Words of the Editor in Chief:

The search for a safer Opioid.

Most of us have been a witness of a patient, a relative, a neighbor or even a member of our own family battling addiction to opioids. The use of painkillers following a single operative procedure may have induced a long-life dependency.

Healthcare specialists are trying to find a way to stop this Opioid epidemic by compiling data since 1996 to the present and pinpointing the source of the most prescribed painkillers. Doctor’s offices have surpassed Emergency Rooms in prescribing pain medication. Now the hunt for a better painkiller or an Opioid alternative is on to help this healthcare crisis, affecting so many.

In the late 80’s, a researcher at the Planck Psychiatric Institute, Christopher Stein, inadvertently injected the paw of a rat and noted that the injected area was insensate and swollen. He discovered then a powerful painkiller called Morphine which will open new avenues for the search of a new painkiller.

In the early 2000’s, we noted an Opioid dependency certainly because more than 25% of patients benefited from an opioid prescription to relieve chronic pain and discomfort. Other forms of illicit drugs were also sold as street drugs. They were more potent than Heroin.

In 2015, around 2 million of American suffered from a prescription addiction of these substances. More than 42000 perishes as victims of this epidemic and later, the federal government declared the opioid epidemic, a public health emergency.

If the misuse of Opioid was documented centuries ago, today the roots phenomenon started in the 1990’s when physicians over-prescribed powerful new opioids manufactured by multiple companies to improve the quality of life of the suffering. Higher and higher doses became necessary to block pain and the phenomenon of tolerance was noted.
Edward Bilsky, also, a researcher at Pacific Northwest University of Health Sciences has demonstrated how opioid receptors can be found in any part of the body notably the brain and the spinal cord. A physiologic response to an injury activates the release of Dopamine from those receptors, causing euphoria. Others will regulate breathing especially in an opioid overdose rendering the respiratory system to be less responsive to the rise of carbon dioxide in the bloodstream reaching a loss of consciousness. Death may follow if emergent resuscitation is not provided.

Researchers in the healthcare system recognize the medical necessity for safer opioids with fewer side effects, aiming at controlling biomechanically this cycle of addiction in the goal of treating pain without killing the one taking the medication.

The CDC separates opioids in four categories:

1- Synthetic Opioids other than Methadone: Tramadol, Fentanyl etc.

2- Natural and Semi-Synthetic Opioids (Morphine, codeine, Oxycodone, Hydrocodone etc.)

3- Methadone (for addiction to Heroin and Morphine)

4- Heroin (Illegal drugs synthesized from Morphine)

Christopher Stein found that unlike the receptors in the brain which are always receptive to opioids, the peripheral receptors are exposed to an acidic milieu allowing perhaps the formation of new drugs less potent. He found out that the acidity modifies the opioid molecule as well as the receptor itself.

He worked with mathematicians to change the atom of the Fentanyl molecule, resulting in the creation of a new compound NFEPP which has been already tested in rats at the Charity Hospital and the Free University of Berlin. None of the central side effects of the regular Fentanyl were seen in this new “synthetic” Fentanyl. The initial results were encouraging because of the elimination of the central side effects like euphoria, respiratory depression seen in the addicts on overdose.

It will take time to refine the product and have it ready for public use. Perhaps a safer opioid will surface sooner than later to help the one addicted to a painkiller.

Maxime Coles MD

Addendum:

Between 2008 and 2015 a new Study based on large medical center admission in West Virginia found that " Endocarditis" related to drug abused, doubled. This life-threatening condition of the heart inner lining and valves was a reflection of the usage of the dirty needles of the addicts to shoot Heroin or other injected substances.

Often, the drugs were mixed with Vicodin (Hydrocodone) and/or Oxycontin (Oxycodone) and/or Fentanyl, explained. Dr Bates of West Virginia University.

One needs to remember that Endocarditis can be treated with IV antibiotics for six weeks as recommended by the NIH, allowing further repair of the valves. Nearly 64000 Americans died of an overdose in 2016 but in West Virginia, a higher opioid death rate among 12-15 years-old, nearly 13 deaths per 100000 is seen.

Addicts have little access to medications recommended for Opioid Independence like Naltrexone and Buprenorphine.

The United States of America does have a crisis affecting thousands.

References:

1- CDC- Drugs Overdose Death Statistics 2000-2016

2- CDC- Breaking Down of Opioid Types

3- The Hunt for an Addiction-Free drug (Jonathan Keats / Discovery Magazine)
UNE CONVERSATION INTERESSANTE AVEC UN PATIENT ET SA FEMME.

Une jeune femme de trente ans a amené cette semaine, à mon cabinet de consultation, son conjoint de plus de quatre années pour une évaluation psychologique en vue de ce qui pourrait être fait pour améliorer la situation affectueuse tendue et précaire qui prévaut au sein de leur foyer. D’après la jeune femme, l’homme qu’elle aime et dont elle cherche à satisfaire les moindres désirs, semble être incapable de comprendre à quel point elle l’aime et combien elle veut être avec lui et à ses côtés, pour le supporter et le seconder. Malgré les deux petites entreprises qu’ils dirigent conjointement dans un atelier, et qui rapportent assez d’argent pour subvenir aux besoins de la famille, l’homme n’est jamais heureux. Il ne se croit pas digne d’être aimé. La femme pense qu’il ne leur manque de rien ou presque et que l’homme est de mauvaise foi.

Elle commence à être très frustrée et se demande s’il existe quelque chose d’autre à faire pour améliorer ses rapports avec son conjoint ? Je lui ai expliqué que la vie de tout homme est dans son histoire, donc dans son passé. Malgré les deux petites entreprises qu’ils dirigent conjointement dans un atelier, et qui rapportent assez d’argent pour subvenir aux besoins de la famille, l’homme n’est jamais heureux. Il ne se croit pas digne d’être aimé. La femme pense qu’il ne leur manque de rien ou presque et que l’homme est de mauvaise foi.

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Face à ces enfants qui vivent dans l’indifférence des autres, J’ai envie de crier : oh Fleurs qui naissent et meurent derrière la montagne que personne n’a vues ni connues. !!! Comme on passe parfois tout à coté sans le savoir !!!

L’amour et l’affection sont des ferments qui se cultivent dès le plus jeune âge. Les foyers se doivent d’être un lieu de partage, de discussion franche axée sur la compréhension, le pardon et le respect mutuel. Quand ils sont bien équilibrés, ils représentent pour les jeunes âmes un terrain propice à leur épanouissement. Voila le vide qui a bien fait défaut à une enfance tourmentée et que les années subséquentes n’ont su combler. Il n’y a pas de dose ou de potion médicinale pour guérir une âme aride. Je n’ai pas trouvé de médicaments appropriés à ce cas tout particulier. L’enfance et l’adolescence sont des moments critiques de la vie de tout chacun. Les choses qui nous marquent le plus, ce sont les souvenirs de notre enfance qui nous accompagnent jusqu’au dernier moment de notre vie. J’ai proposé la psychothérapie individuelle et la thérapie de famille comme les seuls greffons possibles pour ce cœur solitaire sur lequel ne se sont déversées que de rares pluies d’affection et de tendresse et pour lequel n’ont jamais soufflé ces vents de tendresse qui auraient bercé son enfance, comme tant d’autres vies à leur jeune âge, et qui l’auraient rendu bien plus généreux. Nous attendons pour voir comment cela finira ou si le dénouement recherché enfin arrivera.

Rony Jean-Mary, M.D.
Coral Springs, FL
4/29/2018
Marie-Claude Rigaud, M.D., MPH, trailblazer par excellence.

On December 23, 1964, she and her husband left for the USA and settled in Baltimore, Maryland, where they had a contract with Provident Hospital. She worked first as house physician, while preparing and eventually, passing the required ECFMG examination. Thereafter, she applied and was accepted for a residency training in psychiatry at the Seton Psychiatric Institute, a private Catholic Hospital run by the Daughters of Charity. The training lasted three years and she remained on staff as an attending for one year. Since Seton catered to an upper middle-class clientele, she wanted to experience serving a different population at the State Psychiatric Hospital. She then transferred to and spent a few months at Spring Grove State Hospital in Catonsville, Maryland, serving a different socioeconomic population. Although she appreciated the novel experience provided there, she decided to accept Seton Institute’s offer to return as Senior Staff Psychiatrist, supervising residents. She also started and directed a Psychiatric Day Hospital program and stayed at Seton until the facility closed its doors in 1973.

From 1973 to 1978, she was in private practice in Baltimore County, at the border of Baltimore City and she was on staff at St Joseph Hospital. However, she made a move to Aurora, Illinois when her husband found a position there. She started and remained in private practice till the early nineties when she became disillusioned with the trend of modern psychiatric practice that favored pharmacotherapy over psychoanalysis and psychotherapy. Pursuing a lifetime love for Public Health, she enrolled and completed an MPH program at the University of Illinois in Chicago. She states she clearly remembered the interviewer making the snide remark that she may not handle the course load because of the math required. Undaunted, she took statistics first, passed it with flying colors and proceeded to become the Valedictorian of the class on graduation day, receiving the Alan Donaldson Memorial Award from UIC. She was able to achieve this in one and half year. She was and remains attracted to the social/occupational aspect of psychiatry.

Raised by parents who expected no less than outstanding performance at school, Dr. Rigaud never thought twice about anything other and always found a way to succeed when barriers were in the way. It started with her choice of attending medical school which for the longest time was an all-male bastion. Her entering class included seven females out of a total of forty-five. She graduated among the top three in 1962. At the time, already married to her physician husband one year ahead of her who was doing his national public health service in Limbé, she chose Plaisance as the site of her own service to be close to her spouse, a pattern she will pursue for the remainder of her career.

In Plaisance, there was no stand-alone clinic per se, but a house that served the dual purpose of residence and clinic, across the police station. By happenstance she met a local minister who had married a half-sister she never knew she had up till then. She remembers that location with fondness for its cool climate and greenery. She remained there for one year. Then she moved to Pont-Sondé because her husband had landed a position at the Albert Schweitzer Hospital in Deschapelles soon after the Flora hurricane. She remained there for about one year and took a sabbatical from work for about one year to be a mother and housewife.
From then on, she branched into a new discipline in Psychiatry that dealt with Occupational Health. She worked first as consultant for Western Electric and then in that related section at the University of Illinois at Chicago till 2007 when she decided to move to Florida where she has been living since. For the next seven years, she worked as tele psychiatrist consultant, with focus on occupational/functional aspect of psychiatry, commuting as needed for face-to-face evaluation when necessary till 2015.

Dr. Rigaud, or Marie-Claude, as she prefers to be called by colleagues, has been involved in a lot of professional, social and community activities over the years. Among the highlights:

- **AMHE.** The first and only female ever president of the CEC. She states her experience was less than fulfilling due to interferences by the chauvinistic attitude of some members. The lack of consistent support for some important policy matters led her to resign the position in 1986. Even though disappointed, she has remained a steadfast supporter of the organization she had joined shortly after its formation. She has been a member of its Board of Trustees since her presidency, serving for many years as the Chair.

- **American Psychiatric Association.** She has been an active member for a long time and has worked with it for some projects she has been working back home in Haiti. She is a Distinguished Life Fellow of the APA, participated in a number of the association’s committees and received several awards, the most recent being the APA Profile of Courage Award in 2014.

- **AMA.** She has been a member and served on the AMA HOD as the delegate of the International Medical Graduate section. It was created to help with the integration of Foreign Medical Graduates with the American Medical System.

- **Rebati Sante Mental.** This is an ambitious effort she started soon after the 2010 earthquake. The goal is simple: help restructure the mental health system in Haiti. She has been the Chair from its creation and she states she has been assisted by some dedicated compatriots: Guerda Nicolas, PhD, and Richard Douyon, MD, both of the University of Miami. RSM’s emphasis is on collaboration and partnership with other groups, such as HAPA, the Boston Mental Health group. There is a liaison with Haiti’s Health Ministry through their representative. It is working on three main projects in Haiti.
  - **Teachers training.** This is primarily spearheaded by Dr. Nicolas. It trains teachers to identify mental health issues in kids. This is a scientific approach for evaluation of kids who may have odd behavior to counter the prevailing attitude about bad conduct felt to be associated with supernatural phenomenon. A pilot program was started in Arcahaie and a second one is to be implemented in Petit-Goâve.
  - **Distribution of free neuroleptic drugs in Haiti** under the Gérald Rigaud Foundation. Working closely with the Haitian Nurses Association of Florida, and Dr. Lubin, Haitian psychiatrist from New York, *Rebati Sante Mental* obtains the meds and pays for the shipping and distribution in the country on a need basis.
  - **Mental health education of medical students** at the *Faculté de Médecine* in Haiti.

Dr Rigaud’s resume includes a long list of presentations and publications.

What is remarkable is that Marie-Claude is a mother of six children. She considers herself blessed because her husband was a very good partner in helping to rear them and she benefited from extended family help at every step. She furthermore states that family always came first. As a mother she still
carries the scar of the death of her 43-year old son who sustained a cerebral hemorrhage literally in her arms a few years ago.

She and her husband invested heavily in the kids’ education no matter the cost and are very happy with the result. All of them, even the 13 grandkids, regardless of the various ethnic backgrounds, identify as Haitian and are as passionate about the country as she is. As proof of her passion, preceding the creation of Rebati Sante Mental, she had helped create Haïti Soit Fièvre in Illinois, and worked closely with the bureau of the governor to help Haitian refugees. Whenever requested, she initiated and participated in Haitian community events, such as fundraising for a Haitian candidate replacing Barack Obama at the Illinois Senate. She has been very active, initiating and participating in a number of advocacy projects directed at Haiti, including letters to the editors, legislators, US presidents etc.…

Far from being satisfied with her accomplishments, she cites as examples of symphonie inachevée two inchoate goals:

❖ Help bring Haiti to her respectable reputation of yesteryear. She makes it clear that she loves Haiti, her country of birth, warts and all. She hopes that whenever this happens, she will be happy, wherever she happens to be, on this earth or elsewhere.

❖ Termination of a manuscript she had started a while ago about the decay of Perle des Antilles from a psychiatrist point of view. Whereas the former is not under her control, the second is achievable and she will do her best to achieve it.

Compliments au Dr Michel Hubert Pierre-Louis et son equipe de l'hopital Justinien et de l'OFATMA pour un travail bien fait.

Avis de décès:

Wesly Desroches MD n'est plus. Il a été rejoindre son Créateur après une longue bataille menée contre une maladie qui le rongeait. Nous nous souviendrons toujours de ce sourire jovial qu'il esquissait après tant d'années d'absence. Des activités de la AMHE. Sa dévotion envers sa femme, ses enfants et ses amis EST bien connue.

C'est avec beaucoup de peine et le cœur gros que nous avons appris cette triste nouvelle. Wesly m'avait paru déterminé et prêt pour ce grand voyage durant notre récente conversation.

Je veux en profiter tant au nom de la AMHE qu'en mon nom personnel, pour présenter de sincères condoléances à Marcelle, sa femme, notre amie et à ses quatre enfants ainsi qu'à tous les parents et amis affectés par ce deuil.

Wesly vivra parmi nous. Que la Terre lui soit légère.

NB: Les funérailles se feront à Laurel MD et nous publierons les informations une fois informées.

Maxime Coles MD

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Ce que c'est que la mort
Victor Hugo

Ne dites pas : mourir ; dites : naître. Croyez.
On voit ce que je vois et ce que vous voyez ;
On est l'homme mauvais que je suis, que vous êtes ;
On se rue aux plaisirs, aux tourbillons, aux fêtes ;
On tâche d'oublier le bas, la fin, l'écueil,
La sombre égalité du mal et du cercueil ;
Quoique le plus petit vaille le plus prospère ;
Car tous les hommes sont les fils du même père ;
Ils sont la même larme et sortent du même œil.
On vit, usant ses jours à se remplir d'orgueil ;
On marche, on court, on rêve, on souffre, on penche, on tombe,
On monte. Quelle est donc cette aube ? C'est la tombe.

Où suis-je ? Dans la mort. Viens ! Un vent inconnu
Vous jette au seuil des cieux. On tremble ; on se voit nu,
Impur, hideux, noué des mille noeuds funèbres
De ses torts, de ses maux honteux, de ses ténèbres ;
Et soudain on entend quelqu'un dans l'infini
Qui chante, et par quelqu'un on sent qu'on est béni,
Sans voir la main d'où tombe à notre âme méchante
L'amour, et sans savoir quelle est la voix qui chante.
On arrive homme, deuil, glaçon, neige ; on se sent
Fondre et vivre ; et, d'extase et d'azur s'emplissant,
Tout notre être frémit de la défaite étrange
Du monstre qui devient dans la lumière un ange.

Victor Hugo, Les contemplations
Mots de l’Éditeur et du Technicien du site AMHE :

Le site Internet de l’AMHE est une source importante de documentations récentes et d’archives. Le E-journal contient plus de 150 articles qui ont été publiés pendant ces 6 dernières années. La Digital Library contient les archives des conventions passées ainsi que plusieurs autres documents pertinents à la AMHE. Soyez familier avec le site et facilement naviguez pour mieux apprendre sur nos missions médicales. Un rapport figure dans le E-JAMHE ainsi que nombreux articles publiés par nos confrères en Haïti et aux États-Unis, Visitez notre librairie médicale et prenez du temps pour lire le JAMHE alors que vous certainement continuerez a recevoir le Newsletter de l’Association.

Jacques Arpin et Maxime Coles


Published on the AMHE Facebook page last week
Articles parus sur la page Facebook de l'AMHE durant la dernière semaine
She’s a 91-year-old practicing physician, granddaughter of a slave, and one of the first doctors to treat women with opioid addiction. - to A Surgeon’s Leadership Symposium: The Drama of Trauma⁹ - A new way of performing bunion surgery via micro-incisions. MC - 4 symptômes du cancer de la prostate dont les hommes ne parlent - Thanks to this method, people with Parkinson's disease will no longer have a spasm! To give hope to the 10 million people living with this disease! And more…
Joseph Jean-Gilles

Joseph Jean-Gilles is a major Haitian artist who is represented in the permanent collection of the Museum of Modern Art in New York and also in the permanent collection of the Museum of Modern Art of Latin America, in Washington, D.C.

Born on the 26 February 1943 in Hinche, Haiti, Joseph benefited from the teachings of Dewitt Peters at the Center of Art in Port au Prince, Haiti. He chose to base his work on the myriad flowering forms and rolling hills of Haiti topical landscape. He paints the Garden of Eden of his homeland. He is a close student of the diverse colors and shapes of the plants and trees. He presents an idealized image of the nature which blend with the reality of the toy house and the doll-like farmers working the garden. He has grown away from the spontaneous reactions and impressions which are the hallmarks of the visionary artist. He is an adept of the 19th century French painter Rousseau the Douanier.
A Nurse. A volunteer

Will you volunteer with us in our next medical mission? Nurses who volunteer have a tremendous impact in the world’s healthcare and more specifically in developing countries. These trips promote basic and preventive medical care. Many communities in impoverished regions do not have a medical clinic, and villagers must walk for miles just to see a doctor.

Recently, we volunteered at Justinien Hospital in Cap-Haitien, Haiti. Every area of the hospital needed help. Our services, as Nurses and Nurse-Practitioners, were valuable in the gynecological clinic. Thankfully, our team came in with a pathologist armed with her microscope and supplies to complete pap smears.

For five days, we assisted in the collection of cervical tissues to produce samples for cytological examination. We helped with the labeling, the data collection and especially in the proper handling of the specimen. The first day consisted in the usual clinical evaluation of the patients with gynecological complaints, routine or complicated follow-up on surgical patients. By the second day, our workload doubled; words had already gone around that we were doing pap smears at no charge. The room quickly filled with patients between 20 to 78 years old. Only few of them had ever benefited from a Pap-smear study.

We have heard from those who previously volunteered their time, energy and expertise with the AMHE; they experience a tremendous sense of accomplishment. Most of these volunteers provide healthcare services in places where the underprivileged population benefit the most. Such mission will not only help develop your career, but will increase your sense of compassion, confidence and skills. It is rewarding for nurses who volunteer to feel the impact of their actions in areas with such desperate needs.

Elizabeth Leconte Hricko RN

Upcoming Events
Dear AMHE members, family, and friends:

There is still time to register for the 2018 AMHE Convention in Baru, Colombia. Please pay your 2018 membership dues and receive 10% discount when you book your hotel rooms NOW! Members who have not yet registered can get an additional 10% off by having a friend or family register to attend the convention.

The Convention information is located at http://www.amhe.org/convention_2018.html
Ask us about Special Airfare rate
Register for the Scientific Sessions (CME)
Hotel Rates
Book Hotel Online
Downloadable Hotel Form
FAQs

For information about hotel accommodations and roommate, please call our Administrative Assistant, Ms. Myriame Delva at (718) 245-1015. For best prices, book your hotel room and register early.
For additional information, contact:  AMHE –
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Sincerely,

Karl Latortue
Karl Latortue, MD
Vice-President, AMHE
Chair Convention Committee