As we were readying this newsletter to send out, I received the tragic news of a massive fire in Belen on December 20th that has destroyed over 140 houses, leaving more than a thousand people homeless. As you know, this year has been a difficult one for the people of the Amazon with historically high floods in April and May that sent thousands of people to live in tent cities for several months. Now, just as most have finally finished repairing their houses from the flood damage, the fire has burned them down. I cannot imagine the desperation each family is suffering nor the hardships they are enduring at this moment, but Amazon Promise will be there to provide Aid in any way we can.

From the desk of Patty Webster

Fires, Floods, Outbreaks, and a time to celebrate!

In 1993 Amazon Promise (then Rainforest Health Project) brought its first investigative team into remote villages of the Yarapa and lower Ucayali Rivers to assess the health needs of the communities there and provide basic medical care. Armed only with a copy of the book ‘Where There Is No Doctor’ to guide me, I found myself the only source of medical care for miles around. It was a frightening thought for me and the people in the villages whom I’d become so close to!

We were complete novices at what we were about to take on, but we knew that what we were doing was right, answering a desperate call for help from thousands of people living and dying in remote villages of the Amazon with no access to medical care. I certainly wasn’t thinking about the future or even how long I would do it. It was clear the need was urgent.

Rule #1 for anyone dreaming of starting a relief organization…..Make sure you have at least a million dollars to start, not $450!

Certainly, back then it would have been helpful to have even a tenth of that amount, but it’s a different world today, and the cost of helping the poor and reaching people in need in remote places has gone up considerably. When we first started, to see a hundred people a day in a large village was considered a record high. We’d be elated (and exhausted) having worked into the night seeing patients using flashlights. Seeing a hundred people in a clinic today is considered a slow day for us. It’s not uncommon to see two or even three hundred people
now. Over the years, we’ve created a remote clinic system that is very well organized and allows us to set up anywhere at any time, whether we’re in a poor neighborhood on the outskirts of Iquitos, or in an indigenous village deep in the jungle. People write or show up at our office in Iquitos, bright eyed and idealistic, with an honest dream to go out and bring medical care, water systems and toilets to help relieve sickness and save lives. It’s inspiring to say the least, but I always start out by telling them about ‘Rule #1’. I’m more than willing to share my knowledge of how to get around in the local system, but at the same time, I think about all the suffering and mistakes we had to experience along the way, and how unfair it would be to deprive anyone of the same learning curve. When we started out there was no one to ask what pitfalls to avoid, how to get legal documents and licensing processed with the Ministry of Health and Peruvian Government, or what was culturally acceptable (or more importantly, not acceptable) in indigenous villages. Those are things you only get to learn through firsthand experience.

Don’t get me wrong, we still make mistakes on every single trip, but we have gotten pretty good at covering the basics and at this stage we usually only deal with the ‘impossible to predict’ scenarios. One thing that is quite predictable though is that all volunteers can expect an adventure! Going into our 20th year of providing medical, dental care and health education to thousands of suffering people in the Amazon each year, I’m proud of our work, I’m proud of our staff, and I’m proud to have you with us to keep it going.

Thank you!

Patty

Every year we act as patient advocates for many of the people we see in clinic or those that have traveled for days to arrive at our doorstep in Iquitos in need of hospital care. Being turned away at the ER and denied urgent care for lack of a government issued ID, or DNI, is unconscionable. Yet it’s a very concerning and growing issue. To get a DNI you must have a birth certificate. In many cases, people who are born in remote jungle villages have never been registered. Frequently, a birth certificate is not even enough, and those seeking treatment are turned away for lack of a witness to vouch for their identity. (See article by AP Administrative Coordinator Rosa Aranzabal below). Thankfully, we work with local doctors, and DEMUNA, the child protection agency in Iquitos, who are willing to take the extra steps to ensure people with urgent medical conditions receive the lifesaving care they need. Rosa is also there to bring them to the hospital and has become a strong voice on their behalf.

ACTIVITIES IN IQUITOS BEFORE AND AFTER MEDICAL CAMPAIGNS
Rosa Aranzabal
Amazon Promise Administrative Coordinator

I’m Rosa Aranzabal, Administrative Coordinator for Amazon Promise in Iquitos, and I would like to share some of the activities I been doing in the city while awaiting the next Medical Expedition.
This past May while on my way to meet with a family in one of the village communities Amazon Promise works in, I went through Nauta, a small city approximately two hours from Iquitos, where people know about our work in the villages. There, I met with a family with a 6 year old daughter, Saby Salinas Aspajo, who had been sick for a while with a very high fever. She was seen at the local hospital, and the physician there gave her medicine for malaria. The medicine did not work. Then they gave her Gentamycin, and she developed a reaction: her eyes were red, her mouth full of blisters, her body looked red and inflamed like a sunburn, her voice was weak and she still had fever.

Her father Guillermo, who was a promoter of health from the village of Jaldar, told me that she was discharged from the hospital without medicine and that they were worried because she was getting worse. I did not have an AP medical team or any doctors with me, but I decided to accompany the family to the hospital. There I introduced myself as a representing of the NGO, Amazon Promise, and told the doctors about the work we been doing in the area for many years. I asked them to check the girl again, emphasizing patients’ rights. Thank God they decided to see Saby and admitted her to the hospital for few days. We offered the family any medicine they may have needed for her care. The next time I went through Nauta I was with an AP medical team and the doctors were able to check her. The girl was much better and getting her voice back little by little. We provided vitamins for the entire family.

I was so glad that the hospital listened to me as a representation of Amazon Promise. Sometimes we have the opportunity to be the voice of the silent people who don’t know their rights.

BABY FROM A COMMUNITY: In May I was providing hygiene education to women and children in different communities around the Momon River, and a woman came up to me with a two month old baby. I was alarmed when I saw her and knew that she was severely malnourished. But I am not a doctor, so I decided to bring her to the nearest medical post, one hour away from her community. There the nurse told the mother that her baby needed to be in the hospital.
Unfortunately, no one in the family had documents: no birth certificates, ID, insurance, and no money to travel to and stay in the city. I was told by some villagers that the baby was a product of incest by the uncle, and that two children in this family had died before; however, no one was registered and authorities never knew about it. This situation is far from uncommon.

After approaching several different government institutions to find the support for the baby and receiving no positive responses, I found out about DEMUNA, an institution that protect babies, youths and teens. They listened to my concerns and sent their social worker and nutritionist to see her. Together we took the four hour boat ride to reach their community and then brought the baby to Iquitos. After obtaining the necessary legal documents, the baby was admitted to the hospital. I thought I was finished with my part, but at 1:00 a.m. that night, the social worker knocked at my door and asked me for money for medicines that the baby needed but the hospital didn’t have.

The next day, the doctor said that the baby’s hemoglobin was 5 and she needed a blood transfusion. I offered my blood, but the hospital wanted to charge me S/. 150.00. That didn’t make sense to me, but I was told that without insurance somebody had to pay for the transfusion costs. After that I was there every day. Sometimes the mother did not have anything to eat, and every day the baby needed more medicines, lab tests, or x-rays. Amazon Promise provided with medicines and special milk for the baby.

I am happy to say that the baby is doing better now.

She was sent home, but needed to come back soon after for a checkup. While she was in the city, I tried to help the family get their documents but it was very hard. Even with help from some understanding people in different institutions, the laws sometimes work against those who are truly in need and don’t have the money to help themselves.
Completing the Circle
From a Little Boy in the Amazon Jungle to ER Nurse in the US
By Edward Heath, RN

When I was a little boy I had a dream that I was a great doctor. When I woke up I realized I was living with my very poor parents in a hut along the banks of the Yarapa River, deep in the Amazon Jungle of Peru. My parents could barely afford to take care of my other eight siblings. I eventually decided that moving out of the jungle to study in the city of Iquitos was the only way I could hope to have a future. Even though Iquitos is over a hundred miles away, my parents agreed to let me go and sent me to live with an Aunt. It was really hard to study and work at the same time but I had no choice. I wanted my education.

In hindsight, moving to the city was the best decision...eventually I met Steve Heath, a frequent volunteer with Amazon Promise who had gotten to know my family on the Yarapa quite well. Steve adopted me so that I could come to the US to further my education and have a future.

I explored everything I could about different professions, and felt a strong need to work with people, to help others and make their lives better. I decided that a career in nursing was the best fit for me!

While attending school in Illinois, I worked and volunteered in different settings, and even went on a short medical mission to Mexico. Seeing the poverty and desperation made me think about the needs of my own people back in Peru.

After graduating Nursing School in 2010, I went back to Iquitos and met with Amazon Promise President, Patty Webster. She invited me to work with the Amazon Promise medical team in the clinics they were holding in Belen and Masusa that week. This was a great experience for me because it allowed me to see how I needed to better prepare my skills for nursing. While I was in school I always heard the professors say the real learning is done out in the field. Now I was able to understand what they meant. I realized I needed a lot more experience if I wanted to take care of my people. I headed back to the US with my mind set on working hard and returning to Peru as an experienced medical volunteer. I was fortunate in finding the best fit, working in the ER.

I received several certifications including Advanced Cardiac Life Support, Pediatric Advanced Life Support, Trauma Nurse Certificate, Emergency Communications Registered Nurse, among others.

I was ready to return to the jungle clinics as a professional, and in May of this year my father and I returned to Peru to volunteer as part of the remote AP medical team in native Awajun Indian villages of the upper Maranon River. I had butterflies in my stomach at the thought of my dream to help people back home become a reality!
Four plane rides, a six hour bus ride over the Andes Mountains, and an hour and a half helicopter ride later, I arrived with the team at the Petro Peru oil base 5 near Saramiriza. This is where we started our remote jungle medical trip. After a few hours of rest, we took another helicopter ride deep into the jungle to the first village of our mission, Napuruka. Thru the window of the helicopter I could see the people eagerly waiting for us to land. Both women and men were dressed traditionally and had painted their faces with bright red achiote plant dye. The men wore feather crowns and carried spears.

After all the supplies were taken out, the helicopter left us. We were on our own! This trip was bringing my long voyage all those years ago, back to where I started. I could never begin to describe the feelings I had once I started working with the patients and the Amazon Promise team. I could hardly sleep most nights because I was enjoying the work, the people, the culture, and the beauty of the rainforest. Don’t get me wrong, the work we did was very physically and mentally exhausting, but thanks to Patty and the rest of the AP staff, we were able to get through it.

In every village we visited, Napuruka, Sacha Papa, Atahualpa, and finally Santa Rosa, many villagers came up to me and asked, “how come you speak English and not Awajun?” When they found out I too was from the Amazon, they seemed more willing to trust me. Gaining their trust made me feel like I was back home again.

I thank Amazon Promise and all the staff for making my volunteer experience possible. A story like this happens rarely; a little boy from the jungle, now a little man from the Midwest, is able to go back to his home country and help others. I hope my story inspires others to volunteer in Peru and other parts to make the world a better place.

Volunteers Wanted for May and Sept.

We have openings for our two week May remote and three week September medical expeditions. Whether you are a medical professional, student or simply looking for a giving and rewarding experience of a lifetime, we have room for you! The remote May medical team travels to native Achuar, Quechua or Awajun communities. Because these areas are in more remote regions of the Amazon, teams are limited to 8 volunteers. All volunteers must be in good physical condition, have camped in rough terrain, and be very low maintenance!

The September medical trip includes clinics in the poorest areas of Iquitos and Belen, traditional medicine, and 12 days at Yacumama Lodge serving the needs of jungle villages in the Yarapa River area near the start of the Amazon. Come for part or the entire 3 week trip. Contact Jackie: Jackie@amazonpromise.org
Alumni Report - A Blast from the Past!

Drs. Dan and Lindsay MacDougall

For about 20 years Amazon Promise has developed, changed, and grown into an organization that not only provides health care to many but also gives others the chance to experience adventure, beauty, and the opportunity to care for indigenous people, who otherwise may have no reliable medical care.

My wife Lindsay and I have been on three separate excursions with Amazon Promise, each led and supervised by Patty Webster and her very experienced Peruvian team. Our first trip as physician volunteers was 16 years ago. At that time we were introduced to Amazon Promise and have followed its path since. Our second trip was Amazon Promise's first remote trip to the Pastaza River. This trip was preceded by a jungle survival school taught by the Peruvian Air Force (an interesting and informative adventure in itself). The trip involved traveling down river camping in villages, conducting health clinics, and having memories impressed in our minds that are some of the best of our 25 year career of medical volunteer work.

We will always remember some special people and experiences. First, of course, is Patty Webster. She provides leadership, logistics, and companionship backed up by her team. We will always admire the efforts and hard work and friendships of Rosa, Jose Luis, Segundo and his boys, and Louisa. Without them we never would have had the sense of security and understanding of the culture that we experienced. We also cannot forget the tragic cases of snakebites, undiagnosed skin conditions, numerous acute and chronic diseases, parasites, and the ravages of hard work and old age. But with these come the satisfaction of the relief and even cures provided by the various levels of medical personnel on each trip.

Most recently, how could I ever forget the teenage girl who came complaining of burning eyes. There was nothing wrong with her exam but I gave her an old plastic pair of sunglasses. Unforgettable is the great smile she exhibited wearing those blue, bug-eye glasses each day. Later Lindsay saw an elderly man whose complaint was aching joints (mostly due to his age and years of hard work in the fields.) After an exam, she gave him a supply of naproxen. The next day he...
returned with a big smile claiming that he had not felt so good since he was a young man.

There are so many more memories that come to mind:

1. I remember visiting the floating city of Belen where the poor live and take their drinking water from the same polluted river.

2. There was the day we sat on a hillside listening to a Peruvian doctor discussing snakebite when the crew clearing the area nearby stirred up a viper, which was filled with living young!

3. We were motoring down the river on a rather quiet day when we turned into a small tributary. As we drifted along we caught sight of tribesmen standing in dugout canoes, hiding behind the trees. We coasted on and made a slow turn to the right and saw before us a pristine lagoon and village huts scattered along the hillside. We did a long clinic there the next day and were only troubled by the evening bats flying over our heads.

Patty has asked that I tell “more stories” I should have told her “don’t get me started” because there are so many tales to tell…. Some are funny, some scary, and most just clear visions still hovering around in our heads.

4. In 1997 before heading out to the Pastaza River, the team attended a jungle survival course. The Peruvian instructor put out a big poster with SURVIVAL written vertically down one side, with each letter corresponding to a given slogan. The R, which was to represent “don’t worry rescue is coming” was spelled out this way “REMEMBER THE BUSYBODY IS COMING.” The class laughed forever! The instructor was clueless.

5. If you have never ridden in a helicopter, the last trip over the upper Andes to the high jungle would have been your adventure. In order to get to some villages we were carried by a military helicopter. It was loud, very loud - even with ear covers. But, what a grand view of the jungle below with its rivers and isolated villages.

6. Like to camp? Well, again on the Pastaza trip on our very first day we went down river a short way and our soldiers recommended that we camp on a large sand bar in the middle of the river. (High enough – large enough – etc.) they began making their own shelters with plastic sheets as we set up tents. Now the fun starts – a windy rainstorm came up and in no time it ripped the shelters apart and blew our tents all over the place. (Even with two duffel bags and myself inside, I had difficulty keeping the tent from rolling.) Meanwhile I nervously watched the river rise and the water’s edge get closer and closer. Finally, we all just pulled up stakes and abandoned that “bug free”, “perfect” camping spot. The next hour was spent washing the sand out of our tents. We stood in the river and what had been used as a cold river to cool off in was now used as a warming river after being wet and windblown. Incredibly, as we completed that chore the sky cleared, the wind disappeared and we observed as beautiful a sunset as you could ever find. Then the night spent in heat, bugs, and little shelter in the village. Are we having fun yet?
7. Later on that trip we camped in the Rimachi Lake off the Pastaza River and the soldiers had to stay up all night refusing the giant crocodiles entry into our camping site. We were thankful for their vigilance and large rifles.

8. Now really, a camping experience is usually very nice. Camping along the edge of a river, in a village, is all very exotic. Maybe a bit too exotic the day we discovered a snake hanging in a tree directly above our tent. But, don't worry maybe The BUSYBODY is nearby!

9. On one trip, while we were motoring down river we had a little engine failure. For a while, the boat drifted, angling back and forth in the current. Sooner or later it was bound to happen, we crashed into the shore line and the trees and vines swept all the tents and people and supplies off the top of the boat. Patty and others ended up in the river helping to pull and push the boat until it was back in the river current and the motor was working again.

10. I left for the end the most meaningful part of AP, that is of course caring for people – taking medical care and treatment to people who are very isolated from all that we easily expect to be nearby. The villages welcome the teams eagerly and often have a welcoming ceremony and a different evening event; singing, dancing, sharing, and food. In the clinics we are all business – but it is often fun and incredibly rewarding for us as caregivers. You just never know what is coming: simple aches and pains, parasites, infections, snake bite, a new baby, every conceivable thing, standing before you trusting that you can help. And we can! We do little things, serious things, and sometimes can only encourage and know that there is little or nothing that will solve that person's problem. We never turn anyone away, never send them off without some form of attention and care.

Amazon Promise serves the nearly forgotten indigenous people of the rivers and mountains and concurrently gives us the opportunity to use our medical skills and caring hearts in a way that satisfies both groups, physically and emotionally. We look forward to our next opportunity to be traveling again to experience the fun, satisfaction, and rewards through this work.
Working with Amazon Promise may not be for the very fainthearted but it is for those big of heart looking for adventure and the immense satisfaction of caring for a group of people who need and are thankful for the medical care Amazon Promise brings.

Sincerely,
Dan and Lindsay MacDougall

For those reading this, we encourage you to consider joining Amazon Promise. You won’t regret it.

Extreme Fundraising for Amazon Promise!

**LAND’S END TO JOHN O’GROATS**

“The Land’s End to John O’Groats bike tour was very challenging. It was, by far the most difficult physical and mental challenge I have ever done in my life!”

Margarite D’Amelio biked an incredible 974.21 miles from Lands End to John O’Groats (the entire length of the island of Great Britain) in 14 days to raise funds for Amazon Promise! She reports that thirteen days were rainy, and two of those had hurricane winds (50 mph) and skin-piercing rain! Only one day of sunshine, Day 12 which took them along Loch Ness from Fort William northward to Inverness Scotland!

Amazing Marguerite! Thank you so much! We think Margarite would be a perfect candidate for one of our remote medical trips!
Remembering Robert Frascino, MD.

Robert James Frascino, M.D., passed away on Saturday, September 17, 2011. He was 59 years old. Known as "Dr. Bob" to many, he was one of the most incredible, inspiring and compassionate physicians, educators, and advocates for the community of people living with HIV/AIDS. He was also one of the long-standing sponsors of our ¡Soy Capaz! program of HIV/AIDS prevention and education.

Dr. Frascino’s Obituary from last year states that, “Dr. Frascino was one of the first physicians to treat HIV patients in the early 80s. He subsequently founded two medical clinics devoted to the comprehensive and compassionate care of people living with HIV. A Fellow of the American Academy of Allergy, Asthma, and Immunology, and the American Academy of Paediatrics, Dr. Frascino also served as Associate Clinical Professor of Medicine, Division of Immunology, Rheumatology, and Allergy, at Stanford University Medical Center for 18 years. He was a certified member of the American Academy of HIV Medicine and a distinguished member of the executive boards of numerous state and regional associations. Dr. Frascino crossed the line from physician to patient when an occupational exposure resulted in his testing HIV positive. In early 1996, when his health began to fail, he gave up his HIV/AIDS medical practice and turned his efforts to HIV education and to fundraising. In his words, ‘I could now speak with the knowledge and authority of a physician, but with the eyes and heart and soul of a patient.’ That same year, he and Dr. Steve Natterstad, both concert pianists, planted the seed for what would become The Robert James Frascino AIDS Foundation by performing a piano concert benefitting HIV/AIDS at their home in Los Altos, California. Due to its overwhelming success, the couple founded the Concerted Effort HIV/AIDS benefit concert series through which they performed classical and popular piano concerts throughout California. They raised over $1,500,000 for crucial HIV/AIDS services worldwide” (Chronicle, September 30, 2011).

The Foundation of Dr. Frascino has been supporting our program, ¡Soy Capaz! for numerous years, and we are saddened by his departure.

We would like to express our deep gratitude for the support we have received from Dr. Frascino and his spouse, Dr. Natterstad, over the years. We will remember Dr. Bob when we go about our work. His life was an example of bravery and compassion that has touched all of us, giving us the strength to continue fighting HIV. We are reminded that the fight is far from over, and we will do our best to honour the memory of our inspiring sponsor and mentor.

For more information about Dr. Frascino and the Frascino HIV Foundation, go to:
http://www.concertedeffort.org/robert.html
http://www.thebody.com/content/art39699.html

Through the generous support of the Ann Arbor Rotary Club and Rotary District 6380 Amazon Promise has purchased a handheld ultrasound for diagnostic imaging purposes.
From HIV to Plastic Wrappers.

1. The Terror of the Ubiquitous Plastic Bag.

When asked about the decomposition time of a plastic bag or a bottle, an American won’t probably tell you the exact number of years, but he will ascertain that it takes a long time nevertheless. A Peruvian, be it in a jungle village or in a town, will share the same knowledge. However, the consequences of this awareness would differ radically: for the American, the long decomposition time would signal restraint in the use of plastic (for example, plastic bags have recently been banned from stores in Seattle), while for a jungle Peruvian, this quality would mean a great advantage. In the humid air of the jungle where any natural fiber is subject to fast decomposition, a plastic object is priceless. Unfortunately, the (rapidly) developing world, of which the Peruvian Amazon is a part, is now suffused with plastic products, bags and bottles in particular. So plastics are coveted not only for their durability, but also for their disposability. At the same time, there are no garbage-disposing facilities to speak of. When the waters of the river Itayo—that runs through the poorest neighborhood of Belen in Iquitos—drop and reveal the river bottom, the scale of the infestation with plastic becomes dreadfully obvious. The inhabitants of Belen, whose wooden houses float on the river in the times of high water, then struggle through wind-blown plastic bags, crunching plastic bottles with each step. But the situation in the town is one thing, supremely disturbing as it may be. It is another to see a similar scale of pollution in the not-so-long ago pristine villages and the surrounding jungle. Yet, the same attitude to plastic prevails there: it is a coveted commodity--no matter how, ironically, prevalent--for its long decomposition time.

We have been noticing this phenomenon for some time, but the last straw, as it were, was facilitated to us during our last visit to the Pacaya-Samiria reserve and to the villages along the rivers Marañon and Ucayali. It is there that we experienced the incursion of the disposable plastic culture along the jungle river shores, and on the paths running through the villages. For example, in Santa Cruz on the river Marañon, we had to walk from one side of the village to the other to intervene in a case of domestic violence. At first, we were enchanted by the layout of the village spread on the hilly shore of the river along a 4 kilometer-long walkway, with houses set along the sides in the dense jungle vegetation. We crossed a tiny wooden bridge over a rushing stream, and came to a lovely natural pond. Stopping to admire the tranquil nature of the place, we observed some water lilies on the surface of the pond. Only the flowers were not really flowers, but floating plastic bottles. Continuing down the path, we discovered plastic bags and other garbage strewn here and there in the underbrush, their occurrence becoming denser around each house. Then, going up the river Yanayacu to the faraway village of Yarina in the Pacaya-Samiria national reserve, we could see pieces of plastic stuck to the river edges. The list of our sightings might go on, including nearly every place that we visited.
2. Information and Prevention: From HIV to Environmental Awareness.

But the Amazon becoming a plastic hellhole is not the only threat to the jungle and its inhabitants. Heavy logging, mining and oil industry have been moving in for decades. The thing is that, of course, everyone knows that the Amazon jungle is experiencing extreme exploitation. But seeing it first-hand is another matter. We witnessed deforestation on the banks of the river Ucayali on our way to the village of Puerto Miguel, one of our longest-standing places of service. The area there has always been something like our second home. And so observing the absence of the tall trees that used to welcome us, and the devastation brought onto the formerly grandiose river shores by logging, has truly driven the message home.

Moreover, logging and deforestation come hand in hand with the depletion of other natural resources, such as the medicinal plants that have traditionally served the local people for healing, not speaking of the food provided to them by the rainforest fauna and flora (and, given how fertile a source of mythologies and legends the jungle has been, of the native cultural heritage). In more ways than one, then, the jungle is the local people’s livelihood and their heritage; it is that which has been passed on from one generation to the next. True, one may argue that this inheritance has been severely tainted by rubber harvesting and gold mining of the times past. But no past scenario matches what is happening to the jungle these days. Besides illegal logging and mining, the local inhabitants themselves allow individual loggers and companies into the jungle areas for a small profit. As with the environmental dangers inherent in the long decomposition-time of plastics, the locals do not realize the extent to which the natural resources become compromised by extraction and pollution, and how this situation may consequently affect their own well-being.

Yet, of all the places on the planet, it is the Amazonian jungle that sends out the clearest message of how intimately connected the well-being of an individual is to his natural environment. These are some of the reasons why we have decided to expand our Soy Capaz educational program—that originated in HIV prevention—by environmental awareness teaching. After all, if we care about the well-being of the individuals living in the jungle, we need to address all the preventable threats that surge from the incursion of Western civilization.

3. Soy Capaz de vivir una vida saludable! (I Can Live a Healthy Life!)

The above is therefore the motto of our expanded educational program whose key words are: **Awareness, Prevention, Well-being, Individual, Environment**. As is, our program already emphasizes the interrelatedness of these concepts on levels which have surged naturally and over the years from our HIV-educational interventions. These range from individual, women’s and reproductive rights, domestic violence, and abuse of substances such as alcohol and sugar. Raising awareness of issues related to environmental protection will therefore be our most recent addition to the program. Within this focus, we also plan to hold workshops on sustainable growth and use of medicinal plants.

These areas have surged from our field experience and research. As ever, it is our goal to generate and implement an up-to-date, holistic educational programs tailored to the current necessities of the local Amazonian communities.
Below is an outline of our teaching strategies and goals for the year 2013 (We will also continue to do HIV prevention and dental health education):

**OUR HEALTH AND THE ENVIRONMENT**

**Environmental protection and conservationist approach to natural resources:**

- Meaning of an ecosystem: explanation of what an ecosystem is, and how it maintains and achieves its natural balance. Focus on the interrelation of nature-man, the benefits of this relationship, and the consequences of human interference with natural systems (dependence of the villagers’ health on the health of their environment).
- Consequences of extreme use of natural resources: oil companies, loggers, pharmaceutical companies. Point out water and soil pollution caused by mining and oil drilling.
- Waste management, garbage: attention to plastic products in particular (their decomposition time, environmental impact).
- Controlled use of natural resources: sustainable management of the rainforest, planting of trees, herbal gardens. Biodiversity conservation.

A gender-based program which would engage and empower women to take a strong stand in matters related to environmental protection is our ultimate goal. MERGE is of the modules we are investigating at present: a gender-based environmental stewardship program developed by the University of Florida for the populations of the river areas of the Amazon basin.

**Medicinal Plants and Alternative Medicine (goals):**

- to research and re-introduce medicinal plant knowledge in local communities via dialogue and mutual exchange.
- to produce a list of medicinal plants used in the Marañón, Ucayali; Yarapa and Pacaya Samaria areas.- Upon consultation with the local communities, select 5 plants to explain their medicinal uses and benefits to the public.
- to prepare and offer an herbarium consisting of photographs of the medicinal plants of the region, detailing their medicinal effects.
- to address issues of sustainable use and protection of medicinal plants that have become exploited by western markets (e.g.; uña de gato, camu camu). Point out the dangers of eradication of plant species if overharvested.
to help establish herbal gardens: how to begin and maintain, what plants may be grown in
the gardens. Use a manual (e.g.; Uso de plantas medicinales - Manual para el personal de
salud del primer nivel de atención published by DIRESA, Iquitos, 1997)

We are happy to welcome a University of Florida graduate student, Jessica Jefferson, who will be helping us
with the preliminary interviews of local villagers, and with the designing and the first steps of the program.
Jessica is pursuing a Master’s degree in Sustainable Development.
Besides Jessica, Soy Capaz employs Gina Bardales, a Peruvian nurse, who has been an excellent field worker
and collaborator for several years now. Thank you for your hard work, Gina!

Amazon Promise is also partnering with several NGO’s for a proposed water/sanitation plan to start in late 2013. More details to come!

**Pictures Truly Are Worth 1,000 Words**
*By Anne Kemp, Student Nurse, Denver School of Nursing*

Each time I sit down to write this article, I wind up looking through hundreds of photos, trying to figure out where to start telling our story. I was part of a team of 11 nursing students and three preceptors from Denver School of Nursing (DSN) who traveled to Iquitos in October for a series of firsts – first group from our nursing school to engage in a global service learning opportunity in Peru, first team to collaborate with Amazon Promise to offer a clinic in Belen, first training opportunity for local health promoters (*promotores*) regarding women’s and infant’s health in the community. So it was with a considerable amount of long-distance planning (hooray for email!) and a whole lot of faith that we embarked on what proved to be an incredible day of learning and healing with Amazon Promise on Monday, October 8 at their amazing clinic facility in Belen. Our collaboration with Amazon Promise was the culmination of a dream for me, because it was standing in the Amazon jungle nearly five years ago that led me on a personal journey that included giving up a successful 20-year career in the non-profit sector to pursue the dream of becoming a registered nurse. Through the encouragement and support of people like Patty Webster, we were able to achieve the introduction of a strong global focus into our nursing curriculum at DSN. Beyond that, our day represented the achievement of a deeply personal goal of sharing my love of Peru with my fellow students. We arrived at the AP offices in Iquitos early Tuesday morning with several hundred pounds of supplies, including eyeglasses donated by our local Lions club chapters, a variety of OTC pain relief medications, some clean birth kits, wound care supplies, hand soap and nail brushes,
toothbrushes, and lots and lots of vitamins. The students were at both turns excited and nervous because to a person, this was their first experience outside of the US. Under the calm and loving guidance of local clinic coordinator Rosa Aranzabal and the incredible AP staff of translators, pharmacy techs, and providers, we made our way to Belen. Our plan was to offer a clinic from 8-3 and then training from 3-5. There was already a long line of people patiently waiting for us when we arrived. We quickly set up three provider stations, a pharmacy, eyeglasses, and a triage/intake area. The most amazing thing to me was that there was a dentist who was able to both drill and fill teeth using equipment powered by a small generator! Dr. Neil was a real character; whenever a child would ask us for a toothbrush, he would teach them a song, or have them show off their toothbrushing technique – exactly the kind of “return demonstration” that nursing students appreciate!

The clinic runs like a well-oiled machine. With the support of local professionals (3 doctors, 1 lab technician, 1 dentist, many translators, chef) we were able to see 163 patients and fit dozens of people for eyeglasses and sunglasses. Patient complaints ranged from upper respiratory infections to diarrhea, fever, dermatitis and fever. The nursing students worked side-by-side with each doctor and provided information about hygiene, women’s health and healthy pregnancies and basic health issues to patients while patients waited for treatment.

There were several notable patients during the day, including two house calls. The first house call was to a family who had tragically lost a 10-month-old baby due to malnutrition, whose mother explained that because she was unable to obtain any documentation for the baby, she was turned away from the local hospital. This was a difficult lesson for us to try and comprehend – how the bureaucracy of obtaining proper documentation prevented this child from receiving desperately needed treatment. The other house call was to see a patient who recently suffered a stroke and was suffering from edema and paralysis. We were also able to work with the caregiver for a child who suffered from paralysis, possibly a form of cerebral palsy that she literally found, abandoned as a baby, that she took in to care for, and literally carried everywhere she went. We quickly threw together our soles and purchased a stroller for abuelita so she could save her back.

The afternoon training for local health promotores was also a wonderful success – 23 women participated in an interactive session about women’s health, healthy pregnancy and childbirth, and neonatal care. What a difference a day makes! It was an extraordinary one and a collaboration that we hope to continue for years to come. We are grateful to Amazon Promise for their willingness to work with us and look forward to the next trip to Belen next year!
Women’s health training class at the Belen Clinic

Denver School of Nursing students Ashley Lenzen, Rachel Herhold, Sianna Roberts, Samantha Bradley, Megan Morrison, Brea Burkett, Kelly Reardon

Providing prenatal care at the Belen Clinic
2012

It’s been a challenging and busy year for Amazon Promise to say the least. While I was in the jungle with a medical team in February, a fire broke out in the Mobil Oil warehouse located behind our house. Although we were helpless to do anything being so far away, our office assistant Adriana Calizaya was able to phone friends and family members of the AP staff to come and help that night. With smoke billowing throughout the house, using flashlights and cell phones for light, they heroically dragged, pushed, and carried everything, including the stove and refrigerator, down the stairs and outside onto the street, while the explosion of oil drums sent flames high into the air. An incredible feat! Because the fire was expected to burn the entire block, everyone on all four sides rushed to get their belongings out onto the street as well. Such a huge event attracted several hundred onlookers, some wanting to help, others wanting to steal. A few of them managed to make their way into our place. The police, Army and Air Force were also on the scene trying to keep people out. You can imagine the chaos. The fire was detained just as it was reaching the back wall of our building. We suffered intense smoke damage and the loss of important paperwork and artifacts, but we’re lucky really, because we could have lost the entire office which certainly would have been worse.

Record breaking floods in March through May led to outbreaks of Leptospirosis and Falciparum malaria that put two of our cherished staff members in the hospital! Our Belen Clinic was badly damaged in the flood, but it’s nothing compared to the loss that over 19,000 families suffered; their homes were destroyed and their possessions lost, forcing them to seek shelter in tent cities. A super disaster for so many! I want to thank everyone for your support during that time which allowed us to provide water filters, food, medical attention and hospital care to many of those people. I’m proud that we were able to be a part of the relief efforts. (See flood articles and photos @ www.amazonpromise.org)

If we thought the flood was bad, the aftermath brought on a whole new set of troubles. Once the waters receded and the people were allowed to return to what was left of their homes, they found they weren’t home alone. Rats and mosquitos had moved in before they’d even had a chance to get there, harboring disease and parasites. Our maintenance man Rafael was diagnosed with Leptospirosis and was in the hospital on IV fluids and oxygen for a week. Then, the imperturbable Segundo, (river guide extraordinaire, clinic logistics man) became very ill with malaria and was ultimately in the ICU. Initially he was misdiagnosed and was not doing well. Luckily, a visiting doctor happened to be doing a malaria
study and when she came upon Shego still lying in the ER after several days on treatment that wasn’t working, she asked him if he wouldn’t mind if she did another blood test. She found Falciparum malaria. Her appearance that day most probably saved his life. Both Rafael and Segundo are doing well today thanks to our quick acting AP staff and their families who made sure that they were admitted to the hospital receiving proper testing and treatment. While all of this was going on, we continued to run our regular medical expeditions, attending to the constant flow of patients waiting at our door.

Amazon Promise held 12 medical & dental clinics during our February medical campaign attending to 1151 patients. Clinics were held in poor neighborhoods of Belen, Masusa and eight villages of the Yarapa and Ucayali Rivers. Amazon Promise wants to thank our volunteers, surgeon Lori Ann Grimsley, MD, Greg Dopulos, MD ER, U of Michigan doctors and 4th yr. med students Megan Adams, MD, Lindsay Nicholson, MD, Eugene Lin, MD, Jeanna Park, MD OB GYN, Stephanie Royer, Marisa Gross, pharmacy student Catherine Pawloski, and AP Medical Director Bob Hyzy, MD. What an awesome team!

Our remote medical trip to native Awajun villages of the Maranon River at the foothills of the Andes Mountains in May of this year was full of adventure and brought together three returning alumni and three new volunteers. (See Edward Health and Dan MacDougall’s articles in this issue) If you like to travel by helicopter and tiny cramped canoes and don’t mind jungle heat, sleeping in a tent, long clinic days and are interested in native cultures, this medical expedition is for you! There’s nothing like it! Amazon Promise thanks our six
adventurous and brave volunteers Lindsay MacDougall, MD alumni, Dan MacDougall, MD alumni, Steve Heath alumni, Shannon Padgett, MD, Tom Kragh, and Edward Heath, RN. We also extend our gratitude to Petro Peru, the Peruvian Air Force, Ministry of Health of Saramiriza, and Mr. Claudio Wampuch for assisting us in reaching these most remote areas.

We held 13 additional medical & dental clinics during our July-August Student Internship serving impoverished neighborhoods of Belen and Iquitos, and villages of the Pacaya Samiria National Reserve. Students from Great Britain and the US provided medical, dental care and health education to over 1581 people. Thank you Samim Atmar, Kimberly Fan, Dustin Cotliar, Juan Sanchez, Caroline Dudley, Emma Cox, Priym Shah, Aneesa Jaffer, Elizabeth McKinnon and Imogen Buss. We also thank our excellent preceptors Rajneet Lamba, MD and Shellane Cristosomo, PA-C.

*Out* of the thousands of patients for whom we provide medical care each year, most are women and children. Of 4763 people we cared for in 2012, 1285 were women and 1545 were children under five. Ten million children die each year in developing countries from *preventable* illnesses because they have no access to basic medical care. What starts as something seemingly simple and non-life-threatening can become fatal.

Basic medical care saves lives, strengthens families and communities, and encourages hope and the pursuit of dreams and opportunities. We are firm believers in this principle. We have witnessed the difference we have made in thousands of lives, in communities that we have served since 1993. Yet, as an organization we continue to struggle each year with the limited funds that we have. By far most donations and grants go to Africa whose constant challenges certainly warrant it even greater attention than it receives. However, very little goes toward basic healthcare, health education, and HIV and malaria prevention for our near neighbors here in Peru. This is a very ancient country with deep poverty and a long history of exploitation of its indigenous peoples. The need here is also very great, and yet so is the hope and so has been our impact.

As a member of the Amazon Promise community, you are helping thousands of native people each year. Thank you as always for your ongoing service and dedication, and we urge you to please reach out to others to help Amazon Promise keep its commitment.
AP interpreter Jose Luis Valles and Dr. David Coffey provide care for an elderly woman.
## 2012 Patients Seen

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<tr>
<th>Date</th>
<th>Village</th>
<th>Location</th>
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<td>Ucayali River</td>
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<td>Ucayali River</td>
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<td>18 – Feb.</td>
<td>San Francisco</td>
<td>Maranon River</td>
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<td>19 – Feb.</td>
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<td>Yarapa River</td>
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<td>Jerusaleen</td>
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<td>Yarapa River</td>
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<td>Rio Itaya</td>
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<td>Iquitos</td>
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<td>Progreso</td>
<td>Punchana - Iquitos</td>
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## DENTAL

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Amazon Promise congratulates our Medical Director Dr. Robert Hyzy on his election into **The Department of Internal Medicine Clinical Excellence Society** at the University of Michigan! Members of the society will promote clinical excellence through example and perpetuation, and provide advice to the Department on clinical excellence matters.
Keeping the clinics running smoothly, the Coloma Family! Segundo (Shego), Ricky and Alter

Keeping everyone happy, healthy (and out of the kitchen), our chef extraordinaire, Luisa Bardales!
Belen Clinic Update

A central goal for Amazon Promise has been—and will continue to be—providing desperately needed primary care and health education for residents of Belen, the most impoverished slum area of Iquitos. For many residents in this poor urban community, Amazon Promise offers the only health care they receive.

Over the last few years, Amazon Promise has worked with community leaders to identify and dedicate a space for a medical clinic, where Amazon Promise could have a more long-term and sustainable presence. In 2010, Amazon Promise constructed a small facility in the heart of Belen, where several clinics are held throughout the year that offer medical and dental care, HIV prevention, and health and hygiene education via the volunteer Promise medical teams. While Amazon Promise had originally envisaged a much larger facility—with wonderful input and potential designs developed by Engineers Without Borders—that could provide an

Municipal Government of Belen holds a women’s health promoter class
extensive array of care and treatment for Belen, the current facility has already gone above and beyond Amazon Promise’s expectations. The clinic is made available to other organizations and governmental agencies that offer medical and social services that help foster a healthier community. In this spirit, it’s not just a clinic, but a place for gathering, development programs, and community-building. Amazon Promise is grateful to the many individuals who contributed toward the construction of the Belen Clinic and is looking forward to further investing in the current clinic’s programming to continue to expand the organization’s reach and effectiveness in helping the people of Belen have a higher quality of life. For example, this year an important program will be offered at the clinic through the Iquitos Office of Social Development, which is utilizing the facility to train 16 women health promoters living in the lower zone of Belen. Classes are being held three days a month in the clinic. Amazon Promise is working with the Municipal Government of Belen on a cooperative agreement that will allow this and other ongoing programs a safe and clean space in which to work and teach.

We are also in the beginning stages of designing a pilot water and sanitation project that will benefit the
families living near the Belen Clinic. More details to follow in 2013!

Once again, Amazon Promise extends its heartfelt gratitude to its contributors and friends who have helped to make these activities—and most importantly the Belen Clinic—a reality.

Extreme fundraising tactics #2

Amazon Promise member Justin Smith, Esq. ate 33 deviled eggs, raised over $500, and lived to tell about it! Of the two competitors at Lockhart’s BBQ in Royal Oak, MI, Justin “Big Huevos” Smith came in second with 35 eggs eaten and Keith “Klink” Barron came closer to victory at 65.

What will he take on next?

Thank you Justin!
A Physician Assistant’s First Amazon Promise Trip
Shellane Crisostomo, PA-C

It’s Monday morning in the Amazon village of 20 de Enero, our base for the next two weeks. It started raining before sunrise and I’m awakened by the sounds of the rainforest. It’s 5am and I’m reading my Oxford Handbook of Tropical Medicine by headlamp and jotting down notes.

Patty said there were snakes in the jungle. Few trips ago they had a snakebite victim. Hmm, I’m sure I won’t see any snakebites while I’m here. I hope I don’t see any snakebites. How do you treat snakebites anyways?

At home, “wait and see,” “watchful waiting,” “deferred antibiotics” or ordering unnecessary tests are typical ways of managing common infections or unclear presentations of illness. “If you experience any new symptoms or if it gets any worse, go to your nearest Accidents and Emergency.” In the jungle, this is not the case. Most often the nearest medical post is 2-3 hours away by paddleboat along the river. Even after being seen, many cannot afford the tests, procedures or medicines. And for most of the villagers along the Yanayacu and Pucate Rivers, their only access to regular health care is Amazon Promise once a year. Because of the remote locations of these villages, any complications, missed diagnoses or under treatment would have greater risk of mortality. For the medical staff working with Amazon Promise, we were limited to the supplies and medicines we can carry.

So I found myself practicing medicine in a much-liberated, bare-bones kind of way. I was forced to go back to my medical education and basic pharmacology without the use of fast internet access, specialist referrals, state of the art x-ray suites or a full spectrum of lab tests and pharmacy.

Treatment for poisonous snakebite: Stay quiet; do not move the bitten part. The more it is moved, the faster the poison will spread through the body.

Practicing medicine in the jungle was challenging mainly because of the uncomfortable settings in which we see patients. Despite the hot weather I would be wearing full scrubs and wellington boots. The toilets, if any, were not pleasant to say the least. And foul smelling sewage and insects were constant reminders I was no longer in Kansas. Often I was performing abdominal examinations or pelvic exams on the bare cement or dirt ground with only a sheet being held up for privacy.

Even though most cases were common primary care complaints, the presentations were often severe, long standing, with a wider range of differential diagnosis and greater risk for complications. For example, anaemia in a child back home is quite rare. In the Amazon, anaemia in children was the majority. A fever back home in a well-child is often viral but here, fever in a malnourished child can very well be malaria, dengue, or leptospirosis.
Antivenom serum should be administered as early as possible: by IV infusion (in 0.9% sodium chloride) or by slow IV. For all patients, be prepared for an anaphylactic shock.

Patients I saw were interesting from a clinical perspective such as hepatosplenomegaly due to chronic malaria exposure. Most clinic visits were successful and I felt a sense of accomplishment when for example, a clear picture of amoebic dysentery in a child is treated with antibiotics. On the other hand, I found myself wishing I could do more. Such was the case for a young woman, pregnant with her fourth child, presenting with pelvic inflammatory disease due to repeated rape by her alcoholic husband. It’s not your typical ‘tropical medicine’ case and in the remote villages of the jungle, I felt there was little I could do to help her.

Still, I came home feeling with a renewed sense of purpose and appreciation for life, health, and people. I was inspired by the team at Amazon Promise for their dedicated and committed work to helping those who need it most year after year.

For future volunteers, a few practical tips:
- Download Epocrates on your phone – helpful for determining antibiotic alternatives and dosages for paeds and pregnant patients
- Doctor’s Without Borders Clinical Guidelines and Essential Drugs http://www.refbooks.msf.org/
- Where There is No Doctor http://hesperian.org/books-and-resources/
- Bring your medical supplies i.e. thermoscan ear thermometer- great for children, electronic BP machine, and a large Alcogel hand sanitizer dispenser
- Dark chocolate bars to share

Thank you Peru for the experience. Amazon Promise, until next time…

By the way, there was a snakebite victim on my last day. Thank goodness I read up on it!

Shellane is a PA instructor in the UK and will be joining the summer 2013 AP medical team as a preceptor.
What I’ve Learned in 13 Years with Amazon Promise

Dr Bob Fulton, MA, DDS, FADI
Oral Health Program Director for Amazon Promise

The World Health Organization has targeted oral disease as an infection of pandemic proportions. Of the 7 billion people in the world today, the vast majority of them have some form of oral disease; making it the most invasive infection in history. This is most prevalent in the western world and those parts of the developing world where western cultural influences are the strongest. Unfortunately, these facts aren’t receiving the urgent attention they so deserve.

Oral disease is preventable and curable all over the world, but not through the efforts of only oral health professionals filling and pulling teeth. It can only be eliminated by everyone understanding the causative factors of the disease and taking steps to eliminate them. In the Amazon people drink sugar based sodas as a form of hydration. Sugar and bacteria are the two agents, in the presence of saliva, that produce a biofilm, the primary agent that leads to acid production, which causes oral disease that can lead to serious complications from other major body illnesses.

Amazon Promise has developed a well-organized dental program in the past 13 years working with many talented oral healthcare professionals and students from Peru, Australia, Great Britain and the US. We have an oral health education program in place that is presented to all villagers in their native language each clinic day, and individually, as they are receiving dental care. New programs to build rainwater catchment systems in several villages will make a big difference. Once these systems are in place we can make an even stronger case for drinking water, much like many did before our western world began to creep into their culture. Fresh water is the major key to overall health.

Dental disease is potentially life threatening, and each member of every AP medical team, healthcare volunteer or non-medical, has a wonderful opportunity to play a part in educating people as to the role that sodas and candy play on their overall health, dental or otherwise. Having access to this information can make all the difference.

Dr Bob

"What we have done for ourselves alone, dies with us;
what we have done for others and the world, remains and is immortal."
Albert Pike, 1871
The Importance of Reaching Out to Others for Amazon Promise

On occasion we have all had conversations with people who are compassionate but aren’t sure how to give. And then there are those that feel that it just doesn’t make a difference in the ‘big picture’. However, if you are reading this newsletter, you are aware of Amazon Promise and know full that we do make a difference.

The work Amazon Promise does is important not solely because of what we do and how well we do it, but also because we have succeeded with so little. We are not a large organization with big overhead and a budget left over at the end of the year that we race to spend. This is very much a hands-on group of caring volunteers and donors like YOU who make their own sacrifices in money and time to serve the needs of others. In these tough economic times, your support is all the more critical as our organization struggles monthly to meet its obligations. On average it costs us less than $10 to treat each patient. This is admirable under any conditions, but it is especially remarkable when one considers the quality of care we provide and the logistical difficulty and expense inherent in reaching the populations we serve.

You can help by making a tax deductible monetary donation. You can also reach out to others to expand our donor pool. Talk to your friends, your companies, your places of worship. Although we are not a faith-based organization, we embrace values of serving the poor, the sick, the hungry, the lonely, the elderly and the hopeless.

You can also help by donating in other ways. You can donate frequent flyer miles, you can donate medicine, and you can donate your time. We need help with marketing and communications, public relations, reports, grant writing, locating grants, fundraising, seeking out appropriate strategic partners, and recruiting volunteers. While we sometimes receive offers to donate equipment, clothing and other large volume items, we simply don’t have the funds to pay for the shipping costs and customs duties should they apply; these types of material donations must therefore be considered on a case-by-case basis.

Lastly, we constantly need volunteers on our medical expeditions in order to provide the helping hands that serve thousands of poor people each year. Many of you have already volunteered, some of you multiple times. Spread the word. Share the experience. And of course, we welcome you back. You are family.

Patty
Make a Donation

Amazon Promise relies on private support to fund operations, expand services and provide a wide range of care to impoverished communities in Peru.

Monetary Gifts
If you would like to make a tax deductible donation, please mail your check or money order to:

Amazon Promise
P.O. Box 1304
Newburyport, MA, 01950
USA

Or, if you prefer you may also donate via PayPal from our website. However, please note that PayPal extracts a processing fee from the donation.

Material Donations
If you would like to make a non-monetary donation, please contact Kristina Server at kristina@amazonpromise.org. Please note that due to our financial constraints, we are unable to accept certain types of donations that require us to pay shipping fees or customs duties.

Other Options
Need a gift? Visit our Zazzle site to purchase AP t-shirts, mugs, bags etc. 25% of the price goes to helping AP: www.zazzle.com/amazonpromise. You may also purchase gifts or make donations to AP through charity networks GreaterGood Network, Changing the Present and Stuff Your Rucksack.

Donating from the UK!

We’re happy to announce that all UK volunteers and general donors can now fundraise to pay for a trip, or make a tax deductible donation to Amazon Promise thru the Charity Giving website! http://www.charitygiving.co.uk/charitysearch.asp?charitysearch=Amazon+promise&x=35&y=16

Volunteer

Join Us on a Medical Expedition
Please check out our website for the new 2013 schedule. We have several different volunteer medical expeditions planned for this coming year. If you have only a week or so available, join us for part of a longer expedition (excluding remote trips). You can also arrange your schedule to focus on our work in the city or jungle clinics.
So pack your bags and join the growing team of Amazon Promise volunteers!

Volunteer Your Time
As mentioned in our newsletter, we need people to help with website content, marketing and communications, reports, grants, fundraising and outreach to potential strategic partners. If you have an interest, expertise and some time that you’d like to commit, please contact Kristina Server at kristina@amazonpromise.org.
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