

Bartholomew's Newsletter August 15, 2022

From Zambia a couple months ago, now to Chad, W. Africa for the 10th time, Huyen and I were fortunate to have a super great team with us (a team of two others). And when your teammates are good, you get a lot done. We try to recruit people to be in Chad with us, but oftentimes, I think "Chad" isn't awfully exciting of a place to go, so we many times struggle to find help. This time, a maxfax surgeon who was with me 6 years ago in Chad when we were at the National hospital working came back again.



Seems, at least according to him, last time he and I were there together, I left Chad before him and sort of tasked him with taking a trip across Chad's capital of N'Djamena by himself (a first-time-in-Africa-person-with-zero-French) to go see patients and "take care of things" after I left. What I didn't know then that he was



sure to let me know this time was that he walked across town (not knowing how to hail a bush taxi nor how to get it to stop beside the hospital nor having money for a taxi) and on the way he sauntered by the President's Palace, on the wrong side of the street. I guess it was raining that day and closer to the Palace was the dryer side of the road. That gave him the very memorable moment of having several AK-47's pointed at him and yelling in French and Arabic (to get away). He surmised as much, crossed the street, got to the hospital, took care of our patients one more time and made it safely home with a taxi I had prearranged to get him to the airport. Oh yes, he also had his boots taken from him at the airport because they were "too military-like" when he first arrived (I sort of had to beg and plead with the chef of the gendarmes the next day to give them back saying they were a gift from his wife, which worked, but I was warned if he ever wore cloths resembling military again, he would be tossed in jail...). So, it was a little surprising he rejoined me in Chad this time. Needless to say, we all travelled like a family this time in and out.

Also, with us this time was a nursing student whose mom has worked with us in Chad and Mali in the past. They are good stock that family is and he was amazingly helpful. He and I had spent a lot of time together before going to learn suturing, starting IV's, electrocautery and dissection, and a lot of other things so that things would go smoothly in Chad. Ethan speaks French fluently, but



interestingly he got a tad lost in the Paris airport as he somehow got separated from the team. Having grown up in Guinea and Senegal, we had no worries he'd show up in N'Djamena at the appointed time, so we moved on to our gate and he did indeed show up eventually. Almost sounds like we espouse a pirate's code of "he who falls behind is left behind."

The hospital we were at was the same as the one we've been to before, Guine Bor 2 just outside N'Djamena. It's amazing how just outside the city, the roads look like RPG's have



Halime Pre-7/2021



7/2021



11/2021



8/2022



sculpted the terrain. That along with the rainy season makes it hard for us and patients to get to the hospital. But several brave souls came. You'll maybe notice the first girl, above, is our frequent flyer as this is now her 3rd surgery to remake upper lip and a nose from having had NOMA and cleft lip. We are hoping that this care along with the work by the missionary in the picture who for safety we blocked out her face, would be open to the gospel message. They are very happy with the work we've been able to do so far. Halime', as she's called, was really hoping to get the forehead pedicle to the nose sectioned and removed this time, but I convinced them to let me do one more sculpting and thinning stage, along with some ear cartilage, and live with this 'til next time we come. With tears in her eyes, she acquiesced. Dad, on the other hand, was totally game. We think in the end at her age, it will all be worthwhile.

This fellow below was also one we saw. Dr. Tom at the hospital had asked us to see him and had done a biopsy read out as "inverted papilloma" which neither he, nor I, nor any ENT and Derm consultant we asked agreed with. Presuming we'd end up with a complete nasal amputation to do when we arrived (cancers move fast so we figured this would be way worse when we arrived), I thought of Halime' above and the long wait for a new nose and I (Tim) brainstormed "what else can we do if we remove his entire nose?" Then it hit me—why not ask the dental lab my DDS brother uses for dentures to make a nose! If they can sculpt gums and



teeth, why not a nose as well? But then how to attach it to his face? Fix-a-dent?? Craniofacial implants are not an option for me. So I bought some sturdy glasses and took 24 ga wire as a back up, but as is often the case, my better option was proffered by another, this time, my 11 year old daughter who was playing with magnets and asked me "daddy, why not use magnets to hold that man's nose on?". Something about turning 50 makes me often now forget some of the many good ideas I had years ago in similar cases. I found small, powerful neodymium magnets on Amazon with a hole where titanium screws would fit perfectly! I could put those on the sides of the wound into bone and put matching magnets on the back of the acrylic nose! Voila! A cleanable, removable nose! But where to get a model nose for the dental lab techs to use in their

sculpting? My brother had a patient of the right skin tones who donated his time to have a nasal impression done at his office which was processed like a denture into a...hard acrylic nose! Complete with breathing holes. The color matching did elude us even to the end as you can see...any ideas how to get true brown acrylic are welcome. We tried mixing brown stain and food coloring. The two ladies pictured are the lab techs who made it. We also worked with one of our long-time



donors who has a 3-D printer who worked tirelessly to program his printer to create a nose prosthesis via back and forth texting as we progressed through gradual improvements. Coloration was also an issue as was rigidity and anatomy. But we left for Chad with two options of noses in hand because, well, who nose what we'd encounter when we got there??

As we stared at this patient's nose pathology once we arrived, it just seemed to me (Tim) that his was maybe just maybe fungal or Leishmaniasis and not cancer after all. It would have truly been nice if *this* had been ruled in/out before we arrived, but fortunately, the hospital had a smear test available that indeed proved to show Leishmaniasis organisms when I ordered it. Good for him, but kinda sorta bad for us. So, now, we have 2 noses, neither of which being truly brown in color, sitting in our medical surgical supplies shelves, along with about 60 neodymium magnets and one pair of sturdy glasses ready for the next "nose case". As we look back over the years we've been doing medical missions, we have found that maxillofacial surgery has afforded numerous opportunities to come up with innovative and bizarre solutions to the problems we've encountered in Africa, many of which are still on our dusty shelves of wasted time as, in this case too, a better option becomes obvious. Oh, yes. The hospital had the antimony compounds necessary to treat him. We pray all goes well and he heals with nice brown skin!

Some of the other cases we did are shown here below. Not much to tell. We repaired the cleft lip on this cleft lip+palate girl below 6 yrs ago and it was nice she came back so we could do her palate. There's no speech path available in Chad, so dramatic voice changes are not likely. We've formed a relationship with the family and although they are ardent muslims, I was able to pray before surgery in Jesus' name which prompted a conversation immediately after "amen". Even though it was mostly a one way conversation, Jesus' name was preached and compassionate work was done in His name. The last boy who is all smiles sadly we sent for a CT scan as we suspect it's a midline encephalocele or intracranial dermoid that's descending down his midface----not operable by us. The pathology is still pending on the middle lady's eyelid mass.



We are hoping to be back to this hospital mid Spring. Tim plans to be in Zambia in a month for a new hospital visit and the rest of our family to go back to Zambia to Chitokoloki H. again in January. We are grateful to those of you who continue to support our work even though it's in this fashion of frequent visits for the time being. As we search and pray about a new site at which to base, we appreciate your prayers and support for our work in the only way we can do it at the moment. Anyone who wishes to partner with us to help cover the costs of doing these surgeries can give checks to: Grace Fellowship church, 365 Straub Rd. East, Mansfield OH, 44903. Make check out to the church, *but paperclip our names to it.* Or, for online or auto-giving, you can use this link: <https://www.cmalliance.org/give/gift?desc=Tim%20and%20Huyen%20Bartholomew%20-%20mm>

One last item—a shout out to MedWish in Cleveland OH for their support of this work, and in past times, with the many affordable supplies we were able to get before going! Thank you MW!

Tim Huyen Alex and Emma