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Tanzania's first pediatric heart surgeon has Israel at his back

Stephanie L. Freid

"It's overwhelming. I am a bit terrified," 34-year-old Godwin Godfrey admits as he sprints up Bugando Medical Center stairs past a stream of physicians, orderlies and patients moving a bit too slowly.

Dr. Godfrey's apprehension is warranted. Hospital lab technicians are half an hour late and surgery is scheduled within the hour. This will be his first procedure at Bugando and he wants to make a good impression: He's Tanzania's first and only pediatric heart surgeon.

"We have limited resources and the staff doesn't know what is expected of them yet," Godfrey confides. "I just don't want what I learned for five years to go to waste."

To ensure that this won't happen, a team of 20 has traveled to Mwanza in the northwest of the country. Led by the head cardiothoracic surgeon at Israel's Wolfson Medical Center in Holon, Dr. Lior Sasson, the troupe of Israeli operating-room and intensive-care nurses, anesthesiologists, perfusionists and intensive-care doctors are in place to back Godfrey up. They were with him during his specialization training in Israel, and they've brought with them a ton and half of medical gear. Supporting him in Tanzania is standard follow-through procedure.

It's all part of the Israel-based Save a Child's Heart program for providing cardiac care to children from developing countries. SACH teams travel to remote destinations where they screen children, perform heart surgery and hand-pick medical candidates

for specialized medical training in Israel. The philanthropic organization also brings children with more complicated heart ailments back to Israel for surgery.

Save a Child's Heart has been working with Tanzania since 2008, performing hundreds of procedures each year. Rated as one of the world's worst health care systems, Tanzania has five physicians per 100,000 people and severely limited resources.



Sasson, in green, next to Godfrey, in maroon.

Meredith Holbrook

A \$200,000 bypass machine is a major investment, so the SACH team will leave most of the gear they've brought along behind.

Hebrew below the equator

In the sparse operating room, Israeli and Tanzanian medical teams lay out instruments, hook up monitors and scan charts. Plastic garbage pails labeled "soap water" line the room's entrance.

"Don't touch that table!" warns Haya Museri, head cardiac nurse at the operating

room, as a photographer unwittingly brushes up against an instrument tray. "This room must be kept sterile! Children's lives are at stake!"

Five-year-old Esther is wheeled in. Already sedated, her tiny fist pokes out from under standard-issue blue hospital sheets. Esther suffers from Patent Ductus Arteriosus - abnormal blood flow between the heart's main arteries. If left untreated, it can significantly shorten her life.

Even though team members sometimes bump against each other in the overcrowded OR, cooperation is symbiotic. Two hours later, the procedure ends with a success.

"Dr. Godwin performed well and that gives him and his team a measure of confidence moving forward," Sasson says outside the operating room as he peels off his surgical gloves and pulls down his white mask. "There's a distance to go, but hopefully he'll get support. They are keen to make it work here. I'm optimistic about the future."

Days later Tanzanian Vice President Gharib Bilal visited the medical center, so things may be looking up as far as government support is concerned.

But there are setbacks. While in Mwanza, the Israel team screened 250 children and performed 17 procedures, but power outages midway through surgeries and the lack of a backup system meant pumping blood manually during open-heart surgery and respirating patients via hand pump. Questions remain about staff coordination and whether the government will increase health care support.

"In Africa everything is crisis management," Godfrey says as he checks Esther's vital signs. "We don't have time to take our time. It's all about fast, fast, fast. Do something. I have to hold on next week when the team is gone."

Esther's mother, unaware of the funding problems, doctor shortages or other problems, strokes her daughter's hair as the girl rouses from the anesthesia. "She is getting good care," she says, breaking into a broad smile. "I feel good."

As the anesthesiologist attends to Esther, Godfrey and Sasson put on gowns and wash up in the scrub room. "Behatzlaha," ("Good luck") Sasson warmly wishes his counterpart. "Todah. Behatzlaha gam lecha" is the reply. ("Thank you. Good luck to you.") Part of Godfrey's five-year Wolfson curriculum included mandatory Hebrew lessons. He's fluent in the language.

With Edith Piaf crooning in the background - Sasson's operating-room music of choice is French - surgery ensues. Godfrey takes the lead with Sasson providing guidance.