

# Los Angeles Pediatric Society E-Newsletter

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### MEMBERS GIVING BACK



#### TOO CLOSE FOR COMFORT, MY EXPERIENCE WITH EBOLA VIRUS

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One year ago, Ebola was still an unknown, esoteric viral infection to most Americans. The news that Ebola, which had caused over 20 epidemics in rural, central Africa over the past 30 years, had found its way to western Africa was overlooked by most of the Western World.

Last March, my pediatric colleague and fellow African traveler, Kevin White, M.D. and I were preparing to lead a medical mission team of 40 individuals, including several high school students, to the western African countries of The Gambia and Guinea Bissau. We *were watching* the unfolding story of the Ebola closely. At the time of our departure, Ebola was still contained to a small corner of Guinea, far away from our planned destinations.



Little did we know what the future held! No sooner had our team landed in The Gambia that we began to hear reports that Ebola had been isolated in both Sierra Leone and Liberia *and* that Ebola had even spread to Conakry, the densely populated capitol of Guinea. This was the first time Ebola had been documented in an urban area.

We were clearly alarmed. I hastily arranged a meeting with Chayan Dey, M.D., the Chief Medical Officer for the U.S. Embassies in western Africa. We shared dinner together in Guinea Bissau's capitol, the day after our team of 18 arrived in that country. He, along with several others in his delegation, felt that the epidemic was under control, but they *did* have concerns about the decisions the African governments may consider to stop Ebola from spreading to their nations. Dr. Dey was particularly fearful that there would be border closures between west African countries.

But the news that caused us to close our clinics was a report from The Gambia that two cases of suspected Ebola were being studied at the British-operated Medical Research Council, a facility a mere 1/2 mile from where our team was being housed. That was the proverbial straw that broke our determination to keep our clinics open.

Sadly, after months of planning and after the purchase of tens of thousands of dollars worth of medications and supplies *and* after bringing over 40 individuals to the shores of Africa, we were forced to shut our two clinics.



I felt like I stopped a parade. Since 1998 I have organized over 20 medical mission teams to Africa and have had to make some tough calls, but this was without question, the most difficult decision I have ever had to make.

One year later, the entire world now knows about Ebola. This lethal virus has infected 30,000 people in the countries of Guinea, Sierra Leone and Liberia and has taken the lives of 10,000 humans. This represents the largest Ebola epidemic ever. Fortunately, the dire predictions made last fall by some prognosticators that 1.2 million Africans would contract the disease, have proven to be (thankfully) false.

Nevertheless, Ebola has left its mark in western Africa and the repercussions of this epidemic will have long-term effects on all of western Africa. But there is good news on the horizon. Just last week, Liberia announced that the last known Ebola patient was discharged from the hospital, virus free! This is great news and we look forward to the time when our medical clinics can return to western Africa.



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On May 16 Lighthouse Medical Missions will sponsor its 7<sup>th</sup> Annual “Walk to Africa” – for information visit [www.walktoafrika.dojiggy.com](http://www.walktoafrika.dojiggy.com)