ready.

12:49pm Well. Saga continues. The OT finished getting ready. Then, just before incision, no power! We waited and got power back and did case. *[The generator came on but was overloaded and shut down. This required the generator workman to go around the hospital to all unessential areas and ask them to turn off any electrical items so that there would be enough generator capacity for the essential things.]* Bringing the patient who has blood now *[banked blood available in case it is needed]*.

3:43pm Okay, we finished one case for which we were waiting for blood, but we did not need it. Therefore, we can use that banked blood for the next patient, which means here we go for surgery again. One more major case to go. No telling when I'll make it home.

5:03pm C-section interrupted plans [*meaning the OT is not available*] Waiting. It's a difficult case to do. We are debating whether to go ahead.

7:07pm Finished with case. Waiting for patient to get to and leave recovery.

7:09pm If power is on, can you warm some shower water? [*We have an electric water heater that we turn on just when we need to use it.*]

Sarah: No power yet. Pole [*Sorry!*]

INTRODUCING MONIQUE WHERRY

On March 14, Monique Wherry joined the administrative team as the PAACS Director for Development. She has an extensive background in higher education and non- profits where she has served in a number of philanthropic positions raising funds to support worthy causes for more than 20 years.

Before accepting the position with PAACS, she worked for MedSend where she spent the last 4 years raising funds to support the mission and the impact of MedSend's life-changing work around the world.

She is masterful in working with donors in developing and cultivating relationships, and feels very blessed to be a part of the team. Monique has extensive experience in managing and recruiting volunteers as well as special events fundraising. Her extensive fundraising background runs the gamut



Front (L to R): Monique and Eric; Standing: Rachel and Erica

from direct mail to planned giving and major gifts fundraising; but most of all, she delights in helping donors to achieve their objectives and dreams for influencing the world for Christ.

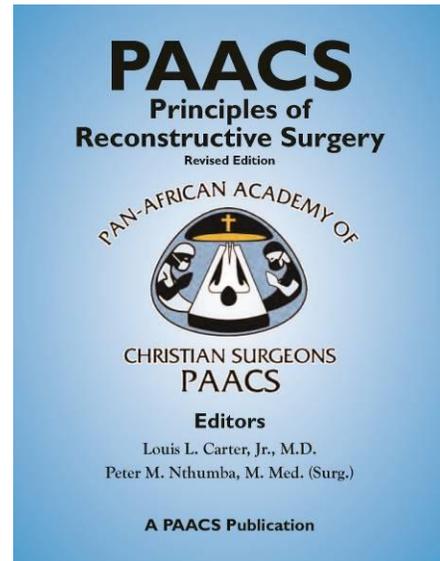
She came to Christ as a young person and is grateful that God continues to allow her to grow day-by-day in grace. Monique is active in her local church, supports a number of mission organizations, where possible with her time, talent and treasure.

She is married to Eric R. Wherry and has two daughters, Erica and Rachel.

REVISED PAACS TEXTBOOK AVAILABLE – AND FREE!

Drs. Lewis Carter and Peter Nthumba announce the availability of their latest revision of the “PAACS Principles of Reconstructive Surgery”. This revision is being published almost exactly three years after the initial edition was published on the PAACS website (www.paacs.net).

This newly revised edition with its 44 chapters and index has been re-formatted to make it more readable. It has 523 pages (including the cover). The editors write, “The intent of this book is to give general surgeons in remote areas some basic principles by which to treat congenital and acquired deformities and disabilities. No attempt has been made to describe the technical steps of common operations, as they are well described in the basic texts. Our goal has been to cover conditions that are seen in the Emerging World, but that are not seen in the West and therefore not covered in Western textbooks. Also there are conditions seen around the world but treated differently in the Sub-Saharan Africa due to lack of equipment or therapists. Therefore, chapters have been added to give alternate methods of management for these conditions.”



This labor of love would have a commercial value of several hundred dollars but can be downloaded for free from Dropbox. The 54 MB edition (with lower resolution graphics) can be [downloaded here](#). The full-resolution edition is 1.6 GB and can be [downloaded here](#). The availability will be publicized through Facebook and by notifying the West African College of Surgery and the College of Surgery of East, Central and Southern Africa.

All of the work writing and editing this book was donated gratis and the book design was underwritten by a generous donor. The motives of the authors and writers are expressed in this quote from one of the forewords, “Though initially this book was intended for Africa, most of the chapters will be applicable around the world. We trust this publication will help you take better care of your patients and that your patients will experience the love Christ in your hospital.”

We express our deep appreciation for all the effort that has gone into this wonderful textbook.

NEWS SHORTS:

Lassa Fever: In the last month’s edition of *The PAACS Bulletin*, the passing of Mr. Todd DeKryger, a PA in the ABWE hospital in northern Togo was announced. It has subsequently been discovered that his death was due to Lassa fever, one of the viral hemorrhagic fevers which is endemic to that area of West Africa. It is normally spread by exposure to rodent urine and feces but in a rare example of human-to-human transmission, a volunteer nurse from Samaritan’s Purse was stricken ill, and was subsequently evacuated to the CDC unit in Atlanta. By last report, the nurse who had the diagnosis confirmed is recovering satisfactorily and no further cases of disease have been reported among the contacts. In that this disease is

responsible to the antiviral Ribavirin, everyone at risk of exposure was also offered prophylaxis to reduce the risk of infection and spread of the disease.

Lassa fever is caused by a virus that is found in West Africa. It was first discovered in 1969 in Lassa, Nigeria when two missionary nurses died. Lassa fever is mainly found in Sierra Leone, Liberia, Guinea, and Nigeria and is spread by rats. Other neighboring countries are also at risk because the type of rat that spreads the virus is also found throughout the West African region.

Lassa fever is different from Ebola. Although Lassa fever and Ebola can result in similar symptoms, Lassa fever is less likely than Ebola to spread from person to person and is far less deadly. The death rate from Lassa fever is approximately 1% versus approximately 70% from Ebola. While both diseases are viral hemorrhagic fevers, bleeding and severe symptoms are not common in cases of Lassa fever.

Lassa fever is caused by infection with the Lassa virus. The virus is spread by a rat that lives in large numbers in west, central, and east Africa. They carry the virus in their urine and droppings and live in homes and areas where food is stored.

Most people who are infected have mild symptoms and therefore go undiagnosed. Mild symptoms include slight fever, feeling tired and weak, and headache. In some people, the disease may cause more serious symptoms such as bleeding, difficulty breathing, vomiting, facial swelling, shock, and pain in the chest, back, and abdomen.

Approximately 12 to 15 percent of patients hospitalized for Lassa fever die from the illness. The death rates for women in the third trimester of pregnancy are particularly high, with 95 percent of infected pregnant mothers losing their babies.

People with Lassa fever are not believed to be contagious before they have symptoms. Lassa fever is not spread through casual contact (like hugging, shaking hands, or sitting near someone).

DeKryger did much of the essential surgery at the hospital. His absence has left the hospital in immediate and long-term need of a general surgeon. They have temporary coverage until mid-June but need help after that. Dr. Bob Cropsey, recruiter for the hospital, writes,

“Dear missions minded surgeons around the globe,

Having just lost our key surgical PA, Todd DeKryger, due to a fatal illness in Togo recently, there is great need for qualified short term (2 weeks. to 1 year) surgeons with some experience in the developing world from June 2016 thru August 2017. There will usually also be another surgeon working in tandem with you to share call and help with larger cases. Come and use your surgical skills and gifts to help share the Good News in this very needy culture.

Write Dr. Bob Cropsey, rcropsey@gmail.com, if you are interested in applying. “

They were already in urgent need of experienced orthopedic surgeons for one to two weeks minimum from June 15 to July 31. Experience with the SIGN nail system would be helpful but not essential. If you are interested, contact Dr. Robert Cropsey at rcropsey@gmail.com or 734-730-6812 for more information.

The ABWE sister hospital in the south of Togo (at Kpele-Tsiko) is slotted to become the next PAACS training site in January, 2019.

PAACS Primary Exams – On March 4 and 5, eleven PAACS residents interested in Membership certification within the West African Academy of Surgeons took the Primary Exams which consisted of 100 multiple-choice questions each in the areas of anatomy, physiology and pathology. Passage of this exam is required to be able to sit the membership exam, according to WACS regulations. The passage rate for all PAACS residents was 45.5% although it was only 16.7% for first year residents. All second year residents who retook the exam passed. The recent WACS Primary Exam had a passage rate of 30% (multiple re-takes are common in that exam). Physiology was the weakest area this time, but these residents had not had the benefit of the Brackenhurst Basic Science Conference. In an attempt to improve the basic science performance of all residents, the “Universal Notes” system is being offered to all PAACS trainees by Dr. Aaron McGuffin of Marshal University Medical School. He and his colleagues are studying the blueprint of the exam and the COSECSA syllabus to create a study plan for our surgical residents.

Accreditation Trips Being Planned – In June, it is hoped that an accreditation team from the West African College of Surgeons will be visiting and approving Mbingo Baptist Hospital and Bongolo Hospital for the Membership level training under WACS. The dates have not yet been approved.

The team from Loma Linda University has agreed to take three trips for inspection by early 2017. That last accreditation was performed in 2012. Tentative plans and dates are:

Malawi, Ethiopia and Egypt – August 2 - 15

Bongolo, Mbingo and Galmi - Sep 17 – 29 (limited to four people)

Arusha, Kijabe, and Tenwek – Jan 14 – 27

ANNOUNCEMENTS:

CMDA-CMDE Conference in Greece – The 36th CMDA-CMDE conference will be held in Attica, Greece April 4 – 14. Over 700 registrations have been received. PAACS 4th and 5th year residents have been invited and most of the PAACS surgical faculty will also be attending. Credits Available: Dental, Family Practice (AAFP), Nursing, Nurse Practitioner, Pharmacy, Physician, Physician Assistant (AAPA) & Certificate of Attendance. Physician & PA attendees in 2015 could receive as many as 59 credits (including pre-conference courses). A special pre-conference course on Faculty Development topics has been designed by Dr. Carl Haisch for the PAACS attendees. There will also be a juried competition for surgical papers for PAACS surgical residents. Dr. John Barnett from Kalamazoo, Michigan will be the Spiritual Life speaker.

PAACS Annual Exams – The 200 multiple-choice exams are scheduled for Saturday, June 4, 2016. Constructed to comply with a blueprint designed to assure validity and with a tradition of high reliability, the exams are written in two formats. The junior exam for the first and second years has 60% of the questions in the area of basic science and the remainder on clinical topics. The

ratio is reversed for the senior exam (taken by third through five year trainees) with the questions of a higher level of sophistication. A remediation exam is scheduled for Saturday, July 30.

Surgeon Needed in Tanzania to Cover Home Assignment: Dr. Wendy Willmore will be on home assignment **October 15 – January 1, 2017**. She has asked for one or more surgeons to cover her during that time. There are six residents and several national surgeons working with the PAACS program there. Willmore is the Co-Program Director of the Arusha Lutheran Medical Center and her other Co-Program Director, Frank Madinda, will be there during the time. There are opportunities for service at the more rural Selian Hospital on the outskirts of Arusha. Please pray about this and if God is calling, find out more by e-mailing Dr. Willmore at gracethewendylady@hotmail.com. It is not a site serviced by World Medical Mission so you will need to contact Willmore directly.

PRAYER REQUESTS:

- Pray for the many new residents as they begin their training programs. May the Lord help them to adjust and for their families to adjust as well to a new culture.
- Pray for Agneta Odera as she begins her pediatric surgery training program in S. Africa after this long delay.
- Pray to God that some of our trainees will be called to serve in the mission hospitals as a career.
- Pray for all our graduates – as they serve their patients and their Lord. Pray that God will provide strength, resources and wisdom.
- Pray for those on home assignment (Dan Galat, Rich Davis are in the US now) - for rest, for the times of speaking and fund-raising and for the times of medical work.
- Pray that God will call additional career surgeons to join the PAACS faculties BethanyKids at Kijabe Hospital (Pediatric Surgery) in Kenya, Mbingo Baptist Hospital in Cameroon, Soddo Christian Hospital in Ethiopia (both general surgery and orthopedics), Malamulo SDA hospital in Malawi and Harpur Memorial Hospital in Egypt.
- Pray for all of our faculty members overseas – for peace and for God's clear direction in their lives.
- Pray that Mbingo Baptist, SIM-Galmi, Bongolo and Malamulo Hospitals will all receive government recognition for their PAACS training programs within the coming year. Pray for the ongoing negotiation of a Memorandum of Understanding between Mbingo Baptist Hospital and the University of Yaoundé that will permit recognition of their program by the government.
- Pray that the obstacles to starting a new orthopedic training program at Soddo Christian Hospital and the CURE hospital in Addis will be overcome by next January.

- Please continue to pray for the James Joseph family as they grieve the loss of their daughter and rejoice at the continued survival of their other premature daughter, Joy. Pray that God will provide for the medical bills they are facing.
- Remember the family of Mr. Todd DeKryger who so ably served as a surgical PA at the Hope Hospital in northern Togo. Pray for peace and comfort for the grieving family. Pray that the nurse will fully recover from the Lassa fever. Pray that God will supply the surgeons necessary to keep that hospital functional until their career surgeons finish with language school.
- Pray for the Hôpital Baptiste Biblique in southern Togo as they work to begin training in 2018 or 2019. Pray for wisdom and the requisite development of the hospital and the surgical faculty. Pray that the funding will become available. Pray that God will bless the planned-for endowment fund for resident support.
- Pray that God will provide someone to cover the absence later this year of Dr. Willmore at Arusha Lutheran Medical Center.
- Ask God to supply the short-term surgeons necessary to keep Tenwek Hospital in Kenya fully functional during the absence of their surgeons on home assignment (May 2016 – June 2017).
- Praise God for the public announcement of the approval of PAACS within the West African College of Surgeons and pray that we would receive the formal announcement soon. Pray for His hand to continue to guide as the next steps are accomplished. Pray that God will provide appropriate candidates for training whose example will ease the way for the residents to follow.
- Pray for the PAACS Commission and the new specialty councils – that God would direct the deliberations, decisions and the recruitment of people to assist. Pray now for the upcoming business meeting in Chicago in May.
- Pray for Dr. Thelander as he and his family make the transition of cultures and ministries this summer and fall to become the new Chief Medical Officer.
- Pray that God will bless the work of Monique Wherry in her new role as development officer.
- Pray for traveling safety for all the missionaries traveling to Greece for the CMDA-CMDE conference – for rest, rejuvenation, education and spiritual recharging. Pray especially for our PAACS residents attending for the first time.
- Pray for the committee creating and reviewing the annual PAACS exams. Pray for the reading and studying of the residents who will take the first ones in early June.
- PAACS has requested a non-voting seat on the COSECSA Executive Council. Pray that God will grant this request if it is His will.
- Ask God to bless the new PAACS textbook as it is used around the world to take care of patients.
- Pray as we plan for three accreditation tours later this year with the Loma Linda University team.

- Pray for the family of Soddo Program Director Andrew Chew as they face the impending loss of their mother from metastatic disease. She is a strong believer and the matriarch of her godly family.
- Pray for PAACS Executive Director, Susan Koshy, as she presents the annual report to the CMDA legislative body at the Annual Meeting in NC in late April. May God be glorified through it.
- Pray for wisdom for Ms. Koshy as she negotiates the various concepts and offers that come in weekly – pray that God would give her discernment and clear guidance upon which opportunities should be grasped and which avoided.
- Pray for those students and surgical residents who wish to join PAACS in the future. Pray for an ability to stay focused on the long-term goal and for their preparation of heart, mind and family. Pray that God will continue to call others and that they will listen.

Editors:

Bruce Steffes, MD, MBA, MA (Bib. Min), FACS, FWACS, FCS(ECSA), FICS

David Thompson, MD, FACS, FWACS