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# Where Surgeons Reconstruct

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Special to The New York Times

SAIGON, South Vietnam, Aug. 30— This is not a good place to ask questions.

There is the critically burned Cambodian boy, whose charred body weighs less than 100 pounds. He cannot explain why his village in Kompong Cham province was bombed.

There is the 20-year-old Vietnamese girl without a nose who keeps a little picture of herself to prove that once she was pretty.

There is the 15-year-old Vietnamese boy, without legs, who has had nine operations in four months because he walked over a Vietcong mine.

There is a tiny paraplegic boy curled up in one of the 54 big American hospital beds.

There is a 10-year-old boy who had a phosphorous bomb explode in his face, but who now has a mouth again.

The children will all explain what happened to them if you ask. But none can ever explain why. The children of Vietnam who have been most hurt by the war understand it not at all.

They are some of the patients in the one place in South Vietnam where they can be helped. It is the Center for Plastic and Reconstructive Surgery in Saigon, which was built and is run by Children's Medical Relief International, a private foundation in New York City.

The center is also called the "Barsky Unit" by the Vietnamese in honor of Dr. Arthur Barsky, the 72-year-old surgeon and professor emeritus of plastic surgery at the Albert Einstein College of Medicine in New York, who is president of C.M.R.I. It was Professor Barsky who years ago brought solace to young women of Hiroshima burned by the atomic bomb through the Hiroshima Maidens Project.

## War Injuries and Malnourishment

Thirty, perhaps 40 per cent of the children (the average age of the patients is 8) in the Barsky Unit are direct war casualties. The others were badly injured in other ways in a country that has been smashed and rattled by the war. Some of the small patients have congenital deformities or gaping holes in their faces from a dread disease called noma, common among the malnourished poor.

Approximately 1,200 patients are treated here every year, with about 150 major operations performed every month.

Choau Si Men, the Cambodian boy who does not know his exact age or the name of the country where the hospital is, has bad dreams.

"My father does not know where I am—I see him often in my dreams," he said, speaking his language Khmer. He cannot move his mouth easily and the voice is a rough whisper. "In these dreams my house is still there, in Kam Doul Kroun village."

Two, usually three, nurses were required to take care of the Cambodian boy when he entered the Barsky Unit in May. It took up to four hours to change his dressings. No Vietnamese hospital can provide either the intensive

care facilities, the appropriate surgical and laboratory equipment or the staff. This is also the only modern surgical teaching hospital in South Vietnam.

At the Barsky Unit, which has a total staff of more than 80 persons, there are 21 Vietnamese nurses and seven foreign nurses, including Americans. The Vietnamese nurses are poorly paid by the Vietnamese Ministry of Health, which has fixed their salaries. Last year, many were not paid at all for six months.

American and foreign doctors and plastic surgeons—who have come from 16 countries—have worked at the Barsky Unit. One of them was Dr. Lester Silver of New York, a plastic surgeon at the Albert Einstein Hospital.

"Such a horrible mess has been created in Vietnam that there is a lifetime of work here for a plastic surgeon," 34-year-old Dr. Silver said.

## Unlike American Children

"There is a very large difference between Vietnamese children and American ones," he added. "Here the children are more tolerant and accepting. They're at the opposite end of the scale compared to the neurotic, well-to-do child in the States who comes in with a psychiatrist. The six months I spent here were the most satisfying of my career."

Dr. Ho Chung Tu, 25, now in his sixth year of medical school, worries about what will happen to the Barsky Unit if American funds are cut off, as United States Agency for International Development officials here have indicated, and what will happen if foreign surgeons no longer feel they are needed.

"Then, this center will quickly fall down to the same level of all other Vietnamese hospitals," Dr. Tu said. "That means deplorable."

"The presence of foreign surgeons here will be necessary for many years to come—their being here is very precious," he added.

Children's Medical Relief International was established in 1967 in New York by Dr. Barsky and a young lawyer named Thomas R. Miller, who is now executive director. It created the Barsky Unit on the grounds of the Cho Ray Hospital in the Cholon section of Saigon, opening it in July, 1969.

"We have been accused of developing an unrealistic level of medical care, but our experience has been that the Vietnamese, given a chance, have the desire and can develop the technical skills necessary to maintain good standards," Mr. Miller said. "The underlying problem is a financial one."

A former Peace Corps advisor in Africa, Mr. Miller gave up his practice with a law firm in New York City to run the C.M.R.I. project.

"Americans with A.I.D. seem more concerned with pacification than war casualties," Mr. Miller said. "One told me that there was no public concern for civilian war casualties in the United States any more, so funds were being switched to pacification. Now we face the possibility of drastic reductions in our funding at a time when the center should be put on a firm financial base

## Bodies

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## — and Lives

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## — in Vietnam



Denis Cameron

Special hospital center in Saigon is called on to handle all sorts of patients: Le Van Vinh, 10, left, was injured in traffic accident; Nguyen Tan Hoang, 10, was burned by phosphorous bomb; Tran Van Rang, 16, had nose reconstructed after being hit by artillery fire, and Doang Quang Trung, 15, burned by a flare.

to meet the ever growing need.

"Many patients will require operations continuing over periods of five, 10 and 15 years," he continued. "It has been a constant battle to keep going."

There are all kinds of battles in the Barsky Unit and it is the children perhaps who fight the cruelest ones.

Nguyen Buoï, whose legs have been amputated, is 15. He lived in Son Quang village—near the site of the Mylai massacre—in the province of Quang Ngai. His father, an anti-Communist, was shot to death by a Vietnamese in the home guard in March, 1970, who blamed it on the Vietcong. The boy left school to work filling sandbags for American troops. Then he began to sell soft drinks to G.I.'s. One day in July, Nguyen Buoï stepped on a mine.

"After the explosion I only lost consciousness five minutes later," he said. "When I opened my eyes again I was in Chulai, at an American military hospital, with both legs gone.

"The idea of killing myself has always been in my mind since that moment. Even now I am not sure when I will commit suicide. I am completely useless, you see. Instead of helping my mother to raise my two younger brothers, I am a burden to her."

"This is not for me. I wish peace for others so none of them will have to suffer as I am suffering."

The nurses knew when he was in pain, not because he spoke of it, but by his face. One of them is Mrs. Elizabeth Ferrer, formerly chief operating room nurse at the Albert Einstein Hospital, who is now the hospital administrator.

A seemingly stern, intensely busy woman, she is never too pressed to try and comfort the most helpless and small patients, like 4-year-old Nguyen Van Dep. He was burned in January, 1971, when a kerosene lamp in his home caused a fire.

The American nurses seem larger,

stronger and crisper than the Vietnamese girls. Miss Tran Thi Hong, the deputy head nurse, who is 26, wanted to become a doctor but there was not enough money in her family to enable her to go on studying.

"With almost two years' experience in nursing here I am still shocked at seeing a new patient with his face or body burned," Miss Hong said, in Vietnamese. "The shock is much worse if I learn that the patient is a victim of the war. But I don't have much time to worry about the war. There is my duty to the hospital and my worries about my family and money."

Her mother sells coconuts in Kien Hoa province. Miss Hong has three younger brothers and seven younger sisters. She is only paid 9,960 piasters (about \$36) a month by the Ministry of Health.

There are often empty beds in the Barsky Unit—which cost nearly \$750,000 to build. There are three operating

rooms and a 280-volume library, which is the only one of its kind in this country.

"There are not enough nurses to take care of patients," a Vietnamese intern explained. "It is certainly not because there are not enough patients. The nurses are more poorly paid here than in private hospitals but they have more work to do here."

The head nurse, Huynh Thi Lien Huong, who has visited the United States, speaks quietly of what the war has done to her country and its people.

"An American nurse can take care of 20 patients while a Vietnamese nurse can, at most, take care of 10. It's a vicious circle for us—we grow more tired every day. After a day's work, I always feel as if I am dying of exhaustion. With our salaries, how can we have proper food?"

Patients in the Barsky Unit are first selected at one of the 10 regional clinics in South Vietnam. Dr. John Champlin, a physician and surgical assistant who was on the staff of a San Francisco hospital, travels relentlessly. So does his assistant, a 26-year-old social worker named Le Nuoi.

He and Dr. Champlin visit about 10 hospitals a month, and travel to the provinces to pick up and bring back patients.

### Salary Unimportant

Le Nuoi does not care what he is paid. "I don't count my salary for the money is in an envelope and I just take the envelope," he said.

"There have been kids four or five months old that I have had to carry in my arms," Le Nuoi said. "Medically I am not a great help but I really have a love for these poor children. I don't think of my future—as long as I live I will only do social work."

The center serves as a model for South Vietnam not only in surgery, but also in anesthesia, nursing, hospital records, blood banking and hospital administration.

"While civilian war casualties still occur at a high rate," Mr. Miller said, "there are reportedly only 400 civilian Vietnamese doctors for 14 million civilians. All young doctors must go into the army."

"There is only one fully trained Vietnamese anesthesiologist for the entire civilian population," he added. "Deaths due to poor anesthesia in provincial Vietnamese hospitals are as high as 30 per cent. The center has never had an anesthesia death after thousands of major operations and has much to offer doctors and nurses interested in anesthesia technique."

Then he cites the comments of an A.I.D. employe in Saigon who was on a fact-finding committee investigating the budget requirements of the Barsky Unit.

"You can judge his level of understanding by what he told me," Mr. Miller said. "Describing himself as a hospital administrator, he said, 'Why are you so concerned with anesthesia? In the hospital where I come from they use a ball of cotton and a can of ether to do the job!'"