Early Intervention is the key to good results

In cleft lip and palate surgery, early intervention is the key to quality results both aesthetically and functionally. Children with cleft lip and palate naturally have difficulty with oxygen uptake, feeding, hearing and articulating (forming speech). Ideally, we like to see children in the first six months of life for their initial operation to their lip and then in the following year for their palate if they have both.

One school of thought is to do the palate first as it is critical to long term function and the mother is sure to bring the infant back for further surgery if the lip has not been closed. In the situation where a team returns to the same hospital year after year and follows up its cases this is less critical.

This is why we make a long term commitment to facilities and their communities. At Las Piñas, we already have a strong working relationship with their dental department and we have the ability in working with our colleagues the Filipino plastic surgeons to refer children to speech pathology.

Delaying surgery past the early years of life and ignoring the interrelationship of surgery with (continued on page 2 column 1)

A Letter from Dr Hodgkinson

News from ORH founder Dr Darryl Hodgkinson:

Since our last newsletter in 2016 Operation Restore Hope has initiated major changes and initiatives extending towards and beyond 2020.

The landscape of plastic surgery and hospital medical providers has changed since Operation Restore Hope (ORH) began surgical missions in the Philippines in 1994.

Our initial hospital at Lapu-Lapu was our base in Cebu, however in 2015 we were informed, not before time, that it would be demolished or possibly refurbished. This led us to explore other options where our services would be most needed and we had long-established relationships in Manila.

Las Piñas Hospital Manila

Las Piñas Hospital in Manila was enthusiastic about our possible assistance to provide (continued on page 3 column 3)
Early Intervention
(continued from P1)
general health and dental decreases the odds of an optimal functional outcome for the patient with any time lost.

Where early surgical intervention is not available simple interventions can make a big difference. For example, teaching the mother to feed the child without sucking with spoons, squeeze bottles where available or cutting a larger hole in the teet of the bottle.

Simple things a mother can do: Other simple things the mother can do to regulate pressure firmly and often on any protrusions (remember a baby’s cartilages are still soft) and regulate tape the lip into as natural a position as possible daily with a clean small piece of tape.

Teaching a child to blow bubbles with a straw or try to blow objects through a straw can also help with the formation of the muscles of the palate and back of the throat and hence other functions including speech.

Education, access to care: Key
As in all areas of health, public education and public access to care are the key. Operation Restore Hope prides itself on its involvement in community health and a commitment to long term quality results that not only look good but that allow our patients to function as productive members of society.

Patient Krenz now married and a father
Krenz Ortiz came by to share his joy and good news. He has a job, is married and was expecting his first child. He has now had a son Jasus Jamir B. Ortiz.

Left: Director Grant Brown with OB/PCMC patient of many years Krenz Ortiz and his father. Below: Krenz and Jasus

Patient Krenz now married and a father

African Mission for Dr Hodgkinson in Zambia

In early 2017, I found myself in Lusaka, Zambia, Africa where I was invited to be part of the faculty of 2nd Chance, a Swiss organisation headed by Swiss plastic surgeon Pierre Quinodoz and Spanish plastic surgeon Alberto Musolas.

I participated in the week-long advanced workshop both teaching and operating in Lusaka, Zambia. Local plastic surgeon Dr Goran Jovic hosted the course in conjunction with Dr Seke Kasuma.

Teaching and operating
We conducted 2 days of teaching lectures with examinations and then 3 days of surgical operations on very difficult cases of cleft lip and palate as well as severe burn contractures and facial deformities. The participants of the workshop were young surgeons from Zambia, Ethiopia, Malawi, Tanzania, Uganda, Zimbabwe, Mozambique, Democratic Republic of Congo and Rwanda. At the end of the 5 day session successful participants received a certificate of their participation and examination results.

Dr Goran Jovic was most generous with his time and gave very important tips on the pre and post-operative management of these most difficult cases. Dr Musolas has devoted his surgical life to managing and understanding severe burn contracture and his work is unique.

Dr and Mrs H meet a little patient and his mother at the clinic in Zambia

Infant patient with a unilateral cleft lip and his mother at the clinic in Zambia

Dr Alastair D’Vaz
Dr Anton Fries

Dr Alastair D’Vaz and Dr Anton Fries have been with Operation Restore Hope in Cebu and will continue as senior anaesthetist and senior surgeon respectively.

We are also furthering our support of senior craniofacial surgeon Dr Taps Gurango with the many children with serious craniofacial deformities whom she is operating on in collaboration with Operation Restore Hope. This has been ongoing for over 5 years. ORH is also investigating building additional operating space much needed at Pangasinan in northern Luzon where we have previously made an exploratory visit.

Mr Grant Brown has enthusiastically endorsed his role as Director and Mission Coordinator of Operation Restore Hope.

Dr Taps Gurango

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Mr Grant Brown

Patient Krenz now married and a father

African Mission for Dr Hodgkinson in Zambia

“Patchwork” undesirable
We do not agree with the “patchwork” surgical programs which fly-in and fly-out operating on large numbers of patients who have not been worked up, are unwell or have very bad dental carries. Successful surgery requires careful pre-screening for these difficult operations to ensure that the patient gets the best possible surgical experience with minimised chance of wound breakdown and infection.

Great Local Help
We were very privileged to have local plastic surgeon Dr Sandee Tan work with us and we also had visits from plastic surgeon Dr Joseph Acosta. We look forward to continuing to work with them both when we return in June.

Ten Year Affiliation
Las Pinas Hospital has agreed to a 10 year affiliation with Operation Restore Hope and we are hoping for long term financial assistance from sponsors to achieve this goal.

Letter from
Dr Hodgkinson

services for underprivileged children and adults with plastic surgical problems particularly cleft lip and palate which have a high incidence in the Philippines. Our core team of myself, administrator Katherine Hassler, anaesthetist Alastair D’Vaz, surgeon Anton Fries and senior nurse Susan Slater evaluated nearly 60 patients over March 6th & 7th.

40 patients scheduled
Of the patients evaluated nearly 40 have already been scheduled for surgery and the remaining patients have had a clear path for improvement of their condition, mainly speech therapy and dental work. These 40 patients are being prepared for surgery in early June 2017.

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We recently donated a video laryngoscope to the Philippine Children's Medical Center in Manila. This was critical for the difficult intubations especially for our two little girls with oro-mandibular hypogenesis syndrome.

Because of this, Operation Restore Hope also tries to provide the tools necessary for our colleagues that we collaborate with to operate. Donation of equipment and instruments is a very important part of what we try to do and it allows our colleagues in the Philippines to carry on work throughout the year, not only during missions.

We try to respond to requests for equipment in the most cost-effective, efficient manner, seeking donations first, reconditioned medical equipment second and better pricing on new equipment required.

The cost to Operation Restore Hope Australia to repair a facial cleft is approximately $500 AUD per operation. The more donations we receive, the more children we can help.

No funds received are spent on administrative, accounting, advertising or infrastructure costs. All membership fees and donations are spent directly on surgery performed.

You can also become a Life Member of Operation Restore Hope Australia for just $100 per year. Your fee or donation will help fund the cost of a child's surgery.

Donations over $2.00 are fully tax deductible and are payable to “Operation Restore Hope Philippines Relief Fund”.

Memberships are not tax deductible and are payable to “Operation Restore Hope Australia”.

Enclosed is my $100 Lifetime Membership fee
Enclosed is my $20 Annual Membership fee

TOTAL PAYMENT: $ _______________

Method of Payment:

Cheque enclosed
Credit Card No.
Expiry Date
Signature

Name
Address
Email
Phone

Dr Hodgkinson donating a diathermy machine to Dr Taps Gurango to aid her work in Manila.

Our Sponsors:

Don't forget, our new book features the ORH 20 Year Reunion!

Our new coffee table book makes a great souvenir or gift. "Operation Restore Hope 20 Year Reunion" has photography generously donated by internationally recognised photographer Andrea Francolini. All profits from the sale of the book go directly to the children.