

SEE WITH YOUR OWN EYES

Israeli Eye Doctors in Mauritania

by Ruth Seligman

Israel has been sending eye doctors to Africa since 1959. For 40 years teams of Israeli doctors have eagerly taken up the challenge of treating preventable blindness and disease.

It is July 11, 1999, a hot, sunny day in Nouakchott, the capital of Mauritania, in northwest Africa. Five hundred people sit patiently on the sandy ground outside the country's only hospital. Word has spread that two doctors have come to operate and cure people of blindness.

The words they have heard are true. Two Israeli doctors – Dr. Irit Rosenblatt and Dr. Anat Robinson, senior ophthalmologists and eye surgeons at the Rabin Medical Center (formerly Beilinson and Hasharon Hospitals) – have just arrived in the country. They have been sent on a short-term mission of seventeen days by MASHAV, Israel's Ministry of Foreign Affairs' Center for International Cooperation. It will be a moving and memorable experience for them and for the people of Mauritania – a humanitarian mission of mercy that will also be significant from a political point of view.

What motivated these doctors, both with heavy work schedules in Israel, to undertake this mission? Dr. Rosenblatt, whose work day includes four to five operations every week, also teaches at the Tel Aviv University's School of Medicine, while Dr. Robinson, in addition to her work at the Rabin Medical Center, is also currently serving as the Chief Medical Officer of the Army Medical Corps. Both regard ophthalmology as a most interesting and most important branch of medicine. "We are working in a wide field of medicine," says Dr. Rosenblatt, "since, through the eye, we can evaluate the course of many diseases. Even breast cancer, for example, can often be detected through the metastases of the eye. Similarly, the first sign of AIDS is often seen in the eye. "Over and above all, there is something very special about being able to save and give sight – and even more so in a country such as Mauritania where so many are blind unnecessarily due to untreated cataracts.

“In the Western world,” explain the doctors, “cataract surgery is a simple surgical procedure, consisting of removal of the cataract which is causing the lens or capsule of the eye to become opaque, leading to a slowly progressive loss of vision. Following the removal of the cataract, it is replaced with an artificial lens which makes vision possible. In Israel, as well as in other parts of the Western world, cataracts are removed *before* the condition worsens and the patient goes blind. In contrast, in Mauritania, a country with few medical personnel and facilities, patients do go blind – as they do in other developing countries, similarly handicapped by inadequate medical resources.

“From past experience we know that blindness caused by cataracts is a major health problem in many parts of Africa. The result: many of the people there feel that the existence of cataracts leads inevitably and inexorably to blindness, which simply isn’t true – as we demonstrated during our stay. Although cataracts are a potentially blinding disease, they are a curable condition, with the cure being surgery.”

Lacking access to this surgery, many Mauritians go to native healers “whom we discovered,” notes Dr. Robinson, “treat cataracts in their traditional way. They perform an operation in which they push the opaque lens, which is the cataract, back into the eye and let it fall into the eyeball. This lets in light, but nothing else. It does not enable the people to really see.”

The two doctors were in Mauritania last summer from July 10 – 27. “Our mission, however,” stresses Dr. Rosenblatt, “was not the first one sent to Africa that included medical personnel from the Rabin Medical Center’s Department of Ophthalmology. Our department has long been heavily involved in helping to eradicate blindness in Africa.

“Although our goals were basically the same as previous delegations, our particular mission had three special attributes to it. First, it was the first time that a medical mission had been sent to Mauritania. Second,



it was the first time that a mission had been sent to a Moslem country. Third, it was the first mission that had women doctors as the team of choice. On previous missions, all the doctors have been men.”

Soon after their return to Israel, formal diplomatic ties were established between Israel and Mauritania. During their stay, however, Israel had only a representative there, Freddy Eytan, who, after diplomatic ties were formalized, became Israel’s first Ambassador to Mauritania. He was, they claim, the “moving spirit” behind the project. They also praise him for his efforts and hard work in overcoming the various problems encountered.

“The success of Eytan’s efforts,” they state, “can be measured by the fact that we did come.” In so doing, they feel they helped to play a role in changing the negative perception of Israel held by many. They realize that their mission was not responsible for the establishment of diplomatic ties but it was, they are convinced, “one stage in the cementing and forging of those ties.”

The doctors admit, however, that it was quite a surprise to see the people waiting for them their very first day “and no less than 500 of them. Seeing them, we felt we couldn’t turn anyone away. Thus, in one day we did examine all the 500, deciding who required surgery and who had conditions which could be relieved with the medications and drugs we had brought with us,”

Almost overnight, the atmosphere and attitudes changed dramatically. The reason: in and outside of the hospital, people began to become aware of the wondrous work the doctors were doing. “The people began to trust us, perhaps,” surmises Dr. Rosenblatt, “they felt more comfortable and relaxed with us because we were women. Whatever the reason, there is little doubt that we succeeded in creating an environment of confidence and respect.”

Operations were performed non-stop from morning until night in an operating theater the two doctors had to set up and equip themselves with equipment they had brought from Israel. “All we received was an empty room and a microscope.” On leaving the country, they donated much of the equipment to the hospital.

Work began every day at eight in the morning, with the first hour devoted to seeing patients who had been operated on the previous day. At this time, bandages were removed and drugs and antibiotics given. Complicated cases, such as those with glaucoma or other diseases, were also seen again a week following the operation. When the patients were given drops, they were also given a thorough explanation of the importance of using them continuously. “This is a populace,” explains Dr. Robinson, “which doesn’t understand the concept of chronic disease. We had to help educate them to the need for constant medication. In cases, such as glaucoma, for example, eye drops must be inserted everyday.”

The doctors performed every step of the operations themselves, including the giving of local anaesthesia. At the same time, there were many people around who helped them – receptionists and nurses who brought in the patients, managed the lists and helped with sterilization. These nurses were not professionally trained, “more like practical nurses, but they were eager and willing to learn. We showed them, for example, how to sterilize the equipment.”



In effect, simultaneously along with the treatment of patients, the mission also served as a teaching experience, starting with the nurses and on to the local doctors who sat in and observed every operation asking questions and following every step of the procedures with great interest. “As we operated,” says Dr. Rosenblatt, “we explained in detail exactly what we were doing. In addition, at night we gave lectures, accompanied by slides we had brought with us.”

Word of the “miracles” being performed spread quickly, “On the streets and in the marketplace,” recalls Dr. Rosenblatt, “people were talking about us and not just the patients we had treated. If, for example, in a small village, one blind man comes to us and the next day he returns home and is able to see, that news would spread like wildfire, way beyond the walls of his home.”

In assessing the significance and contribution of their mission, both Dr. Rosenblatt and Dr. Robinson feel that it definitely made an impact on two fronts – the humanitarian and the political. On the humanitarian levels they brought sight to those who without the cataract surgery they performed were doomed to a life of blindness. “In Israel,” notes Dr. Rosenblatt, “you know that you are preventing blindness, but it is rare to take patients who are totally blind and have the opportunity of giving them the gift of sight. This is really taking our profession to its highest limit. It is the ultimate satisfaction.”

Equally satisfying were the political consequences emanating from their visit. Through their presence and their work, the doctors changed not only lives, but also attitudes and perceptions.

All who work in the field of international cooperation and development are fuelled by the knowledge that they can make significant differences in the lives of the people they help. These experts are motivated and dedicated individuals whose skills and expertise, combined with their energy and enthusiasm, make them unofficial ambassadors of good-will. As it is with many who go abroad on various missions, so it was with Drs. Rosenblatt and Dr. Robinson.

Both women are eager to return to Mauritania, eager to continue the work they began. They are ready again to take time away from their work and families “for it would be a shame,” they say, “if our work ended with one 17-day mission.” Without a doubt, they or other eye doctors would be eagerly welcomed, and especially by the ordinary citizen, now aware that blindness can be cured. By August another team of Israeli eye doctors, Drs. Yaron Lang and Shimon Rumelt, had arrived and performed nearly a hundred operations, continuing the work of the first team.

For several years Israel has been working quietly and steadily towards the establishment of diplomatic ties with Mauritania. Retired Ambassador and Israeli Resident Representative to Nouakchott for two years Gabriel Azoulay laid essential groundwork, including sending a number of participants to various international courses in Israel. Today there is a small but growing Shalom Club! And this year marks the strengthening of people-to-people ties such as Drs. Robinson and Rosenblatt’s mission.

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