



WESTCHESTER PHYSICIAN

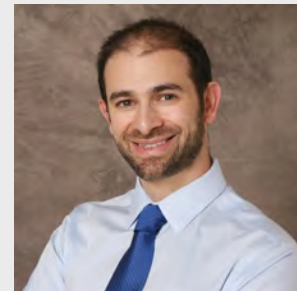
February 2022

Volume 38, Issue 2



DR. PAUL FARMER PETER ACKER, MD—IMMEDIATE PAST PRESIDENT

I was greatly saddened to hear of the untimely death of Dr. Paul Farmer at age 62. I first learned about him when I read “Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, a Man Who Would Cure the World” by Tracy Kidder. What an extraordinary man he was. Equipped with MD degree, PhD in anthropology and unbounded energy started a one room clinic in Haiti which over many years expanded into a network of 16 medical centers with over 7000 employees. He went on to expand his work to other countries such as Peru, Lesotho and to Buttaru, Rwanda where he died in his sleep.



*JEFFREY JACOBSON, MD
President, WCMS*

Dr. Farmer was a practitioner of “social medicine”. He believed that in order to treat illness, you needed to have a deep understanding of the social conditions of society. What good was it to treat an illness and then send the patient back into the desperate circumstances that precipitated it. He would go to extraordinary lengths to treat his patients, sometimes would walk for hours to home to ensure they were taking their medicine.

His organization, Partners in Health has had tremendous influence upon the public health strategies employed in treating such scourges as tuberculosis, HIV and Ebola. He believed in deep engagement in the community and in all his centers he emphasized the use of locals to staff his clinics.

Dr. Farmer’s childhood helped shape and direct his later interests. His mother was a super market cashier and his father a salesman and high school math teacher living in North Adams, Massachusetts. It was seemingly an ordinary American middle class family, but clearly his parents were deeply unconventional. When he was 12, his father bought an old bus and converted it into a mobile home and the family of 7 (Paul had 5 siblings) spent the next several years on the road. They also lived on a boat for a while. He later said that this life style was a great preparation for his future in that he learned how to sleep anywhere and not to be shy or embarrassed about any situation.

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FROM THE EDITOR...**MEDICAL BRIGADE TO QUITO
PETER ACKER, MD**

{This is a trip I went on about 10 years ago

Our plane, three and a half hours out of Miami, dipped signaling the beginning of our descent into Quito, Ecuador. I stirred from a light doze and peered out my window, faint lights of a distant city barely discernable. As we descended, I was able to make out in the moonlight vague contours of a very mountainous landscape. My heart began an anticipatory pounding, a mixture of excitement and nervous apprehension of what was to come. Finally we landed, my daughter Karen and I exhausted by our 12 hour trip from Northern Westchester (which included a lengthy Miami layover), and shambled into the Quito airport. In Miami we had been joined by a number of our team which was to ultimately encompass four doctors, two nurses, a pharmacist and about a dozen of Karen's Davidson College classmates. After what seemed to be an interminable time passing through passport control, customs, punctuated by a lengthy discussion in Spanish with the baggage people about some missing luggage, we assembled en masse in the main airport lobby. I made a quiet, subdued acquaintance with the other docs: Jim, a 52 year old surgeon from South Carolina, Marsha, a female pediatrician of a similar age from North Carolina and an older male semi retired pediatrician, Henry while the college kids engaged in rather more boisterous activity. Later on I met our nurses Marion from Chapel Hill and Nora, originally from Columbia, but now residing in Charlotte as well as our pharmacist, Lori from Indianapolis. After another interminable period, we made our way to a bus and it was close 11 PM by the time we rolled up to enclosed dormitory style compound that was to be our domicile for the next week.

For me, this trip had its inception with a late night phone call from my daughter some two months before: "Dad," she began without preamble in an excited voice, "do you want to go to Quito on a medical brigade, it would be so cool if you could...." The words poured out, her enthusiasm hard to resist. I said yes almost immediately, which was followed by Karen's surprised "Really?" Hey, I may be middle-aged, but I can occasionally be spontaneous and impulsive. In reality, the idea of going to Latin America on a medical trip had been had been floating around in my head as an inchoate resolution for years. I was born in Lima, and though I had left at quite a young age, I had retained some of my Spanish and an interest in Hispanic culture. As we continued to talk I learned more of the details. This trip was to be under the auspices of an organization called the "Timmy Foundation" started some ten years ago by a physician in Indiana who wanted to honor a brother who died at a young age. The organization established contacts in several countries as well as with American colleges. The essential strategic model used was to involve college students early on in organizing the medical brigades. Indeed, as I learned, Karen and other students (led by Maria Jose) had been working feverishly to recruit doctors, raise money, and contact

(Continued on page 4)



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DR. PAUL FARMER**PETER ACKER, MD—IMMEDIATE PAST PRESIDENT***(Continued from page 1)*

During this time of peregrinations, one summer he and his family worked next to Haitian Migrant workers picking oranges. He listened with great interest to them atop ladders chatting in Creole with great bonhomie. Later after graduating from Duke, he moved to Haiti worked in a clinic there. He was greatly struck by how ill equipped the hospital was to treat the poor, instead catering to the rich.

Please join me in donating to Partners in Health in honor of Dr. Paul Farmer.

*FROM THE EDITOR...***MEDICAL BRIGADE TO QUITO****PETER ACKER, MD***(Continued from page 2)*

various pharmaceutical sources. All of us had packed our luggage stuffed to the gills with drugs and medical equipment. (As I packed, I pictured a bemused customs official asking quizzically, “You’re trying to smuggle drugs out of America!?”).

We rose at 6:30 the next morning and after a quick breakfast, we were back on the bus and were seeing Quito in daylight for the first time. Quito, the capital of modern Ecuador, was also a major Incan center during pre-colonial times. It is nestled in long narrow valley running north to south surrounded by snow capped mountains and an active volcano (15,710 foot high Pichincha). Northern Quito is where in general the wealthier live and is the site of the city center with impressive Spanish style buildings and where most of the tourists congregate. Southern Quito where we were staying is, on the other hand, quite poor. Quito is only 15 miles from the equator, but is elevated to 9200 feet so the typical climate is spring like year around. As we bounced along, I strained my eyes to take it all in. I immediately formed the impression that Quito is a sprawling city as we traversed seemingly endless by ways and passed countless houses and stores. One curious sight was the numerous half finished houses –one story of cinder block with bare steel supports extending some ten feet above in anticipation of a second story. I queried one of the Ecuadorian organizers, Pablo, who explained that because of a traditional distrust of banks and currency, many of the poorer

would put what ever they had into starting a dwelling and would over years slowly attempt to finish it. Another sight that caught my eye which I seemed to dimly recall from my early youth, was walls topped with shards of glass from coke and other bottles designed to discourage would be intruders. As we slowly made our way on increasingly rough, hilly, rocky roads, I began to admire the skill of our Ecuadorian driver, Clever. Then, after a heart stopping descent down a steep, ragged, gullied dirt road, we spotted a group of Ecuadorians gathered around the entrance to a simple two story building.

We quickly set up a make shift clinic – two primitive exam rooms (half our group went on to another site), a triage area manned by students and a nurse, and a pharmacy. I set up my equipment and summoned in my first patient, a 42 year old woman with arthritis of her hands and an aching back. My Spanish, tentative at first, began to flow out with increasing confidence. In turn, I saw dozens with sore throats, rib pain, stomachaches, one case of acute urinary retention and most commonly: dolor en los huesos - pain in the bones. Many were dressed in traditional garb – which for the woman included a bowler style hat, braided hair, a shawl covering multiple layers of various shirts, sweaters and undergarments, a long skirt and long woolen socks pulled up to their upper thighs. Many carried a child on their back. The children were remarkably friendly, virtually not a sign of doctor phobia so common in the States. It was like landing on an island with no predators – one and a half year olds smiled at me and opened wide upon command.

The first day passed quickly and the bus was mostly silent on the ride home, all of us exhausted. The next morning we got up extra early, in order to travel about two hours to a small village in the south – Alonsi. We pulled up in front of church across a

(Continued on page 9)

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- Reducing prior authorization hassles
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- Protecting patient safety by rejecting inappropriate scope expansions
- Shaping the discussion surrounding single-payer healthcare
- Preserving opportunities for NY's medical students and residents

For More Information Contact:

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THE MEDICAL SOCIETY OF
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Make the most of your membership

STOP THE TRAIN
Elliot Barsh, MD

“What I regret most in my life are failures of kindness.”

-George Saunders

I hope this month’s newsletter finds you healthy and safe.

How often can we say we **“experience ourselves to our full potential”**?

The Greek word for this is **arete**.

Arete is achieved by fulfilling a **purpose** and **ideal** not just once, but over the course of a lifetime.

It is not skill! It is **presence!**

Through a lifetime of practice we can deepen our presence and broaden it to hold all that life has for us.

We can **honor ourselves** and our well-being to be the best at work and at home.

We can **admit our biases** and learn how to listen and see with compassion and kindness.

We can **hope to remain youthful** as we age and accept changes that we do not welcome.

We can let go of expectations and **embrace joy and fear**, and learn how to go on living with what we gain and lose.

As always, thanks for reading.

Make sure to look at George Saunders' commencement speech.

Be safe.

Articles & Links

“We can choose to understand, and be moved, and not dwell on the past.”

We Must Learn to Look at Grief, Even When We Want to Run Away

The suffering that Covid wrought can unite us.

“Are we making sure we see what is there?”
Roulette

“The key is we have to learn to speak the language of the other person.”

My Husband and I Don’t Speak the Same Love Language

Women are not always comfortable saying what they need from their partners.

“Somehow, unannounced and unceremoniously, old age has snuck into their experience of themselves. It has crept in at some inexact moment, through unseen cracks in imagined future selves, and it refuses to go away.”

An Aging Un-American
List of authors.

“If it’s possible to hate and fear those we have never met, then it’s possible to love those we have never met.”

Sitting in Our Discomfort

“We are persons with desires and private lives, families, and hobbies.”

8 Hours a Day, 5 Days a Week Is Not Working for Us

The goal is “one reasonable job per person,” not “two for one and half for another.”

“We can be optimistic and wait for life to be what we want it to be, or make it what we hope it will be.”

How Covid Stole Our Time and How We Can Get It Back

‘Depressing Math’ can help you live a more fulfilled life.

“That luminous part of you that exists beyond personality – your soul, if you will – is as bright and shining as any that has ever been... Clear away everything that keeps you separate from this secret luminous place. Believe it exists, come to know it better, nurture it, share its fruits tirelessly.”

George Saunders 2013 Syracuse Commencement Speech



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\$0 or Low Cost Plan Premiums

Health plan options for those with:

- Medicare
- Medicare and Medicaid
- A Medicaid Advantage Plus (MAP) Plan for those who need community based long term care services and supports in the home

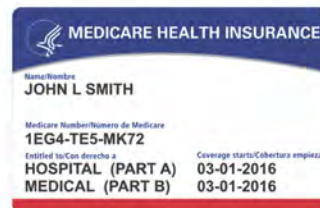


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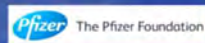
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FROM THE EDITOR...

MEDICAL BRIGADE TO QUITO

PETER ACKER, MD

(Continued from page 4)

Spanish style plaza. An elderly but spry nun greeted each and every one of us with a hug. Poverty was evident, but there was a palpable sense of community that had been missing in the Quito suburb from the day before. Patients often hugged us and listened intently to whatever we had to say. Highlight of the day was a young woman with black circular patches sharply demarcated scattered around her trunk. Someone had told her it was cancer and her fear was evident on her face. Three of us docs stared at, without a clue of what this was while the woman searched our faces, getting more nervous by the minute. Luckily, one of the other pediatricians had Hurwitz's derm book – tinea nigra! A fungal rash peculiar to the equatorial regions – easily treated and most decidedly not cancer.

The next day was Sunday – a day off! – but no sleeping in – we had to be up for 9 o'clock mass. Many of our group were Jewish, but all chose to attend since the church and its priest were the main Ecuadorian contacts for the Timmy Foundation. The priest's predecessor (Father Jose Carollo) had started a clinic (Tierra Nueva) and had set in motion ambitious plans to build a hospital to serve the poor of Southern Quito. The current priest, (Father Graziano Mason) a whirling dervish with a large grey beard, charged around waving his arms as he directed us to sing, smiling, grabbing hands. It turns out that Simon and Garfunkel tunes are big down there - at one point we all held hands singing "The Sounds of Silence" in Spanish. Afterwards, we had a round table discussion with a group of Ecuadorians - topics included American economic, immigration, and foreign policies and some pointed questions about our motivations. Also there is a lot of bitterness about Americans spraying at the Columbian border to eradicate the coco plants. This indiscriminate spraying is having a devastating effect upon the poor, rural Ecuadorian farmers along the border. Another man stood up and asked if we knew that America has a base on the coast. Majority opinion on their side was that free trade heavily favored the Americans and that invading Iraq was a colossal mistake. No question that our image in many parts of the world has suffered in the last few years. I had a lengthy exchange with a couple of them which taxed my Spanish a bit, but I think I was able to assure them that many Americans do not agree with

all of the current administration's policies. It ended up with smiles all around and a general feeling that this type of contact is ultimately a positive thing. Then it was off to the North where we visited a small pueblo high in the mountains famous for the "Plaza de los Panchos" where one can barter for any number of alpaca rugs, woven items, carved jade and volcanic rocks, hand crafts of all types, followed by a stop at the Equator where of course all the college kids frolicked taking various pictures (one foot in each hemisphere, etc). The group was incredibly compatible and interesting. One of the docs was a semi retired pediatrician who also had a music degree and is affiliated with the Smithsonian (he does field research in Panama on weevils). He had traveled extensively in Latin America and had an encyclopedic knowledge of local flora and fauna. The students were smart, enthusiastic and hardworking (they did triaging, manned the pharmacy, played with the kids, shadowed the docs).

Most nights, we sat in a circle to discuss our experiences and were encouraged reflect upon such issues such as world poverty, how much impact did we really have, our motivations. It was clear that all of us were quite enthralled by the experience, but we were also disquieted somewhat by the worry that perhaps it was merely an ego gratification. It is easy to slip into cynicism when we calculate our impact in one short week in the face of the myriad problems. A drop in the bucket, one could argue. Yet, I couldn't help but find meaning in the connections I made with many of the Ecuadorians and what a privilege it was to be privy to a little window into their lives. To borrow a term from the 60's, it was consciousness raising and I think I have been marked permanently by the experience. I will be back.

I learned one other exceedingly valuable lesson; that being the one middle aged participant in a group salsa lesson with a bunch of nimble, un rhythmically challenged college students is not a good idea.

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About Westchester County...

Westchester County, located in the heart of the historic Hudson Valley, covers 500 square miles and has a population of just under a million. Originally home to Native Americans, who were members of the Lenape tribe, it is today a rich mix of many cultures and landscapes. The County is a blend of bustling cities, quaint villages and picturesque towns as well as open spaces and a network of beautiful parks. The County is also an intellectual capital, boasting a highly educated workforce, competitive colleges and universities, Fortune 500 companies, world changing non-profits, and cutting-edge research centers.



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George Latimer
County Executive

Department of Health
Sherlita Amler, M.D.
Commissioner

January 27, 2022

Dear Colleagues:

As we enter the third calendar year of the COVID-19 pandemic, I would like to take this opportunity to thank you for your ongoing efforts to prevent and treat the virus in our community. We have faced many challenges along the way, but thankfully, we have now reached a point in time where we have the necessary tools to greatly reduce the transmission of COVID-19. Vaccines, testing and personal protection measures are the pathway out of this pandemic.

Attached, please find a *COVID-19 Vaccination FAQ* for distribution to your patients. This guidance is consistent with CDC vaccine guidance and information. Along with your trusted guidance, you can provide this fact sheet to your patients to address concerns that they may have around vaccination, as well as to direct them to vaccination sites in their area.

Additionally, the Westchester County Department of Health's website lists COVID-19 community testing site locations and links to register for testing appointments. Please refer your patients to <https://health.westchestergov.com/> for these resources.

Once again, thank you for your assistance with ensuring that Westchester residents receive accurate information about the safety and effectiveness of COVID-19 vaccines. The Health Department cannot tackle this issue alone, but together, our efforts can increase the rate of vaccination among Westchester's vaccine eligible population.

Sincerely,

A handwritten signature in black ink that reads "Sherlita Amler MD".

Sherlita Amler, MD
Commissioner of Health

[Printable—COVID-19 Faq](#)

[Printable—6 COVID Facts](#)



MSSNY Podcasts

MSSNY

The Medical Society of the State of New York has created a number of podcasts on topics that are timely and relevant. In addition to weekly MSSNY Updates from the Division of Governmental Affairs, there are myriad timely and relevant podcasts on COVID-19 (both for physicians and patients) as well as a number of others on veterans, adult immunizations and emergency preparedness.

- | | |
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Click on the podcast titles to listen

MSSNY Announces two NEW Podcasts on COVID-19

★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

★★The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast website!★★