SURVEY

A survey of volunteer reconstructive surgery performed outside of Canada by Canadian plastic surgeons

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BACKGROUND: Members of the Canadian Society of Plastic Surgeons have been offering humanitarian services to countries outside of Canada since the 1960s.

OBJECTIVE: To document the extent of voluntary reconstructive services performed by members of the Canadian Society of Plastic Surgeons.

METHOD: A survey was sent to all members of the Canadian Society of Plastic Surgeons asking them to list the extent of their voluntary services.

RESULTS: Over 80 Canadian Society of Plastic Surgeons members have performed voluntary reconstructive services with more than 40 organizations in over 60 countries.

CONCLUSION: These voluntary services provide a significant benefit to patients around the world and are rewarding for the surgeons who perform them.

Key Words: Canadian Society of Plastic Surgeons; Volunteer reconstructive services

Enquête sur des interventions de reconstruction pratiquées bénévolement à l'extérieur du pays par des plasticiens canadiens

CONTEXTE : Des membres de la Société canadienne des chirurgiens plasticiens offrent leurs services à l'étranger, à titre humanitaire, depuis les années 60.

OBJECTIF : Documenter l'étendue des services de reconstruction, offerts bénévolement par les membres de la Société.

MÉTHODE: Un questionnaire a été envoyé à tous les membres de la Société leur demandant d'indiquer l'étendue de leurs services bénévoles. RÉSULTATS: Plus de 80 membres de la Société ont pratiqué bénévolement des interventions de reconstruction, et ce, auprès de plus de

CONCLUSION : Les services ainsi offerts procurent des bienfaits considérables à des patients partout dans le monde et sont source de gratification pour les chirurgiens eux-mêmes.

40 organisations, dans plus de 60 pays.

Por over four decades, members of the Canadian Society of Plastic Surgeons have been offering volunteer reconstructive services to countries outside of Canada. Because of these efforts, children and, occasionally, adults who were ostracized in their countries based on their appearances have been given a new image. They have been given a second chance to re-enter society as complete persons. In the fall of 2003, we decided to survey the Canadian Society of Plastic Surgeons to document the extent of its volunteer reconstructive services performed outside of Canada.

METHODS

A '3rd World Surgery' survey sheet was sent to all members of the Canadian Society of Plastic Surgeons, asking them to list the countries in which they performed volunteer services. They were also asked to list the years that they served, the types of operations they performed and the organizations with which they were affiliated. There was also a section left open for comments about the experiences. These data were then calculated and placed into tables.

RESULTS

Canadian plastic surgeons who have volunteered in countries other than Canada are listed in Table 1. Types of services provided are listed in Table 2 and countries in which Canadian plastic surgeons have volunteered are listed in Table 3. Organizations with which Canadian plastic surgeons have served are listed in Table 4.

DISCUSSION

In this survey, we found that 85 members of the Canadian Society of Plastic Surgeons had volunteered their services to countries outside of Canada. These services were mostly in the form of surgical procedures; however, teaching, lectures and general medical assistance were also given. Although cleft lip and palate reconstruction was the most common procedure performed, surgery ranged from general plastic surgery to highly skilled war reconstruction and microsurgery. Surgery was maily focused on children, but some adults were also operated on.

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TABLE 1
Plastic surgeons who have served in countries outside of Canada (85 total)

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Aliyah, Abdulrazzak	Jewer, David	Oxley, Paul
Bederman, Michael	Kay, Peter	Paletz, Justin
Bell, Michael	Kemsley, Graham	Panthaki, Zurin
Bendago, Mansour	Kesarwani, Atul	Parkhill, Winston
Binhammer, Paul	Knight, Charles R	Peters, Walter
Bite, Uldis	Korentager, Richard	Rai, Kimit
Born, Gunter	Laberge, Louise	Schwarz, Gaston
Brown, W Lorne	Lacey, Martin	Schultz, Richard
Burget, Gary C	Lalonde, Don	Scilley, Chris
Carlsen, Lloyd	La Scala, Giorgio	Scoracki, Roman J
Carr, Nicholas	Levine, Ronald	Sigurdson, Leif
Chasmar, Leslie	Lessard, Lucy	Skanes, Susan
Clarke, Howard	Levis, Carolyn	Son-Hing, Q
Cluett, M Joy	Lindsay, Robert	Stephenson, DG
Cook, William A	Lindsay, WK	Stuart, William A
Dado, Diane	Lindsay, WRN	Tate, Laura
Davidson, John	Lobay, Gary	Taylor, John R
Drever, Michael	Manktelow, Ralph	Thompson, Grant
Duncan, Mary Jean	McPhalen, D	Tweed, Anne
Faibisoff, Burt	Miles, Duncan	Voice, Sandra
Fisher, David M	Morris, Steve	Voloshin, P
Freiberg, Arnis	Murray, Ken A	Ward, David K
French, Rod	Naysmith, David	Waters, Linda
Gareau, Paul	Neligan, Peter	Wells, Neil
Ginttre, Martin J	Nickerson, Duncan	Wilkes, Gordon
Gutek, Phillip	Nootems, Jean B	Williams, Bruce
Hong, Colin	O'Hare, Terrance	Wilson, Ken
Hurst, Larry	Olesen, P	Windle, Brian
		Zuker, Ron

This list includes only those surgeons who responded to the survey

TABLE 2
Types of services rendered (16 total)

Burns reconstruction	Gynecology
Cleft lips/palates	Hand surgery
Congenital anomalies correction	Malaria care
Craniofacial surgery	Microsurgery
Facial surgery	Pediatric plastic surgery
Free tissue transfer	Teachings/lectures
General medicine	Trauma reconstruction
General plastic surgery	War reconstruction

Canadian plastic surgeons served in 64 different countries. Ecuador, China, Kenya and Vietnam were the countries most frequently visited. Among the least frequently visited countries were Albania, Tibet, Yap and Zimbabwe.

A total of 44 organizations were involved in organizing the volunteer services. Operation Smile was affiliated with most of

TABLE 3
Countries in which Canadian plastic surgeons have served (62 total)

Country	n	Country	n
Afghanistan	1	Malawi	2
Albania	1	Malaysia	2
Armenia	2	Mexico	9
Bangladesh	2	Morocco	1
Bolivia	6	Nepal	4
Bosnia	2	Nicaragua	1
Brazil	3	Nigeria	3
Britain	1	Palau	1
Burma	2	Panama	1
Cambodia	3	Paraguay	1
China	14	Peru	9
Colombia	3	Philippines	7
Ecuador	18	Phungpi	1
Egypt	1	Republic of the	1
El Salvador	1	Congo	
Estonia	1	Romania	1
Grand Cayman	1	Russia	1
Guatemala	7	Saipan	1
Guyana	3	Saint Lucia	1
Haiti	1	Santo Domingo	1
Honduras	9	South Africa	2
India	5	Tanzania	2
Indonesia	3	Thailand	1
Israel	1	Tibet	1
Jamaica	3	Tunisia	1
Jordan	1	Turkey	1
Kenya	11	Uruguay	1
Laos	1	Venezuela	1
Latvia	2	Vietnam	11
Libya	1	West Bank	1
Lithuania	1	Yap	1
		Zimbabwe	1

these trips; however, a number of plastic surgeons organized self-sponsored trips. Most of our plastic surgeons found the experience very rewarding and had plans for future trips.

SAMPLE CASE PRESENTATIONS

Case 1: Kunming, China

A 10-year-old boy arrived by himself at the hospital on the last day of surgery. The door had not only been closed to any new patients arriving, but many more had been turned away because we were past our limit of the number of patients we could operate on. He had a note from his father which was translated to us: "Please operate on my son's lip. I can't come with him because of my responsibilities on the farm". We learned that the boy had managed to find us after three days and 125 km of bicycle travel! He slept by the roadside at night. We squeezed him into those last few hours of surgery that day (Figure 1), and a few team members pitched in to buy bus fare for him and his bicycle to return to his home the next day.

TABLE 4
Organizations with which Canadian plastic surgeons have served (44 total)

Aloha Medical Mission	Latvia Association of Plastic
AMREF	Surgeons
American Society of Hand Surgeons	Lister Hand Fellowship
American Society of Plastic Surgeons	Loyola
AUCC	Medecines sans frontiere
British Plastic Surgery Society	Medical Missions Foundation
Canadian- China Child Health Foundation	Medishare
Care- Medico	Operation Common Hope
Children Action Foundation	Operation Good Samaritan
Christian Medical & Dental Society	Operation Rainbow Canada
CIDA	Operation Smile
CITA	Peruvian- American Medical
Citizen Ambassador	Association
CUSO	Physicians of World Peace
El Cielo Para Los Ninos	Plasticos
del Ecuador	Poco a Poco
EMAS	Private donations
Healing The Children NE	Pro Cristo
Health for Humanity	Project outreach
Hope People to People	Queen's Medical Outreach
International Relief Teams	Reconstructive Surgery
Interplast	Foundation
Kindness Action Surgery	Self Organized
	SMART
	Support Fund Belgium

AMREF African Medical and Research Foundation; AUCC Association of Universities and Colleges of Canada; CIDA Canadian International Development Agency; CITA Christians in Theatre and Arts; CUSO Canadian University Services Overseas; EMAS Evangelical Medical Aid Society; SMART Surgical and Medical Action Relief Teams



Figure 1) Before and after cleft lip repair in China

Case 2: Nakhon Si Thammarat, Thailand

An eight-year-old boy lost all of the function of his eight fingers and two thumbs due to severe burns. Because no plastic surgery was available, they became stuck into his palms with the healing process (Figure 2). We were able to release his dominant thumb from the palm of his hand with a 3 h operation that



Figure 2) Hand burns before surgery (upper three photos) and after thumb release (lower two photos)



Figure 3) Before and after cleft lip repair in Kenya

transferred skin from the forearm to free up the thumb. He did not cry with the painful dressing removal the day after surgery. Tears of joy came to his eyes as he moved his thumb for the first time in four years. He would now have some independence to feed himself and use the washroom by himself.

Case 3: Mombasa, Kenya

This handsome, 37-year-old man came from a village where surviving with his deformity was more difficult than in other places because of local superstition. He remained hidden during most of the daytime hours and only appeared in public with a shawl covering his face. Imagine being his age and never having had the experience of sharing a gentle kiss. As he was older than most of the children who get priority, he risked not being able to get an operation. Rather than let this happen, we performed his surgery as 'one last extra' at the end of the day, under local anesthesia. He is seen in Figure 3 just five days after surgery in our follow-up clinic, with a chance to lead a normal life.

CONCLUSIONS

The members of the Canadian Society of Plastic Surgeons continue to offer excellent humanitarian services to countries outside of Canada. These services not only make an impact on the patients and countries that benefit from them but are also very rewarding and satisfying to the surgeons who perform them.

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