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## Medicine by Muleback

SISTER JANE DE CHANTAL BUELLESBACH, M.M., M.D.  
AND PATRICIA ZENS

For most of us in America, a medical prescription means a simple trip to the drugstore.

For most doctors in America, practicing medicine means having a car for housecalls and having equipment necessary for treatment readily available.

But in the tangled mountains of Guatemala where the Maryknoll sisters have established a hospital mission in Jacaltenango, medical equipment is precious on two counts: first, that it has come into the possession of the mission at all, due largely to the generosity of friends, and secondly, with the all-but-impassable roads leading to the Hospital Jacaltenango, that it ever arrives at all.

To bring supplies to "this impossible hospital in this impossible place" it takes four hours by jeep plus five by horseback from Guatemala City. Equipment must come

Sister Jane de Chantal Buellesbach, M.M., M.D., is a native of Milwaukee, Wis. She graduated from St. Louis University School of Medicine in 1960 and interned at St. Vincent's Hospital in New York City. She served a two year surgical residence in the same institution. She has recently spent three months hospitalized in Guatemala City recovering from hepatitis.

Mrs. Patricia Zens, also a native Milwaukeean, is a graduate of Rosary College. She received her Masters degree from Marquette University. She is the mother of four children. She has written many books for children and several articles stressing lifelong education for women.

up the mountain roads by muleback or on the backs of the Indians themselves. Patients arrive by the same means as supplies. An old man is brought in from a village four or five hours over the mountains. (Distances are measured in hours on the trail.) For all this, you hire a carrier, and you can expect him to carry 100 pounds 15 miles a day. (If he is transporting his own goods, he's likely to carry 150 pounds!) Good pay for a skilled worker in Jacaltenango, by the way, is 4 cents an hour; unskilled, 7 cents.

(No wonder Jacaltenango is called "the miracle in the mountains.")

And what of the sisters who work there? What are they able to accomplish in this medical outpost?

In a recent letter to her family, Milwaukee-born Sister Jane de Chantal (daughter of Mr. and Mrs. Joseph Buellesbach) wrote of the inception of this hospital and the progress that has been made.

In 1960 when Mother Mary Colman visited Jacaltenango, in the Cuchimatane mountains in northern Guatemala, no trained medical personnel was there. A plea, signed by the thumbprints of hundreds of illiterate Jacaltecos, moved Mother's heart to send both a doctor and a nurse to this pueblo, so isolated from its neighbors that the majority of the people have never even seen a jeep or a car. To date there is no

road into the pueblo, although one is under construction.

Sister Jane goes on: "The pueblo of Jacaltenango has approximately 4,000 men, women and children, 99% of whom are Mayan Indians and 1% of whom are Ladinos (mixture of Spanish and Indian blood). However, included in the municipality of Jacaltenango, that is, all of its outlying villages or aldeas, are another 26,000 inhabitants, so that the number served by the Church in this area approximates 30,000 — an overwhelming practice for any doctor.

Sister Rose Cordis Erickson, M.D., graduate of Marquette School of Medicine ('51) with 8 years of experience in the jungles of Bolivia, and Sister Bernice Marie Downey, R.N., Public Health nurse with a Master's from Catholic University, arrived in Jacaltenango in February of 1961. They found a church, a well-run parochial school, acre upon acre of hard, rocky land, and a pueblo full of good will and an eager desire to help in the establishment of a pre-lature hospital under the auspices of the Maryknoll Fathers. In the five years that have followed, amidst laughs and tears, hard work and hard times, hours of travel of both men and beast over the mountain hauling materials and equipment, they have succeeded in establishing an up-to-date 50 bed hospital. The hospital included male and female, pediatric and maternity wards, with a delivery room, nursery, isolation room, operating room, outpatient clinic, dental clinic and kitchen. Under construction at present is a

School of Practical Nursing to help train girls, not only from the pueblo, but from all of the Department in order to give better medical service.

We fully realize that curative medicine is by far only a small part in helping these people. From the beginning, our main emphasis has been, and will continue to be, on preventive medicine and public health. An all-inclusive immunization program was started when the Sisters first arrived and has now been extended to include not only the pueblo and its aldeas, but the entire area. Visits are made to the aldeas, and to the various pueblos by Sister, doctor or nurse every three or four months, both to teach and to treat. Through the hospital outpatient department, Public Health clinics, including well baby, maternity and tuberculosis, are conducted weekly. These include examinations, dispensing of vitamins, (INH and streptomycin in the TB clinics) and classes or instructions on nutrition, child care, cleanliness, etc.

In the outpatient department 70 to 100 patients are seen daily, apart from the specialized clinics. Every illness described in medical books is seen at sometime or another. Tuberculosis, parasites, malnutrition, dysentery, malaria and typhoid fever are probably the commonest diseases encountered. "Aire" is a common complaint in just about any portion of the anatomy, and the longer I am here, the more I feel it is a real complaint. Carrying cargo on their back, always bathing in cold river water, sleeping on a straw mat on the floor, and frequently

going without enough to eat makes one realize that these people probably don't even know what a "comfortable day" — in American terms — means. Their "aire," whether it is actually rheumatism, arthritis, or myositis, is a very genuine thing.

Surgical cases are on the increase and include such things as appendectomies, cholecystectomies, hysterectomies, intestinal perforations (many secondary to typhoid fever), cesarean sections, hare-lip repairs and fractures. The idea of an operation is still foreign to many of the people, but little by little, they are gaining confidence. Unusual pathological specimens are reviewed for us by Guatemalan doctors in the capitol. The Guatemalan doctors, incidentally, have been very cooperative, and we are very hopeful of more help from them.

The specialties available in the capitol are the same as in the States, and to date we have referred any number of difficult cases to them — cardiac, orthopedic, ophthalmological — all of whom have returned to us with excellent results. One of our Sister nurses recently spent six months at Roosevelt Hospital in Guatemala City, studying anesthesia, and in the process became better acquainted with some of our medical confrères.

In conjunction with the outpatient department, a dental clinic has also been established. This is taken care of intermittently by volunteer dentists from the states, and a local boy, trained by these volunteers for extraction work in emergencies. A recent volunteer has donated dental

equipment to us for reparative work, and we are looking forward to its arrival.

At present the hospital staff includes three Sister-Doctors (from Marquette, Georgetown and St. Louis), one of whom is almost continually riding the circuit visiting neighboring clinics. Two of the Sister-doctors have had surgical residencies. There are also four Sister-nurses and a Sister-lab technician. (One nurse and the lab technician are still in language school.) There are 12 native girls who are currently "in training," and they work to keep the wards running smoothly under the direction of the Sister nurses. Our aim is to train the natives to help their own people as much as possible. These girls, considering the fact that they had not been aware of a hospital until three years ago, are doing exceedingly well. When the School of Nursing is completed, they will receive a regular nine months' course as outlined by the government, and will receive degrees as practical nurses.

Sister Jane's report concludes with the hope that before too much longer they will be able to send several native boys to San Carlos Medical School in Guatemala City so that eventually the Sisters can move on to other mission fields. These people have the innate abilities; all they have lacked to date is the opportunity . . .

Soon, perhaps in a year, the medicine that has been brought by muleback will be transported over the new mountain road by jeep

Papal Volunteers have sponsored the construction of the road, and a University of Chicago graduate student, living here with his wife and two small children, is making a study of Indian dialect. Peace Corpsmen are full of ideas, and better diet and better sanitation are preached constantly.

The outside world is reaching Jacaltenango. Here in this remote and impoverished community, formidable obstacles of nature and ignorance have been overcome. And through these dedicated women — doctors, nurses, technicians — one more inroad of medical progress is being made.



## November Symposium

A symposium — The Meaning of Christian Marriage in the Age of Vatican Council II — will be held in Washington, D. C. November 8-10. The National Federation is one of the co-sponsors. Write to John R. Cavanagh, M.D., 3225 Garfield St., N.W., Washington, D. C., 20008 for further details.