

20 December 2007

Honduran Children, Doctors Reap Generosity of Two U.S. Surgeons

Columbia University experts focus on repairing children's cleft lips, palates



Dr. Howard Smith hugs a young Honduran boy in the clinic after surgery. (Photo courtesy Howard Smith)

By Phillip Kurata
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Washington -- American professors of medicine at Columbia University in New York quietly have been repairing facial deformities in Honduran children for nearly two decades, giving thousands of youngsters a chance to lead normal lives.

Dr. Howard Smith, 88, and Dr. Joseph Haddad, 50, are going beyond just performing the delicate procedures of repairing cleft lips and cleft palates, which produce gaping holes in the middle of children's faces and cause the children to suffer from social stigmas. Largely at their own expense, the two humanitarians also are training Honduran doctors to do the operations and providing them with financial support during four-year apprenticeships. They established the Honduran

Medical Institute in 1995 to offer medical and surgical care to children in Honduras with cleft lip, cleft palate and other congenital or acquired deformities. They are among the foundation's main benefactors.

Smith began working in Honduras in 1989, the year he retired as a professor of facial plastic surgery at Yale University in Connecticut at the age of 70. Ending one career, he launched two new ones. In addition to the Honduran mission, he began a second teaching career as a pro bono (unpaid) professor of otolaryngology at Columbia University in New York, where he also has endowed chairs in several medical departments. Otolaryngology deals with ear, nose, throat, head and neck disorders. Smith, a past president of the American Academy of Facial Plastic Reconstructive Surgery, quipped, "It was an offer they just couldn't refuse."

As to why he has chosen Honduras for his philanthropy, the doctor said, "That's where it [the need] is. We held a clinic last November when I went down. We saw 11 or 12 double clefts of the lip. In all my years of practicing in Connecticut, I didn't see more than two." In Honduras, roughly one in 500 people suffers from a cleft lip or a cleft palate. In the United States, the incidence of the deformity is one in thousands, according to Smith.

Haddad, also of Columbia University, has been accompanying Smith to Honduras for the past 17 years, starting immediately after he was hired as a professor of pediatric otolaryngology in 1990.

"We shared an office and became friendly. He felt that because I worked with children that I might enjoy joining him on some of these trips and getting involved in the work, and I did. I got very involved," Haddad said.

Smith travels to Honduras four times a year, and Haddad goes with him on two of those missions. They stay for one week each visit.

"We go down on a Saturday and hold clinic all day Sunday. We might see 100 to 150 people on a day like that," Smith said. "We stay and operate all week. What we're trying to do is have the people that we train operate in between our visits," Smith said. "They're doing quite a bit of this. They keep one operating room going every day." Seven Honduran doctors have been trained or are in training by the New York doctors.

Smith has spent about \$2 million on equipping an operating room, supporting doctors in training and paying the salaries of operating room personnel in Honduras. Haddad has contributed money, time and equipment to the Honduran Medical Institute Foundation and serves as the foundation's president.

"A lot of the young resident doctors don't have much money. They owe the government about \$24,000 for their education by the time that we see them. We pretty much have to buy up their debt. I sort of adopted one family because they didn't have any money at all," Smith said.

Once Smith and Haddad finish teaching the Honduran doctors, the Honduran doctors are sent to the United States for another year of training before they return to their Central American homeland.

"They are as well trained as any plastic surgeon in the United States, sometimes better, because they have so much clinical experience," Smith said.

Haddad has extended his work in Honduras beyond treating and teaching into trying to find out why the deformity is so prevalent there.

"It's three to four times the incidence that you see in the United States. Some of that may be due to environmental and nutritional causes, but some of it seems to be a genetic predisposition. We're seeing significant numbers of families with multiple members affected. Those are the families that we are targeting in terms of trying to figure out the genetic cause."

Smith says he will retire from Columbia University when he is in his early 90s but plans to continue working in Honduras longer. Haddad plans to continue the Honduran work after Smith no longer is able to do it.

"I'm only 50. I would say that I'll be involved another 30 years. This work is good for the soul, and that ends up driving the work," he said.

(USINFO is produced by the Bureau of International Information Programs, U.S. Department of State. Web site: <http://usinfo.state.gov>)