

SOUTHWESTERN NEWS

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FELLOWSHIP IN LIVER DISEASE PROVIDES YEARLONG TRAINING TO A THIRD-WORLD PHYSICIAN

DALLAS – Jan. 13, 2003 – Dr. Ponsiano Ocama, a physician from Makevere University in Kampala, Uganda, was offered the opportunity of a lifetime six months ago: to study viral hepatitis under the tutelage of a national expert on liver diseases at UT Southwestern Medical Center at Dallas.

In Kampala, 15 percent of its 2 million population has hepatitis B – a viral disease that causes inflammation of the liver – but few health professionals are qualified to manage their treatment.

During the yearlong fellowship made possible by Eleanor Butt Crook, Ocama is working with Dr. William M. Lee, director of the Clinical Center for Liver Diseases at UT Southwestern, to learn strategies for the diagnosis and treatment of viral hepatitis.

Ocama says he is eager to help serve the healthcare needs of the people of Uganda, an east African nation of 22 million.

“I am happy to have this opportunity but it’s also a big responsibility,” he said.

Crook donated \$50,000 to create the William H. and Eleanor Butt Crook Fellowship in Liver Disease. She said she established the fellowship in memory of her husband, who served as national director of Volunteers in Service to America and later was a U.S. Ambassador to Australia.

“When Will Lee proposed the idea of having a physician from Uganda come to UT Southwestern to become a specialist in liver diseases, it caught my interest,” said Crook, a member of the board of directors for San Antonio-based H-E-B, the independently owned chain of food retailers (including Central Market stores), and Bread for the World, a national citizens movement that lobbies decision-makers for legislation to help the hungry. “I have followed the overall tragedy of Africa’s health problems, and I am pleased to have a tiny part in acknowledging the desperate need for qualified physicians.”

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Lee, holder of the Meredith Mosle Distinguished Professorship in Liver Disease, said inadequate diagnostic and screening tools and meager supplies of life-saving medications further hinder the treatment of people in Uganda and the rest of Africa.

“In the U.S., we have new medications that are effective in eradicating hepatitis B and C,” said Lee. “But the conundrum is figuring out how to apply these treatments in a developing country where the medications are scarce and the laboratory backup is not necessarily there.”

When Ocama’s fellowship is completed in the summer of 2003, he will return to Kampala to serve the local population and share information he learned while abroad with other physicians at the Mulango Medical School.

“Our collaboration with MediSend/International in Dallas should provide qualified hospitals in Uganda with medical supplies and equipment in support of Ocama’s work,” Lee said. MediSend is a nonprofit, apolitical organization that collects surplus medical supplies and equipment for distribution to developing countries.

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