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HEALING FACES

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Louisville doctors, team reach out to patients in the Philippines
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If all goes perfectly, the flight from Louisville to Manila in the Philippines takes 21 hours. It is followed by a four-hour trek south to a dilapidated hospital in Cavite province.

To help repair the disfigured faces of the archipelago's desperately poor, Dr. Benjamin Rigor, emeritus chairman of the University of Louisville medical school's Department of Anesthesiology, has made the arduous journey about 80 times during the past 30 years.

This, he said, is why:

"I will never forget this one young man about 18 years old, his reaction after the surgery. One of the nurses had the presence of mind to pull out a pocket mirror from her purse and let him see his reflection. The tears just rolled from this patient's eyes."

In the past four years alone, Rigor estimates that Operation Hope, a loose amalgam of determined American medical missionaries, has repaired the faces of more than 3,200 Filipinos born with cleft lips, cleft palates and other craniofacial anomalies.

On Feb. 6, Rigor will take another team to his native land and begin another grueling two-week session of 18-hour days. Dr. Mark Chariker can't wait.

"It's not an easy two weeks, but it's tremendously rewarding," said Chariker, a Louisville plastic surgeon. "The reasons for going are pretty simple. They need the help, we're trained to do it, and we change their lives."

Operation Hope will perform more than 200 plastic surgeries next month. Each one will profoundly improve a life troubled by medical problems and social ostracism.

Most of the patients are infants and children. Some are young adults who have endured decades of scorn, ridicule, speech impediments and digestive problems because their upper lips and/or hard palates failed to fuse.

"These people are social outcasts of the worst kind," Chariker said. "Some of them come to us in their 20s and have never closed their mouths in their whole life. We can repair the clefts and make them look a whole lot better."

"Unfortunately, at that age, it's all but impossible for them to learn how to speak normally. But at least they won't be regurgitating all their meals into their nose."

The incidence of craniofacial defects in the Philippines, 10 to 12 per every 100,000 live births, is twice that of the United States. In America, however, cleft lips and palates (CLP) are repaired during childhood. Those patients go on to live

relatively normal lives.

But CLP surgery isn't cheap. The bill for one procedure, both surgery and hospitalization, ranges from \$6,000 to \$8,000, Rigor estimated. Many insurance plans don't cover the costs, but few American children are forced to forgo the operation because of finances - partly because plastic surgeons such as Chariker accept payments as low as \$300 for performing procedures valued at \$5,000.

Most Filipinos are so poor that even \$300 is an exorbitant fee. About 40 percent of the nation's 76.5 million citizens live below the poverty line, according to the Central Intelligence Agency's World Factbook.

"The people we see are very, very poor, and the private surgeons over there simply aren't going to take care of them, by and large," Rigor said. "Our patients live in grass huts with dirt floors. Some have no shoes, and most have never seen a television. Some walk for two or three days to bring a family member to our hospital."

Rigor was born 66 years ago not far from the hospital, in the former Philippines capital of Quezon City. His father, who held a doctorate degree from the University of Minnesota, was able to send him through college and medical school.

Rigor emigrated to the United States in 1963 and continued his training at the University of Kentucky, earning his citizenship just in time to serve in the Navy during the Vietnam War. Upon returning from overseas, Rigor worked at the famed M.D. Anderson Hospital in Houston, then joined the UofL medical school faculty in 1981.

It was at M.D. Anderson that Operation Hope got its start, thanks to a Houston surgeon who approached Rigor with the idea of doing medical missionary work in the Philippines.

Rigor not only had roots in the Philippines, he had connections. A foreigner can do little in the Philippines without them, least of all import all the medicine and equipment necessary to perform hundreds of plastic surgeries, as Operation Hope does on each visit.

"I had tended to some of their government officials who came for surgery at M.D. Anderson," Rigor said. "We were able to enter the country without visas and take equipment directly through customs without all the red tape. Without the right connections, you're in trouble."

Rigor was eager to help his impoverished former countrymen, and the CLP project struck a special chord.

"Those children are terribly stigmatized in the Philippines," Rigor said. "They are treated as outcasts. I'm very sure that when I was a kid, I messed around with some of those jokes. . . ."

"That's why when we do the surgery they are so very happy. When you fix their face, they learn how to smile again. Or for the first time."

Around 1993, Chariker, a Charleston, S.C., native who also served in the Navy, got word of Rigor's group and quickly volunteered. He wasn't accepted right away.

"I said, 'Mark, it's not a vacation, OK? We work up to 18 hours a day.' He said, 'Dr. Rigor, I work very hard.' I said, 'Well then, you're in.'"

That conversation occurred 10 years ago. Chariker has stayed in since.

"All it takes is one trip," he said. "It is such a moving emotional experience, and I just got hooked on it. I felt an extreme obligation to do it year after year."

The Operation Hope team, which includes nurses and therapists from around the country, push themselves hard from the moment they land. Rigor has a rule: No patient is turned away.

"Some of them have walked for two days and suffered so much," he said. "How can you turn them away? When Dr. Chariker and I go, we say we are going to take care of everyone, even if we have to stay another week."

It has never come down to that, thankfully. There is a limit even to what the best-trained, biggest-hearted people can take, especially those approaching retirement age.

"The first time I went, on the way back Dr. Rigor said, 'Mark, I don't think I can do this anymore. It tires me so,'" Chariker said. "That was 10 years ago. He's still doing it."

Colleagues often are incredulous at the work and sacrifice involved to participate in Operation Hope. Team members use their vacation time and pay their own travel costs, eventually returning to their real jobs fatigued but uplifted.

"One time a doctor from Norfolk (Va.) told me I was mentally deranged for doing this," Rigor said. "One year he went with us. On the way back, he said, 'Now I know why you do it. I feel so good, so gratified to have helped so many people.'

"I told him, 'Yes, that's exactly it. You got it.'"

Dr. Mark Chariker worked on the finger of Virginia Eldridge before going to the Philippines.

PHOTOS (ABOVE, TOP) BY PAM SPAULDING, THE C-J

Dr. Chariker, a Louisville plastic surgeon, said that the work is "tremendously rewarding."

Children make up the majority of patients treated by Operation Hope. This girl's cleft-lip repair was one of hundreds performed by the surgical teams during a two-week stay.

Operation Hope has performed more than 3,200 plastic surgeries over the past four years, Dr. Benjamin Rigor estimated. Many patients walk for days to reach the hospital.

BY PAM SPAULDING, THE COURIER-JOURNAL

Dr. Mark Chariker, a plastic surgeon, worked on the finger of Virginia Eldridge. He is going to the Philippines to work with impoverished natives.

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