



Newsletter, June 2010

PINCC Enters Its 6th Year With Great New Horizons

2010 marks a new threshold for PINCC as we move into our sixth year. Our goal, helping stem the scourge of cervical cancer in neglected areas of the world, is succeeding in ways we never thought possible!



Dra. Miriam Urbina, MINSAs Women's Health Director, with PINCC volunteers Larry and Maggie Shushan

Our just-completed campaign in Latin America demonstrates this amazing growth. In El Salvador, where we have been training for 3 years, MINSAs (the Ministry of Health) has joined with us to set up trainings in 3 clinics, as well as including their Health Education staff to learn our technique. The enthusiastic 22 doctors and 19 nurses had examined an average of 100 women each since our previous visit, and brought in over 250 women for treatment. We were able to certify many health workers in each location. We donated 2 cryotherapy sets, having left one on our previous visit; now all 3 centers have this treatment capability. This time, we also began training 2 gynecologists to perform LEEP electrosurgery for severe disease. On our next visit, we will donate the LEEP machine, and the clinics will be independently able to see and treat even severe cases of pre-cancerous dysplasia. Currently, women wait 6 to 18 months for an appointment in the central San Salvador hospital, and must frequently return several times to get treatment.

This is a major reason for the high rates of cervical cancer in El Salvador, as women are lost to follow-up. At the closing conference, the Vice-Minister of Health, Dra. Violeta Menjivar, spoke and gave each of our wonderful team a written commendation for our work here. It was such a proud moment for all of us! MINSAs is already planning new sites for training.

The PINCC team in Nicaragua

We then moved to Nicaragua, where we have been working in small clinics for 4 years, and recently working with Dr. Alvaro Garcia, head OB/GYN for Managua's Berta Calderon Hospital and residency program, to train centers in Ocotal and Jalapa. This visit, we also were invited to lecture and demonstrate at the University of Leon's hospital and medical school, explaining and demonstrating our program. They were excited and welcoming, and asked us to start training their professors and residents on our return to Nicaragua in November. This is a great way to increase the use of our protocols, sending doctors out after their training already equipped to start such programs in the areas they will serve. We left some equipment, and will bring more to supplement the University's current incomplete LEEP machinery.



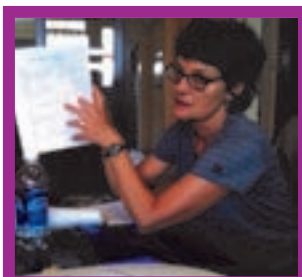
Our biggest challenge was beginning our mission in Peru. We were asked to come by Pathfinders International, a wonderful organization working here for 30 years on women's health issues. There was much confusion working both with Pathfinders (at Medisol, left) and the huge Institucion Nacional Materno-Perinatal in Lima, coordinating doctors' schedules, finding space for training and understanding expectations. This isn't unusual at the beginning of a campaign, and we finished with all parties anxious to continue training and work more efficiently on the next visit. The cervical cancer death rate is even higher here than in Africa (42 per 100,000) as well as a rapidly rising HIV rate (28% in Lima!), so we feel a real need to help stem the terrible tide of unnecessary deaths among women here.

Cheryl Brown, NP, on Volunteering with PINCC in Central America

I am a Nurse Practitioner in Women's Health, and this was my second trip as a PINCC volunteer. Although I have traveled quite a bit over the years, for me this was a real highlight. Experiencing a developing country is so much more meaningful when you actually can contribute something in the process. I have been doing women's health for 20 years, and have always loved connecting with women around issues that matter so much to us all. This experience has been very direct and very gratifying. What a privilege to be able to treat (for free) these patients who so clearly need our services and were so appreciative of them. Beyond that was the satisfaction of knowing that we left behind doctors and nurses with the training and equipment needed to continue the work at each site.



Women Weavers in Peru



Cheryl Brown teaching

One of the most remarkable moments in the trip was in Jalapa, when the "Jalapenas" visited us at our hotel. This remarkable group of women is taking charge of the health care of their sisters in Jalapa. The Foundation for Women of Jalapa had been formed to advocate for patients, and to assist those who might need to go to towns far away for treatment. These women "joined our team" for 2 days, and assisted us with interviewing many of the patients we saw in Jalapa, Their dedication were truly inspirational.

Finally, a few words for those who may be considering your first trip with PINCC: Take your spirit of adventure. The electricity goes out, the water runs low, you can't always shower when you want to, and you may have to interrupt your busy workday and rush outside, because someone must fog for wasps in the middle of your clinic....you're not in Kansas anymore! Expect to be asked to do things you've never done: teach a class in a technique you yourself just learned yesterday, tactfully show a practicing MD how to do a decent breast exam, or set up 4 "exam rooms" from just supplies you have brought in a suitcase.

If you are looking for a challenge in the context of a committed team of people who are going all out to help each other and care for some of the most deserving and least privileged women on the planet, PINCC offers just that. I guarantee you an unforgettable experience.

Joy Carlson on working in Africa, Feb. 2010

My first trip to Africa and my first volunteer trip with PINCC, February 2010. Seven strangers gather, 2 ob-gyn's, 1 nurse mid-wife, 4 non-medical personnel all hailing from different parts of the world: California, Texas, the Netherlands, South Africa, and Kenya. We arrive in Kitale, Kenya to continue the work PINCC began at the District hospital last year. We hit the ground running and are working together as if we had done so for months. We train 10 nurses and 3 doctors and see hundreds of women, learning from each of them as we are teaching and screening. I am struck by the physical and emotional strength of the women we serve: the challenges they face, and their courage to seek out this screening program. Most have never had a pelvic exam.



Joy Carlson sings with a patient

One of my favorite things to do, when time permits, is to be with the women as they undergo a cryo or LEEP procedure. They are often anxious and afraid. So we talk about their families, their lives, their children. And often we sing together, holding hands, creating sounds that peacefully waft throughout the exam room, over and around the nurses and doctors being trained, and back around to us. And then the procedure is over, and the woman is cured. We go on to Semuto and Kayunga in Uganda, and to Shirati and Bukumbi in Tanzania. Always the need is greater than we can fill; always the keen interest. This experience is unlike any I have ever had. I look forward to more.



PINCC will return to Africa in August and September, 2010, for 4 weeks, to continue work at 4 sites and begin training at two new clinics in north and west Kenya. Our Walk for Women of Africa, August 14, is to raise the needed \$20,000 for this important campaign. Please join us! Sign up on our website: www.pincc.org

Rhoda Nussbaum, MD and John Adams, PhD, on India

We will be leaving for our third medical mission to India next month. We will continue training more of the 30 Gynecologists volunteering with the Sri Sathya Sai mobile clinic in Andhra Pradesh and begin work with doctors and nurses at the Prerana Women's Health Clinic in Mysore. We feel very lucky to be able to do this work. In 2009, we have trained 19 doctors, and screened and treated over 700 women in 12 poor villages, most of whom had never had an exam before. We'll be helped by another volunteer gynecologist, and her 16-year old daughter, who will keep records and supplies in order for us.

PINCC is a volunteer organization with a very small staff. Volunteers, both medical and lay, pay their own way. It is a beautiful model. One of the harder parts of our responsibilities is to raise funds necessary for the work to continue. Please consider whether you can reach out to these less fortunate women with a regular gift to PINCC.



Dr Nussbaum, right, with PINCC founders Pat Sax and Dr. Taylor, are greeted by Indian gynecologists at the Mobile Clinic.



Carol Cruickshank, right, consults with Latin America Trip Leader Dr. Melissa Miskell (L)

Director's Report: Dr. Kay Taylor

One of the great things that's happened for PINCC this year is finding some wonderful people whom we've brought on staff. Without them, our expansion just wouldn't be possible. *Carol Cruickshank*, a nurse-midwife with great experience and skill in organization and teaching, is our new Program Director; and *Joy Carlson*, herself a veteran director and consultant for non-profits, is our half-time Associate Director. We have a terrific MPH intern for the summer, *Emily Riggs* from UC Berkeley, and several more volunteers giving some time every week to keeping things running smoothly. We have also added several great people to our Board of Directors, and have 2 more gynecologists committed to leading regular training campaigns.

Our main problem now is raising the funds we so desperately need to continue. Even though our volunteer teams pay their own way, we need to get our leaders to the sites, buy equipment and supplies and pay our much-needed half-time staff. Our budget needs over the past two years have doubled, as we've added new clinics to train and the people to manage them. We'll work in 14 clinics and 7 countries this year, training more than 50 medical workers!

It has been a hard year for non-profit funders, but we have been lucky to receive several small grants. Our favorite is the *Temple Isaiah Seventh Grade Fund Grant*, which gave PINCC \$5,000 to supply equipment to an African clinic. The youth of this class all donate their Bar and Bat Mitzvah money to help a non-profit cause. This year, they chose health care, focusing on prevention and treatment. Along with 25 other organizations, we were interviewed by the Board, consisting of the entire 7th grade class, We are honored to be the recipients of the thoughtful generosity of these leaders of tomorrow.

We must rely even more this year on you, our individual donors, who have supplied 90% of our funds. If you can commit a small amount per month, or a quarterly donation, we can send you a year-end tax letter.

We hope you'll continue to help us bring care and services to women in need around the world, and leave sustainable programs to continue fighting cervical cancer in their communities.



Here are some examples of how we put your donations to work: Girls make swabs for their mothers' exams in an Andra Pradesh village, India

\$25 a month for a year will supply a set of medical instruments to perform exams and tests in a clinic.

\$50 a month for a year will train a medical worker to provide VIA and cryotherapy, a legacy that will treat many more women over the years.

\$100 will allow us to educate, examine and treat 7 women for pre-cancer of the cervix.

***Angels* : If you can provide one of the needs below, it will go to a clinic as a gift from you personally, and you will receive an Angel Book with the clinic's pictures:**



\$1,000 will provide a large nitrous oxide tank and gas that can be refilled at low rates for cryotherapy treatments, to treat 80% of women with dysplasia.

\$1,500 will provide the cryotherapy equipment to a clinic or hospital, ensuring their ability to prevent this terrible disease in their community.

\$3,000 is needed to donate LEEP electrosurgery equipment!

PINCC team donates a cryogun to Kisoro Hospital's newly trained clinic in Uganda, 2008

We rely on you, our ambassadors, to help us grow.

So, tell a friend, forward this newsletter, or post our website on your Facebook page or blog. We have a great film on our work in Africa, done by filmmaker Emiko Omori, which you can see on the website, or call us for your copy for \$5.00. If you can have a PINCC party, or want to join us on a trip, call Gwen or Pat at 510-452-2542.

Many thanks to each of you, our loyal supporters!

Sincerely yours,

Kay Taylor, MD,
Executive Director, PINCC



Emiko films Dr. Kay teaching in Kenya