

Visit to Lang Son province -March 2004

Project Vietnam, American Academy of Pediatrics CA 4

Lang Son Province is north of Hanoi and borders the Chinese province of Guangxi. Of 820,000 ha, approx. 80% are mountains and 19% is covered by forest. The Ky Cung River, which originates in China meanders through the province then flows back north again into China. 85% of the 740,000 inhabitants belong to ethnic minorities (43% Nung, 34% Tay, Hoa) living in rural areas over 10 districts and 226 communes. Main agricultural products of the region are rice, maize, manioc and tobacco, as well as various fruits such as plums, lychees and cinnamon apples. The province suffers from many problems, ranging from poverty with about \$200US annual per-capita income to high infant mortality and a lack of industrial resources. Although 70% of the communes have electricity, only 1/3 of the local people are wired.

In 1979 Chinese troops crossing the border ravaged Lang Son city almost entirely and it has been rebuilt since. Because of the ongoing trade, access to the province is easy with a smooth ride of about 2.5 hours from Hanoi. Several hotels have been identified with clean rooms and attractive facilities.



Lang Son Healthcare services

Maternal/child statistics show above average malnutrition under 5yo with 32.5%, 2nd highest infant mortality area (after Central highlands) at 45/1000 and high maternal death with 75% of the deliveries occurring at home (50% attended by midwives and 1/3 by other local help). According to the Province Health Services Bureau, coverage with 6 basic immunizations rates 98%, and province ranks among top 10 provinces in Vietnam for highest HIV infection. The province health services employs 2,244 health workers with over 900 at the 226 Commune health Centers, 700 at the 10 District Hospitals with 50 beds each, and 600 at provincial facilities. 5-7% of patients are transferred to Hanoi with complex health problems. Lack of electricity and remote access often results in ill patients waiting until morning to go to healthcare facilities, leading frequently to deaths/disasters. The province gets little funding except for HIV prevention programs, a small SARS-detection support, and a visit 7 years ago by a group from Holland-Hanoi Maxillofacial Institute to do simple cleft lips repairs. Many families were too poor to even afford transport to the hospital.

The provincial hospital has 300 beds, including 30 pediatric and 30 obstetrical beds. There are 77 doctors and 300 employees, 23 departments including 11 clinical and 7 ancillary such as laboratory, pharmacy, etc.. Clinical specialties include pediatrics, ophthalmology, infectious diseases, critical care, Surgery/trauma, ENT/maxillofacial, OB/gyn, geriatrics, and internal medicine. There were 2400 operations last year; 2/3 emergency procedures mostly traumas. The radiology department has ultrasound but no CT.

1. Surgical facilities:

There are 4 spacious operating rooms and 2 obstetrical suites. The whole area is very clean, covered with white tile and spotless. Oxygen is distributed through built-in wall system, and equipment consists of 3 anesthesia machines using

halothane and NO₂, 3 suction machines, 1 pulse oximeter, 1 cautery machine, and one working ophthalmic operating microscope. There appears to be good sterilization, and the recovery room is large and adjacent to the OR. The only vital signs monitor is shared with the ICU.

2. Patient ward:

Rooms are small with 4-6 beds each. On the pediatric ward the only child in critical care was a 5 week-old born at home, with a cerebral hemorrhage due to Vitamin K deficiency, the 2nd one in March. Vitamin K is routinely administered to newborn babies, only in provincial facilities, following the decree in January 2003.

3. Critical care/ICU: 13 beds with 1 bedside monitor

4. Laboratory facilities: chemistry panels (electrolytes), blood gases, hemograms. There is a blood bank but no microbiology or cultures.

Town of Lang Son and Hotel

This town was extensively destroyed in 1979 during a Chinese invasion subsequently repealed, and has since been rebuilt. It looks new and clean. The proximity to the Chinese border and the increasing climate for trade will probably result in more prosperity in the near future. It looks like there are a lot of new businesses. The hotel we looked at is new and clean with a large room for meetings. The rooms are clean and comfortable-looking.

Medical Mission November 2004

The mission is organized by Project Vietnam of the American Academy of Pediatrics.

The goals of the medical mission will be 4 folds:

1. **Reconstructive surgery** for the orofacial malformations, especially children with cleft lips/palates.
2. **Ophthalmic surgery** to restore eyesight for children with cataracts and strabismus mainly.
3. **Teaching** and interaction with the local medical staff through side by side surgery assisting and anesthesia delivery. The team's medical specialists will be working with the medical staff as well. Daily educational sessions have been requested by the medical staff: neonatal/pediatric resuscitation, update on prevalent diseases. This year, the primary care team will also train district & commune healthcare personnel.
4. **Outreach to rural clinics**: A team of primary care physicians will visit some of the most needy areas deliver medical care. We will offer screening for rural school children for malnutrition, anemia, dental care, vision and hearing, and examine patients at rural health clinics.

Proposed schedule

1. Departure from LAX on Wednesday 11/3 at 11PM for the Medical Mission group and arrival in Hanoi on 11/5. Half day sightseeing and check in Daewoo Hotel (5*)
2. Departure Saturday 11/6 for Lang Son province, arrival by noon, checkin at hotels in Lang Son city, meeting for Surgical team & Primary care team, orientation & training for volunteers.
3. On Sunday 11/7, surgical clinic at Lang Son General hospital and set up in the operating rooms.
4. Monday 11/8 through Friday 11/12 work at Lang Son Hospital & rural schools and commune health centers, final reception on last evening. Return to Hanoi late night & checkin at Daewoo hotel.
5. Saturday 11/13 departure for Ha Long bay trip with overnight on Cat Ba island, returning in the evening 11/14.
6. Return flight to USA on 11/15 in AM.

Proposed Budget (airfare, accommodations, meals, transportation & entertainment)

<u>Total travel cost</u> (from Los Angeles) for Medical Mission group 11/3-15	\$1,800/person
for Training team 10/29-11/14	\$2,250/person

Physicians and volunteers are donating their travel costs, which are tax-deductible as charitable contribution.

For inquiries please contact Quynh Kieu, MD, coordinator for Project Vietnam

11100 Warner suite 116, Fountain Valley, CA 92708

(714)641-0850, (714)434-6158 fax, email projectvietnam@yahoo.com

To sign-up, please complete application (download from website www.projectvietnam.net), and email with resume. You will be interviewed by the Coordinator. There is limited space available & applications are accepted until July 30 or when full, whichever comes first.