“We’re Not in Kansas Anymore...”
By Lauren McCrary

Andrew McCrary was an HYC Global Health Pathway (GHP) Fellow in pediatric cardiology doing research at Moi Teaching and Referral Hospital (MTRH) in Eldoret, Kenya. His wife, Lauren, who accompanied him with their two sons, wrote this reflection about their family’s experience.

November 2015 is when we realized what we had done. We had signed up to add another year of training to my husband’s already long road to becoming a doctor. Oh, AND move our family to Kenya.

At the time we found out Andrew was accepted into the GHP, it seemed like an eternity before we would actually be leaving. However, before we knew it, it was time to go. Just get on a plane and fly 7,500 miles...then just a couple of hours into the flight with a two-year-old, I completely lost it. I was literally crying ... my way of dealing with all the emotions that went into planning for this exact moment for almost two years. As with most things in life, nothing can truly prepare you for what is to come - even if you know it’s coming. You simply have to experience it.

Meanwhile, our oldest son, Luke, was super excited... until about three weeks in when he was ready to go back to Durham. The excitement had passed and the reality that he was different and school and life were different had seeped into other areas of his little six-year-old life and made him homesick for his other school and friends. After explaining that we weren’t going home, he really tried; he learned to speak with a British/Indian accent so his classmates could understand him better and returned to our friendly and hilarious Luke we know and love dearly. Our sweet, playful, fearless, two year old also tried to find his place in this ever-changing world of his. He was clingy and apprehensive of people outside of his family for a few months, but soon after became more open and friendly and picked up the wonderfully cute Kenyan accent too.

Andrew was not far behind Luke when the excitement passed and reality set in. He is no stranger to practicing pediatric medicine in Kenya since he did an HYC clinical rotation in Kenya in 2014, but it was new territory to be conducting a research project, especially when he wasn’t sure what the research would mean in the long run for these fragile children. Thankfully, about the time he was questioning everything, his Duke mentor came and helped him think through his study. One thing remained the same, however. Whether practicing medicine or doing research, having to tell patients who needed heart surgery that they could not get it in East Africa was devastating.

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HYC Builds Laboratory Capacity in Sri Lanka and Tanzania

Long-standing partners of the HYC, colleagues at the Teaching Hospital Karapitiya (THK) in Galle, Sri Lanka and the Kilimanjaro Christian Medical Centre (KCMC) in Moshi, Tanzania, recently benefited from funding that provided new laboratory equipment and training for lab personnel. HYC purchased a large –80C freezer for THK that will provide stable storage of specimens collected in infectious disease-related studies focusing on respiratory infections, febrile illness, and antimicrobial resistance, allowing us to answer research questions for years to come. At KCMC, through a partnership with the Duke Human Vaccine Institute (DHVI), the HYC provided funding to support training for KCMC laboratory staff at Duke. Adding this capacity will enhance their competitiveness for future external research support.

Global Health Pathway for Residents and Fellows

FOUR NEW TRAINEES JOIN HUBERT-YEARGAN CENTER’S GLOBAL HEALTH PATHWAY

“Rebecca, Neelima, John, and Sweta are talented physicians with diverse clinical and research interests, and they care deeply about health disparities,” said Nathan Thielman, professor of medicine and global health and director of the Global Health Pathway program. “Each will begin to address complex determinants of disease and health in their respective research projects with an eye towards implementing interventions that will make a difference.”

- **John Bonnewell**, an infectious diseases fellow, will research causes of febrile illnesses and deaths in northern Tanzania.
- **Neelima Navuluri**, a pulmonary and critical care fellow, will research the epidemiology of chronic hypoxemia at Moi Teaching and Referral Hospital in Eldoret, Kenya, and explore options to improve capacity for long-term oxygen therapy in resource-constrained settings.
- **Rebecca Lumsden**, an internal medicine resident, will explore the link between pre-eclampsia and cardiovascular disease and mechanisms for early disease prevention through linkage and retention to care in Eldoret, Kenya.
- **Sweta Patel**, a pulmonary and critical care fellow, will study HIV exposure and microbiome composition and pathogen colonization in the nasopharynx among pediatric patients seeking care in Gaborone, Botswana.

GHP by the Numbers

- 11 years of enrollment
- 32 graduates / 11 currently enrolled
- 15 subspecialties participating from 7 departments
- 24 MPH / MSc-GH awarded
- 11 months overseas, on average
- 28 Fogarty Global Health Training Fellowships
- 6 Early Career Development Awards
- 2 Duke CFAR Grants and 2 Fulbright Awards
- 16 graduates with academic appointments
- 2 graduates at CDC; 2 at NIH; 2 Graduates in public health / NGO sector; 5 in Duke Fellowships

“We’re Not in Kansas Anymore…” *(Continued from page 1)*

One night Andrew shared, “Adventures are fun, but they’re also hard.” That’s how our time in Eldoret felt. It was a fun adventure, but there were definitely hard moments. Between my not working for the first time in 10 years, trying to help two little boys acclimate to life in a new country, while learning a new culture ourselves, Andrew struggling to stay optimistic in his work, dealing with the tumultuous re-election, visa worries, and wanting to help people, while never feeling like it was enough – it was not easy. But our time in Eldoret also grew our family in more ways than we could possibly have imagined. We were driving on the wrong side of the road to new places and meeting people from vastly different cultures and will truly never be the same. Because, as with most things in life, nothing can truly prepare you for what is to come - even if you know it’s coming. Especially if you know it’s coming. You simply have to experience it.
The Tappita Community Project
By Liz Petzold

In February 2017, a team from Duke’s Hubert-Yeargan Center for Global Health visited a remote hospital in Tappita, Liberia, to look at healthcare in the region. A few weeks later, a cholera outbreak started and several local people died. Further investigation revealed that families were collecting water from contaminated creeks used for washing and elimination because communities could not afford the cost to maintain functioning wells. As a result, only 30% of the local wells were operational.

The HYC team felt impassioned to act and identified Fred Kermah, a local well expert who lives in the region with his wife and 2 children, to help. Fred previously had a contract to repair the wells, but it was cancelled in 2014 due to lack of funds. With the assistance of two private donors, he received $300 to start his own business to repair and maintain wells in the area. By February 2018, Fred was able to repair 15% of the wells and had secured contracts to service them regularly, including treating the wells with bleach to improve the water quality and repairing parts that malfunctioned. Fred now employs a team of six people to work with him.

Additionally, in the summer of 2017, Dr. Chris Woods, HYC Co-Director, reached out to Duke Engineers for International Development (DEID). DEID is an organization of engineering students who work on projects overseas. Students spend their semesters planning and designing projects with guidance and oversight from Duke Professors, and during summer breaks, implement the projects they have been planning all year. DEID projects are supported by student-led fundraising, as well as donors such as HYC. The Tappita community project was approved in November 2017, and in July 2018, HYC and DEID travelled to Tappita to perform an assessment of the wells. Currently teams are exploring how to upgrade the wells in the community. A team is slated to travel to Tappita in Summer 2019.

Educational Exchange 2017-18

This year, the HYC supported a total of 32 trainees as part of our educational exchange program. We hosted 12 international scholars from China, Kenya, Nicaragua and Thailand. We sent 20 Duke residents from medicine, pediatrics, med/peds, med/psych, and radiology on rotations in China, Kenya, Nicaragua, New Mexico, Sri Lanka, Tanzania, and Thailand.

"When we had a patient that required central venous access, my Nicaraguan co-resident taught me how to place a central line using the landmark technique. I showed him how to place a central line using ultrasound-guidance, which is now standard of care in many developed countries. This mutual sharing of information made my rotation a really interesting and meaningful experience." - Laura Miller, Med-Peds - Mar-May 2018

"I took care of many patients at KCMC who could not afford their medications and who did not show up to clinic appointments because they could not afford to pay transportation costs. Even though I was halfway across the world, I could not help but be reminded of my patients at the Duke Outpatient Clinic, who often face the same exact problems related to their care. My global health experience has strengthened my resolve to try and figure out how to make care more affordable for patients both in low-income settings like Tanzania, and in low-income neighborhoods right here in the US." - Caroline Sloan, Medicine - July-Sept 2017

"Having the opportunity to work with smart, caring people who are willing to do more than what is asked of them to take lifesaving actions for the sake of our patients - this is one of the reasons why I was inspired to go into medicine - and my time in Eldoret allowed me to live that." - Vishwan Pamarthi, Radiology - Jan-Feb 2018

"At Duke, I had a chance to be a part of the team: observing the counseling session and discharging process. The team took time with each patient, let them ask questions and explained the situation he or she had to get through. Moreover, each patient always has a role in making decisions on their own. I would like to make this happen in my workplace back in Thailand." - Tanyamon Kittidumkerng, Medical Student from Siriraj Hospital, Bangkok, Thailand - May 2018
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