



A humanitarian call

Yulli Tamayo-Myerson

In September 2009 I embarked on an amazing journey to the Peruvian Andes at 4,700 metres above sea level, along with five dentists from the UK. The project was run by Dental Project Peru (DPP), a charity that provides emergency dental care and education to the most impoverished and rural areas of Peru.

With basic equipment and living in basic conditions, we set ourselves the tasks of providing the villagers with emergency dental treatment (fillings and extractions), fluoride application and oral health education. Some of the villagers walked for several hours to get to us, many of whom had never seen a dentist before and had very little or no oral health awareness.

Access to the area was a challenge as the targeted communities were incredibly remote. We were based in the Apurimac region of the Peruvian Andes and offered dental services to the villages of Ccatina, Pampura, Huallhuac, Apumarca, Patirara, Asacasi and many more as the word of our arrival spread.

For the first 3 days of the trip we set up camp in Tambobamba and serviced the Asacasi community and others in the vicinity. This was a community previously visited by the project and thus the incidence of decay had reduced dramatically. The effect of the oral hygiene education previously imparted by DCPs was obvious. The number of fillings far exceeded the number of extractions and we managed to provide fluoride treatment to over 150 children.

In the second half of the project we were based in Pampura. Unfortunately this community and its surroundings has very little access to health care and this was the first time the project has been to the area. There was no road access until early this year.

In Pampura, the incidence of dental disease was much higher and the number of dental extractions was greater than in Asacasi, due to the very limited level of oral health knowledge. In Pampura we were able to provide fluoride treatment to a further 120 children, but emergency dental treatment and oral health education was the priority in this area.

Dental extractions on people of the Andes were on occasion challenging as their bone is denser; the roots of

their teeth are much longer and with complex morphology.

In total we provided dental treatment for more than 500 people, applied fluoride treatment to around 300 children and visited 10 schools – teaching oral hygiene education, and providing free toothbrushes and toothpaste to children and adults.

This has been an immensely rewarding experience, and although physically, mentally and emotionally draining it was heart warming to see what changes could be made, and it was wonderful to see those little faces full of appreciation at the end of the treatments. Regardless of the pain and fear of the unknown, they were always keen to give us a smile!

Treating patients with the very basic of dental equipment – no suction – truly makes one appreciate what we have back home. There is a lot to be learned by working alongside a hugely qualified dental team. This trip has helped me achieve further training and experience in emergency dental treatment and initial assessment, extraction techniques, patient management, management of multiple cavities, tooth morphology, how to overcome language barriers, organisational skills and logistics and much more. It is very rewarding to see how much our skills are needed, appreciated, recognised and used to the full scope of practice.

There are many opportunities for Dental Hygienists and Therapists to be part of humanitarian projects. With natural disasters like the Haiti earthquake on 12 January 2010, leaving millions of people in extreme poverty and total devastation, the humanitarian call is now greater than ever.

The need is great not only abroad in third world countries but also in the UK. Volunteering projects where our skills can be of huge help are currently running in the

About the authors:

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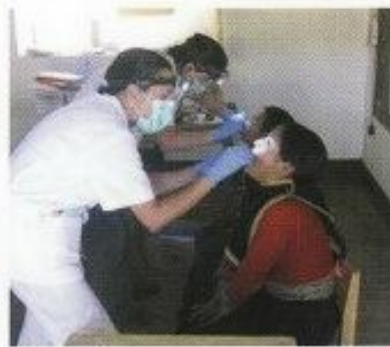
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UK as well as overseas, with organisations such as Dentaaid (www.dentaaid.org), Crisis (www.crisis.org.uk) a national charity for single homeless people and not to mention Dental Project Peru, a Scottish Charity targeting the remote areas of the Peruvian Andes.

Volunteering for projects like Dental Project Peru is a highly educational experience and a great opportunity to grow personally and professionally. It is also an opportunity to put your skills to the test surrounded by wonderful people and the amazing views of the snow peaks of the Peruvian Andes.

This would have not been possible without the help of all my sponsors, who donated £1,200 through a JustGiving webpage set to raise funds for the project.

To find out more about Dental Project Peru and how to get involved with the project, visit www.dentalprojectperu.org.



A PERSONAL VIEW

Special thanks to the rest of the team of the September '09 DPP trip, Jacqueline Kotula (founder and director DPP) and to my husband Matthew Tamayo-Myerson for organizing the details of my trip. Thank you all for your support, good sense of humour, patience and above all your immense kindness.



Team DDP Sept '09:

Irene Kaimakamis (BDS),
Ajay Samuel (Maxillo-facial surgeon),
Eva Brynlarska (BDS),
Fiona Beland (BDS),
Yesenia Yopez (Dental Surgeon, Peru),
David Wilson (BDS),
Daniel Salasar (guide/interpreter), Leo
Tupayachi (driver/oral hygiene educator)
and Jose Luis - Pepe (driver/sterilisation/ medication).

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