

3rd March, 1980

The Hon. Forbes Burnham, Prime Minister  
Public Buildings, Georgetown

Dear Prime Minister Burnham:

We have been asked to pay for recent GDF flights into the interior to take emergency cases into Georgetown. This means we will not be able to send in emergency cases and will condemn some persons to death. We will not be able to continue as we have done in flying people outside our community because the cost will seriously affect our production. The fact that it will affect so many outside our community is very upsetting to us. Too many people than we can enumerate have been brought into Georgetown and maintained at our headquarters here either while they are getting treatments or their relatives are treated. We have actually brought in more people from outside our community than those in Jonestown. We never turn anyone away. We help with food and lodgings at our headquarters.

One person had body lacerations. In other cases there were cut tendons, concussions. One woman was hemorrhaging for two weeks and when she reached Georgetown, she was operated on for a pelvic mass.

It's not that we wouldn't be very happy to make donations to the FNC but it would be helpful at least if the cost of the flight could be more reasonable. We made a donation of \$200 worth of chickens and \$500 to the FNC so we are certainly glad to be supportive. We've saved Guyana from many of these mercy flights by using private flights and our boat just last week took a mother and baby in from a neighboring community. If we had to have a lot of trips into Georgetown, we'd be in real trouble. Fortunately, our medical staff is very competent and they have taken care of more medical emergencies for our neighbors as well as our own community than we could enumerate. However, in an emergency, the GDF plane is the only one available quickly.

We are willing to make up a goal for the FNC each month. We provided movies this week and other weeks in Kaituma so that our FNC there could make money. We would naturally want to help in any way we could. But we were told by several officials that there was a protest over our use of GDF flights by one Minister. According to these sympathetic officials this one Minister doesn't like us and we feel it's a shame that this action is being done for one reason; this hurts us deeply. We understand economic austerity but we deplore personal vendettas.

We are doing all that is in our power to help Guyana's problems. If we could get certain things behind us such as the John Victor case, the problem of having our doctor licensed, and the problem of having our school fully recognized, we could branch out and every dime could go into the economy in a direct manner, through goods and services and through other cooperatives and facilities that Guyana is undertaking. If we are given these basic assurances that we need to function and expand to our total self-sufficiency with our production,

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we will certainly never mind paying the emergency flights for ourselves or for anyone else, no matter how many times duty would call.

At this time, however, we will have to cut down the service for the outside community and this is devastatingly painful to us because someone doesn't happen to like us. This kind of vendetta causes racist smears to come on Guyana but we are an enduring people.

Recently, a woman needed emergency attention for a special urological problem. It would have cost her life if it wasn't possible to have an emergency flight. We don't want to reflect on Brigadier Trice or anyone in his department. They have even given up their own seats on the plane to accommodate emergency cases. In one case, seats were given up for an Amerindian woman and our doctor who accompanied her into Georgetown. We just want you to know that this will drastically limit our services. There is a terrible strain on us when we are trying to be conscientious and respond to community needs for care. When there is an accident in the area, people are sure to come to us and if our medical staff can't take care of it, it will be overwhelming to our conscience. We have, in the past, been able to offer this service. In fact, people in the neighboring communities were very grateful for the GDF planes and when they would complain about the hope and the level of medical care they received at Mathews Ridge Hospital, we would always point out the excellent public service of the GDF.

We would certainly do the best to continue treating people when they come to us even though we couldn't fly them into Georgetown. But we even have a problem in this area because some of our specialized equipment is still in customs. This means that some types of specialized surgery is impossible for us to do if we don't have the equipment. Even so, some very complicated feats have been undertaken, each time successfully, and our doctor consults with doctors on the medical net and Stateside and all over the world. They all speak highly of our doctor's competence. Dr. Schacht never says a critical word on the medical net but only praises the medical facilities here. Those doctors on the medical net have gone to academies where they have had the best possible training so the consultation is very helpful.

It would be absolute chaos for Dr. Schacht to have to leave the area to train in Georgetown in terms of the press. We have to be sure we have a doctor here because of the concern and interest of people in the US, and because of those who have been critical in the past. Our doctor is qualifying himself everyday and from what we have heard the area has always been served by paramedics so since he is more qualified, much more, than the average paramedic, what is the problem? We have received no complaints from those he has treated. And those he has consulted with have praised his thoroughness. We will spend hours on the medical net. He is much needed from the standpoint of this community as well as the neighboring communities and he needs to be put in the position to be of benefit to the entire Northwest.

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We are very grateful for the wonderful care people are receiving in Georgetown. We brought a woman, Elaine George, and her baby Steven in from Kaituma (where she lives) on our boat this last trip and we were very moved when a doctor came off the tennis court to see the baby even though it was a holiday. He was very kind and never complained.

Our doctor had to treat the baby until the boat could leave because the baby couldn't even have traveled when the mother first brought him to us. That would have been a very embarrassing situation for Mr. Hope who was treating him because the baby was dying. No matter what skills he has, a lot of information comes back to us that he has operated on people when he doesn't know what he doing. You can check into this for yourself. However, the conditions with him have been much better since the Ministry of Health had a dialogue with us and with him, much better. We are very grateful for the intervention of the Ministry which prevented antagonisms.

Another baby also would have died in the Mathews Ridge Hospital. This baby, Shad Hudson, weighed only 9 pounds when he came to us and he was 11 months old. In just one day after he came to us, he gained 7 ozs. Our doctor said that it was just a matter of hours and he would have died; the baby was almost lifeless. But after just 24 hours of care, he gained the weight and became very alert. At Mathews Ridge he was being treated for something else and the medical regime he was under wasn't helping at all. The problem is that the man in Mathews Ridge, Mr. Hope, refused to release the baby to come to Georgetown or go anywhere else for treatment. Finally the parents just insisted on leaving with him. The parents said he was being given some cough syrup, Ferrol Cough Syrup, and was just dying from gross caloric deprivation. This was due to lack of adequate food as well as the inability to gain weight due to his medical condition. There was no fat on him at all. (By the way the first baby was suffering from Chronic upper respiratory tract infection).

Another case Dr. Schacht worked with was a 15 year old who had diarrhea for a year. He was given a couple of tablets by the Mathews Ridge Hospital. He was found by Dr. Schacht to have Giardiasis, an intestinal parasite Trichuriasis (which is a worm), likely also Amabiases, and a severe deficiency of iron. He's being treated now in our facility. (His name: John Adams)

John Phillips, 77 years old, came to us for help. He had peripheral deterioration of the nerves and he had been given some 30 injections for an ulcer over a period of two weeks in the groin just before the onset of this disorder. A full medical history was done at our clinic and now Dr. Schacht has taken this situation into consultation with medical specialists on the ham radio. The man is hardly able to feed or dress himself. They ruled out just about everything and the symptoms appear to be something similar to arsenic poisoning. It is possible that he had injections of a medicine that is metallic based. The neurologists were not critical in their analysis but we did make it very clear to them that he could not have gotten any treatment like this in a Guyanese medical facility. We went on to explain that

he is living near a border area and there were all kinds of ways that he may have done this to treat himself. The neurologists did confirm that it appeared to be something that could have been caused by a metallic based injection and they wanted to rule out any possibility of a social disease which we are doing right now to study that possibility thoroughly. We will get back to the people on the medical net about this man's problem. We have not administered anything but advised him to come to Georgetown as soon as possible and even offered transportation on our boat and housing in our headquarters. We asked him to stay with us in Jonestown until that time, however he went back into the bush and said he would come back. We would very much like him to see a specialist immediately. One thing that would have been helpful at the time is that if we could have taken an x-ray on the spot we would have been able to see immediately if there was a metallic poisoning, however our x-ray is tied up in customs.

We have had many cases in which we have been able to treat snake bites effectively for people in the surrounding area. We have treated them when they came to us for help and also our workers have gone outside the community to treat them. Fortunately, teaching people how to work in the fields, forests, around water holes, we've never had one snake bite in our community. Our workers have all been given classes in snake bite treatment.

As we have mentioned to you before, when we talk on the medical net, we are always very positive about Guyana, the fantastic medical care given here, the helpfulness of the government and the friendliness of the people. One doctor was so impressed that he offered to come for two months and give medical services free of charge to our District.

Please take note of the necessity of our doctor to be of service to Jonestown as well as to the larger community. We hope that the personal animosity of the one Minister will not deter the facilitation of this problem because innocent people will suffer if that happens.

We thank you for your attention to the matters in this letter and for all you do for Guyana.

Cooperatively yours,

*Sharon Amos*  
Sharon Amos

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