



## Passing on the healing in PNG

After many years of helping restore sight to people in Papua New Guinea, Dr Michael Scobie is reluctantly passing on the gauntlet.

After restoring the vision of thousands of cataract-blinded people in some of the most remote areas of Papua New Guinea during the past 15 years, retired NSW ophthalmologist Dr Michael Scobie has decided to permanently put aside the microscope and scalpel, and cease his overseas aid trips.

He said that while the decision to fully retire was difficult, he felt it the right time to step away from the lead surgeon role of the organisation he set up, in the steps of fellow ophthalmologist, Dr Frances Booth, to assist the vision-impaired people of PNG.

The Chair of the RACS International Committee Professor David Watters has commended Dr Michael Scobie for his enormous contribution to the people of Papua New Guinea.

Dr Scobie, who spent most of his professional life in Gosford, NSW, said that while he would feel a sense of loss at the conclusion of his work there, he was heartened by the arrival of a local, fully qualified ophthalmologist in Wewak and hoped that perhaps another younger ophthalmologist might take over the work of his Australian-based program.

"It has been both fascinating and challenging working in PNG, and seeing the delight on the faces of people who can see after years of blindness never loses its magic, but most surgeons know when the time is right to stop operating," he said.

"The arrival of Dr David Pahau to Wewak

was also a consideration because that part of the country has never had an ophthalmologist before, so even though he is limited in the amount of work he can do by the lack of equipment and disposables, at least he is there and is doing very well.

"Even though I will not be travelling to PNG anymore, the group we established to help in this work will continue to raise funds to buy those disposables to help Dr Pahau treat as many people as possible."

Dr Scobie began visiting PNG in 1996 after travelling there with Dr Booth, having decided he wished to use his skills to assist the people of a developing nation who had little or no eye-care services available.

To do so, he set up his own volunteer organisation called "Central Coast Eye Care" to help fund both annual team visits and buy crucial disposables, with financial and in-kind support provided through private donors, the Gosford Private Hospital, health care organisations and AusAID funding provided through the RACS Tertiary Health Services Project in PNG.

Since then he has taken a team to PNG on 15 occasions and estimates that he and colleagues have restored sight to more than 2,000 people in such remote towns as Maprick, Aitape, Vanimo, Mingende, Popondetta, Kiunga and Kavieng among others.

Some towns have only been accessible by boat or plane, some by the local four-wheel-drive ambulance; "proper" medical facilities are

few and far between and at times Dr Scobie has had to operate in a converted school room, or a health clinic turned into a temporary theatre.

"I had worked with Aboriginal communities in North Queensland in the late 1980s and felt I wanted to go further afield and work in a third-world country," Dr Scobie said.

"I set up the Central Coast Eye Care service to operate like an independent mini-Hollows organisation and while it is small in the scheme of things, particularly when presented with the overwhelming need there, the work conducted has been richly rewarding.

"The journeys to some of the communities we have visited have been quite difficult, but that is what makes going there so important, as the people can't travel out easily and often have never had access to eye care at all."

### A working team

Dr Scobie said visiting teams were mostly comprised of two ophthalmologists, an anaesthetist and a theatre nurse and conducted mostly cataract surgery with occasional eye trauma and other urgent procedures also done.

He said that throughout his 15-year involvement in PNG, great assistance had been provided by Callan Services for the Disabled, a Catholic organisation based in Wewak that provided team members with accommodation and transport while also conducting much of the patient pre-screening, and "toksave"-information about our service, essential for a visit to be successful.

"Although some problems, both clinical and refractive, are dealt with in the clinic, the vast majority of our work has been cataract surgery, which is well suited to short visits, needing little or no follow up, and providing almost immediate benefit, not just to the patient but to their extended family," he said.

"If older people are no longer independent as a result of poor vision, they must rely on children and grandchildren to lead them around and help them with the requirements of daily living.

"So to restore the sight of older people is to free up the entire family and in a country where everyone is needed to contribute to basic subsistence survival this is of major importance. How old the patients are, in fact, is often guesswork, as most don't know their age; interestingly, when I first went to Wewak, patients simply said they were born before, or after, The War, when Wewak was occupied by the Japanese. It obviously left an indelible impression!"

### Help still needed

Dr Scobie said that while there were eight active ophthalmologists now working in PNG, most with constant problems of access and shortage of medical supplies and equipment, the need for cataract surgery remained enormous.

In his last visit, for example, to Popondetta, a short flight north of Port Moresby over the Owen Stanley Ranges, more than 174 people were treated over a two week period even though prior word of the team visit had not filtered out into the community.

"The first week was rather slow in comparative terms because pre-screening and "toksave" had been somewhat limited," he said.

"But the second week proved much busier, as by then it seemed that the word had spread that not only were we there, but that we had also sent home some very happy post-op patients.

"That meant that those who may have been fearful of coming, knowing little about eye operations, were reassured by reports of our results and started appearing at the clinic from near and far. Of all the cases conducted, 94 patients had been blind in both eyes before surgery.

"And that of course is in just one town, in one small province, a tiny fraction of the people blinded by cataracts overall. The local ophthalmologists need all the help they can get and more, to enable them to continue their work

"So it is an uphill battle to keep up with the surgical numbers, particularly now that more people are becoming aware of what surgery can achieve and are presenting for it."

Dr Scobie said while memories of some of the more extreme journeys and remote locations would long stay in mind,

it would remain the patients that he recalled most vividly. "On one visit, we operated on a husband and wife who had both been blind for some years on the same day. The look on their faces when their patches were removed and they saw each other again was priceless," he said.

"Then there was a woman who had been blind for about eight years who had a six-year-old child that she had never seen, and a 10-year-old that she hadn't seen since babyhood and for her to suddenly be able to see her children again was very moving.

"We also operated on a blind woman who had had leprosy resulting in both legs being amputated, and when you see such suffering and stoicism it's impossible not to be affected by it."

Dr Scobie said he was very grateful to all the team members who had gone to PNG with him over the years, and acknowledged the great work still being done in PNG by Dr Booth and her team.

"It took a great deal of soul searching to draw a line under this work and I'm sure I'll feel hollow when June arrives and there is no journey in the offing," he said.

"But I have been honoured by the support our little organisation has received and my only disappointment is that I have not found anyone to take over the team in my place.

"However, we will still go on supporting Dr Pahau to help him help the people of PNG."

Ongoing funding for this service is currently being provided through AuAID's Avoidable Blindness Initiative, managed through the RACS International Projects department as part of the Vision 2020 Australia International Consortium.

— With Karen Murphy



Dr Scobie with some of his grateful patients