Return to Freetown with a starfish called Catherine

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Introduction

Early one morning a young girl was walking along an African beach where thousands of starfish had been stranded on the shore by the receding tide. She started throwing some back into the sea. A man walking along the beach said to her - what a waste of time, you will make no difference they are all going to die. The little girl replied but it will make a difference to this one and this one and that one as she continued to throw starfish back into the welcoming waves. In West Africa there are many needy people, one can only help a few.

A starfish survives

On 8th April 2009 I returned to Freetown with Catherine Conteh, her husband Augustine and their daughter Regina. Our friendship began 16 years ago when nineteenvear-old Catherine had been in obstructed labour at the Princess Christian Maternity Hospital (PCMH) for more than four days and needed an urgent caesarean section. She and her husband were so poor that they could not find enough money for the operation to save her life and that of her unborn child. She had been left alone in agony in a side room until her baby died and then either her uterus ruptured and she became another maternal mortality statistic or she was left with the dreadful physical consequences of a vesico-vaginal fistula and the social isolation which that condition would bring. On the 17th March 1993 I happened to be visiting the labour ward when I heard the plaintive cries of a very distressed young woman and felt compelled to offer to pay for the caesarean which was successfully performed by obstetrician Dr Gassama under spinal anaesthesia. (fig1)



Pregnancy can be fatal

Sierra Leone is the most dangerous place in the world to have a baby. Maternal mortality is said to be greater than 10% which is a thousand times worse than in the UK. The main causes of death are haemorrhage (particularly post partum with blood rarely available), eclampsia (poorly managed), sepsis (particularly after illegal abortion with a sharp pointed object like a knitting needle) and poverty (if you have no money you receive no treatment even emergency caesarean section). The Government is very aware of this position and say it can only improve. In my opinion there needs to be some individual accountability, maternal deaths should not just be dismissed with a fatalistic shrug. Maternal mortality and morbidity meetings need to be introduced.

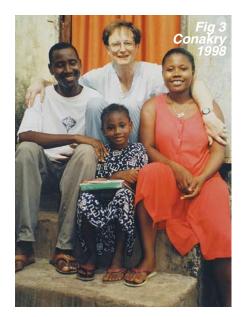
The Story continues

In 1995 a nursing friend of mine went with a church group to Freetown. I told her the story of the Conteh family and they (fig 2) happened to attend the church she and her friends were



Following this I managed to send the family a small amount of money which enabled them to escape by boat to Guinea to avoid the rebel advance on the capital. In 1998 I met up with the family (fig 3) when my wife and I flew out to join a Mercy Ship (www.mercyships.org.uk) in Conakry and to my surprise were greeted just outside the airport by a five-year-old girl and her parents holding a sign saying "Uncle Keith thank you for saving my life and my mom's, you are most welcome". In 2000 I helped the family escape from Guinea when English speaking refugees from Sierra Leone and Liberia were being persecuted by the government.

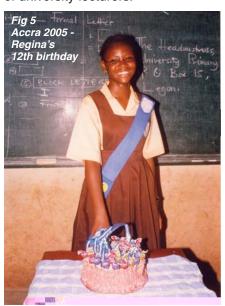
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Augustine was arrested and spent four days in prison with no food and water crammed in a cell with 50 other men, taking turns to sit down.



The family flew to Accra in Ghana (fig 4) where Catherine completed a two year hospitality course, Augustine did several computer courses and Regina thrived (fig 5) at a primary school for the children of university lecturers.



After five years the family were fortunate to be selected by an Australian team who were assessing refugees as possible new migrants. In May 2005 they were flown, at the Australian government's expense, from Accra via the UK to Sydney where my wife and I visited them in November 2006 (fig 6).



Since then they have made the most of their opportunities. Catherine has just graduated as a state enrolled nurse, Regina last semester was top in her year group out of 206 girls at St Mary's Star of the Sea College in Wollongong, and Augustine works as a security guard on the railways.

Back to Freetown

On 8th April I travelled back with the family, now Australian citizens, to Sierra Leone to visit their relatives and to complete a documentary film about our story with Caroline who is a former BBC radio journalist and now works for a Melbourne newspaper. She filmed us at the Princess Christian Maternity Hospital both outside and in the ward where Catherine lay in such distress 16 years before. I also managed to arrange an interview at his home with Dr Gassama, the Obstetrician who in 1993 had performed Catherine's caesarean section after I had agreed to the fee of about 100 US dollars. He was a pleasant man (fig 7) whom one could not blame as



Fig 7 Freetown April 2008 – Dr Gassama

the problem was and still sadly is, 'the system' where patients in sub-Saharan Africa almost always have to pay the cost of medical treatment. even having to purchase anaesthetic drugs prior to surgery. Sadly the situation with regard to the payment in Freetown is almost unchanged. Elective caesareans cost in the order of 200 US dollars, although apparently the UNFPA in an effort to decrease maternal mortality is funding most of the emergency caesareans at the PCMH. I doubt that pregnant women in other parts of the country are so fortunate.

During the visit to Freetown as well as running a three day anaesthesia conference at the School of Nursing at Connaught Hospital, I had the privilege of meeting and having dinner with Catherine's mother and other relatives at her new home in Lumley (fig 8). In spite of the lack of mains water and an intermittent electricity supply it was a great improvement on her former home.



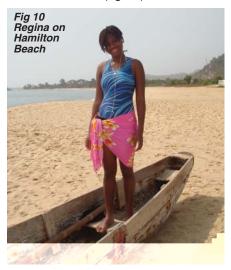
On Easter day Catherine and I shared our testimony at Jees Ministry Church in front of a congregation of about 350. I started by explaining the reasons for the high maternal mortality in the country particularly from haemorrhage and challenged those present to consider donating blood to the maternity hospital where supplies are inadequate – I suggested that a 'pint for a life' campaign might be started. It would cost an individual nothing to donate but it would certainly save lives. When I mentioned the word 'eclampsia' the congregation burst into laughter because my translator was unable to cope with medical terminology.

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At the end of the service we met Catherine James who had been Regina's teacher in a refugee school in Guinea 10 years ago (fig 9).

That afternoon my UK team plus Augustine and Regina went to the beautiful isolated and untouched Hamilton beach (fig 10)



where we swam in the balmy sea and ate enormous lobsters (fig 11)



barbecued by my old friend Joseph Samso the beach bar owner who remembered me from my last visit in 2003. There is a side of life that can be really rather pleasant in Sierra Leone!

Departure

The Conteh family left Freetown after just over two weeks (fig 12),



I think pleased to be returning to Australia where they have become accustomed to a life which is less of a struggle with the resources one takes for granted like clean running water, flushing toilets, a continuous supply of electricity, free medical care, the absence of malarial carrying mosquitoes and a working civil infrastructure.

I feel very privileged to be part of the Conteh family's journey through life.