The 27th annual Medical Practicum in Central America was the 17th to Nicaragua and the 1st to the primarily indigenous, Miskito populations in the remote, Rio Coco region of northern Jinotega. A total of seven days of clinic were held in the communities of Ayapalaní, San Andrés, Walakitang and Somotignes. Until two years ago, this region only had one nurse for 20,000 people. In the last two years, three to five doctors and three to five accompanying nurses have been making visits to communities in the region only about once every two to three months. We are tremendously grateful to those who contributed to the success of this year’s endeavor.

Our group consisted of five physicians, one physician assistant, one dentist, one pharmacist, one physical therapist, fourteen Manchester college students, three alumni with supporting roles, and one faculty. The medicines and supplies for this year’s trip cost $9,614, with a market value well over $70,000. Medicines and supplies for the clinic were purchased at reduced costs or received as a donation from Blessings International, World Dental Relief, Fisher Scientific, and Acción Médica Cristiana. The medicines not prescribed during our clinics were left with the regional health care workers responsible for serving these communities.

The effort expended on this trip was exceptionally high. Since the four communities are accessible only via the Coco River, we journeyed 230 miles round trip via motorized dugout canoe. Our work resulted in 1,811 consultations and 285 teeth extracted. A further challenge was the time-consuming process of communicating with the mostly indigenous patients, as it required translating from English to Spanish and then from Spanish to Miskito. Overall, feedback from the patients, Nicaraguan medical professionals, translators, U.S. medical professionals, students, and others involved with the trip has clearly indicated that the significant challenges we overcame were worth the effort in order to achieve the goal of bringing some primary health care services to these vastly underserved, Miskito communities.

Although our health care work undoubtedly extended the lives of some patients, probably the most lasting effect of the trip is in focusing or altering the future lives of the student participants. The medical professionals in the group, without whom the Medical Practicum would not happen, gave extraordinary amounts of time and energy to the trip, serving as invaluable teachers and role models. In addition, the Nicaraguan translators shared more than their knowledge of language. Martin Luther King Jr. once noted that “Of all forms of inequality, injustice in health is the most shocking and the most inhumane.” These translators served as essential interpreters and counselors as we began to process the inequalities we observed. Finally, the patients themselves allowed us to work with them, an act through which, as one student suggested, they were helping/teaching us more than we helped them. Student learning included health care, but also had many other facets, including, at a minimum, aspects of language, culture, economics, geography, and personal limits.

The Medical Practicum exists fundamentally to educate college students and to provide health care. These objectives were unmistakably achieved in January 2010.

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