

The Hawaii Medical Fellowship Mission to China*

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The Hawaii Medical Fellowship Foundation is a non-profit Hawaii corporation to provide and exchange medical fellowship, knowledge, care, cooperation and service, and to support other humanitarian causes here in Hawaii and abroad.

The Foundation plans a mission to China in October 1991. Hawaii physicians, at their own expense and time, will be spending a week in Shantou, China, providing medical service to and sharing techniques with their Chinese counterparts.

The Foundation also plans to establish scholarships for students in Hawaii who wish to pursue health careers and to establish clinic/health fairs for the immigrants. It is willing to entertain ideas and suggestions for additional projects.

In October, a multi-specialty group of physicians and nurses will be traveling to the city of Shantou, in southern mainland China. The destination will be the city's Central Hospital and the Women and Children's Hospital.

There are 3 goals of the group: 1) To demonstrate and teach some western medical and surgical procedures; 2) to learn the techniques of the Chinese physicians; and 3) to donate some needed medical equipment to them.

Shantou is a port city in a special economic zone just 45 minutes by jet north of Hong Kong. It was known as Swatow before the Communist revolution. This city of 800,000 people has 3 hospitals. A scouting party of 4 Hawaii doctors toured the hospitals just 2 months ago.

Central Hospital has 600 beds and is the major community medical center. The facility is clean but old. The overcrowded hallways are lined with cots occupied by patients. There is no air conditioning; the windows are always open. The wards are packed with 6 to 8 patients to a room; 2 beds abut in the middle; there are no partitions and thus no privacy. Families attend the patients, feeding them and emptying the bed pans. Surprisingly, the odors are not bad.

The operating rooms similarly are old, but clean. Two operations are done in each of the 9 rooms. This is a busy OR; 30 procedures are done a day. The equipment is operative, but antiquated. Few items are discarded: syringes, needles, and iv tubing are being reused.

Southern China is known for a high incidence of esophageal and nasopharyngeal cancers. One or 2 esophagectomies are done each week. Hepatic stones are also common;

5 to 8 cases are done per week. The surgeons work without the help of intra-operative cholangiography or choledoscopy. Nearly all abdominal operations are done under epidural anesthesia, and nearly all thyroidectomies are done using acupuncture alone for analgesia. This is a technique we might well want to learn!

Cataracts are being removed, but there are no quality intraocular lenses to implant. The ophthalmologists are eager to learn the technique but need a source for lenses. The Japan-built laser has been broken and unrepaired for 3 years; there is no vitrectomy machine, which means retinal detachments cannot be treated optimally.

Rheumatic fever in children goes virtually untreated and results in crippling valvular heart disease. A 3-year-old Sarns heart/lung machine allows 10 to 12 open heart, valve cases to be done each year. This is quite an accomplishment, considering that there is no surgical ICU.

In fact, the medical intensive care unit of 9 beds does not have the equipment that Hawaii's hospitals have as a standard for a ward bed. There is one EKG machine in the unit (broken at the time of our visit) and only one cardiac monitor. They have no capabilities for any invasive monitoring such as Swan-Ganz catheters, central and arterial lines. They have no pulse oximeters.

Obstetrical care at General Hospital is primitive. There is only one fetal-heart monitor; this is used only for high-risk deliveries. There are no warmers for the newborns, who are taken with their mothers expeditiously to the wards.

The conditions we saw in Shantou's hospitals might be shocking to one accustomed to the high-tech and clean-sheet practice of medicine here in Hawaii. The city government does not have the capital with which to purchase all that is desired. Wages are low for the hard-working staff (about \$60 a month for both nurses and doctors). Yet the facilities are well maintained; the staff members are cheerful and competent. They have achieved a high quality of medical care despite scant resources.

So, who make up this group from Hawaii traveling to Shantou? The Hawaii Medical Fellowship Foundation began 6 months ago as a non-profit organization. The physician specialties include OB-GYN, urology, ophthalmology, plastic surgery, general surgery, anesthesiology, cardiology and internal medicine. Nurses will come from the OR and surgical wards of Hawaii hospitals.

A fund-raising dinner was held the first week of September. Part of the proceeds will go toward the purchase of equipment ranging from pulse oximeters to fetal monitors, to infant

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Description: Yohimbine is a 3a-15a-20B-17a-hydroxy Yohimbine-16a-carboxylic acid methyl ester. The alkaloid is found in Rubiaceae and related trees. Also in Rauwolfia Serpentina (L) Benth. Yohimbine is an indolalkylamine alkaloid with chemical similarity to reserpine. It is a crystalline powder, odorless. Each compressed tablet contains (1/12 gr.) 5.4 mg of Yohimbine Hydrochloride.

Action: Yohimbine blocks presynaptic alpha-2 adrenergic receptors. Its action on peripheral blood vessels resembles that of reserpine, though it is weaker and of short duration. Yohimbine's peripheral autonomic nervous system effect is to increase parasympathetic (cholinergic) and decrease sympathetic (adrenergic) activity. It is to be noted that in male sexual performance, erection is linked to cholinergic activity and to alpha-2 adrenergic blockade which may theoretically result in increased penile inflow, decreased penile outflow or both.

Yohimbine exerts a stimulating action on the mood and may increase anxiety. Such actions have not been adequately studied or related to dosage although they appear to require high doses of the drug. Yohimbine has a mild anti-diuretic action, probably via stimulation of hypothalamic centers and release of posterior pituitary hormone.

Reportedly, Yohimbine exerts no significant influence on cardiac stimulation and other effects mediated by B-adrenergic receptors, its effect on blood pressure, if any, would be to lower it; however no adequate studies are at hand to quantitate this effect in terms of Yohimbine dosage.

Indications: Yocon® is indicated as a sympatholytic and mydriatic. It may have activity as an aphrodisiac.

Contraindications: Renal diseases, and patient's sensitive to the drug. In view of the limited and inadequate information at hand, no precise tabulation can be offered of additional contraindications.

Warning: Generally, this drug is not proposed for use in females and certainly must not be used during pregnancy. Neither is this drug proposed for use in pediatric, geriatric or cardio-renal patients with gastric or duodenal ulcer history. Nor should it be used in conjunction with mood-modifying drugs such as antidepressants, or in psychiatric patients in general.

Adverse Reactions: Yohimbine readily penetrates the (CNS) and produces a complex pattern of responses in lower doses than required to produce peripheral a-adrenergic blockade. These include, anti-diuresis, a general picture of central excitation including elevation of blood pressure and heart rate, increased motor activity, irritability and tremor. Sweating, nausea and vomiting are common after parenteral administration of the drug.^{1,2} Also dizziness, headache, skin flushing reported when used orally.^{1,3}

Dosage and Administration: Experimental dosage reported in treatment of erectile impotence.^{1,3,4} 1 tablet (5.4 mg) 3 times a day, to adult males taken orally. Occasional side effects reported with this dosage are nausea, dizziness or nervousness. In the event of side effects dosage to be reduced to 1/2 tablet 3 times a day, followed by gradual increases to 1 tablet 3 times a day. Reported therapy not more than 10 weeks.³

How Supplied: Oral tablets of Yocon® 1/12 gr. 5.4 mg in bottles of 100's NDC 53159-001-01 and 1000's NDC 53159-001-10.

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IN-VITRO BIRTHS (Continued from page 363)

vision, dedication, and tireless efforts this program would not exist: Terry Adcock, Pam Judy, Lisa Ontai, Gayle Kogleman, Robin Rose, Kathy Munemasa, Brenda Kaneoka, Anne Henry, Anne Carwyle, Bev Quon, Gayle Suzuki, Kim Okazaki, Jocelyn Won, Lawrene Quisano, Roxanne Ishii and Lisa Bertsch.

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warmers, to used anesthesia machines and OR tables.

We expect that the interchange of ideas and techniques between the Chinese and the Hawaii volunteers will be mutually beneficial. We have undoubtedly as much to learn from them, as they do from us. The Mission promises to be an exciting opportunity to help others in need.

The Board of Directors of this foundation consists of the following members: C. K. Yeo MD, Pon-sang Chan MD, Ming Chen MD, David Lee, Lester Leu Esq, Edward Ngan, Cheng-Hock Seah MD, George Shimomura MD, Ramon Sy MD, Brad Wong MD, Lockwood Young MD and Lisa A. Wong, Executive Administrator.