

George Subraj – President of Zara Realty - Life Saving Mission Takes Flight Again

By Richard B. Mahase

Another Kidney Transplant Surgery Set for March 18

NEW YORK - President of Zara, Mr George Subraj, for most of his life applied the message of the popular Chinese proverb to many of his day to day decisions: Give a man a fish and you feed him for a day. Teach a man to fish and you feed him for a lifetime.

Because of the overwhelming truth in this maxim, George, like his brothers Ken and Jay are consistently funding enormous, digitalized education centers; for children and adults, both in Guyana and New York, USA.

But no one can deny that George Subraj's philosophy and philanthropy extend beyond the essential discipline of education: it is about saving life itself! And even in doing this, as you will read, he is still providing ample educational opportunities for experienced, qualified doctors, nurses and other top health care specialists – in fact he is embracing the entire health care system in Guyana with another Kidney Transplantation, surgery is scheduled for Thursday, March 18, at Dr. Balwant Singh's Hospital, East Street, Georgetown. The patient is Gopinath Rampersaud, 34, of 48 Race Course, C/ton, Berbice: the donor is his brother Kapildeo Rampersaud, 32.

Once again Dr. Rahul Jindal leads the experienced medical team; which includes the familiar name of Dr. Arthur Womble; Dr. Alden Doyle; Dr. Stephen Guy and Ms Tara Farley. The following team is providing their medical services pro bono while Mr. Subraj is paying for the cost of the trip which include business class airfares, ground transportation, accommodation, meals and misc expenses; the medication, pre and post-surgery, has been promised to Mr. Subraj and his team by the Ministry of Health, Guyana.

Kidney Transplantation became a reality in Guyana in 2008 when Mr. Subraj reversed the trend of exporting, at a very high cost, an extremely ill patient. Renal Failure patient Munesh Mangal, then 18, was given six months to live. His only hope of survival was through overseas intervention at the impossible cost of \$36 000(US). When the plight and dire circumstances of the teenager was brought to George's attention he was shocked. Being one who is proactive and who contributes significantly to help others, found this trend to be onerous and almost humiliating. It is a situation whereby the sick one is literally moved from place to place seeking help. That's when the idea

struck George – rather than keep appealing to the sensibility of the potential donors - why not try to have the surgery done at home? Why spend larger sum of money and risk the patients' life by taking them to the medical professional abroad, let's bring the experts to the patients.

The idea, though seems far-fetched, was realized after months of research and investigative work and several trips to Guyana. The Guyanese nation inhaled deeply and counted the days to this dramatic, first-ever organ transplant surgery. Then George flew into the country with an impressive Walter Reed Medical Centre Team led by Dr. Jindal and the rest became history, as Munesh Mangal became the first Guyanese to have undergone a kidney transplant. He is still alive and well. The surgery was performed using the facilities of the Georgetown Public Hospital Corporation (GPHC). So impressed with the results, a program was set in motion to help other patients – locally! Two other transplantations were conducted in the interim by Dr. Jindal as part of the program.

Today this has paved the way for a full fledged specialty hospital in Guyana and the vision of this Guyanese Philanthropist will soon be a reality.

Not stopping at the kidney Organ, George embarked on the heart organ and in April of 2011 he was instrumental in planning and sponsoring the first set of Pediatric Heart Surgeries in Guyana. Last April, in a coincidental meeting with Dr. Gary Stephens (Director of the Caribbean Heart Institute), they set the pulse of the Guyanese nation racing once again when Pediatric Heart Surgery was formally introduced there. It was for many years a dream of Dr. Gary Stephens but only after his meeting with Mr. Subraj the vision began to unfold. Again the nation counted the days; again a miracle was in the offering; again George Subraj was motivated; and again he singlehandedly undertook all the funding.

A large team of medical experts from North-Shore Long Island Jewish Medical Centre traveled to Guyana's garden city, most for the first time, and for three consecutive

days worked around the clock, night and day, to complete 8 successful cardiac surgeries. It was a brilliant, epic effort by a team who worked without charging a penny. All through this, hovering in the wings and holding the hands of the distraught relatives, giving them hope and confidence was George Subraj and his coordinating team. Once again George had established the necessary linkages to have life-saving surgery done locally!

As for the Kidney transplant schedule for March 18th, several

potential patients were identified: Gopinath Rampersaud, Rory Hamilton, Jason Greene, Allan Roberiero, Mark David, Vishundayal Persaud, Daywantie Doonauth, Laurie Lewis and Cheron Davson.

Dr. Jindal then disclosed that, "We could not do all of the patients at one time even if we wanted to. We have to do them one at a time.

These are very, very complicated operations; each taking about five hours...Taking the kidney out is a very long operation and the post operative



Pediatric Surgery Medical Team



George Subraj (right) and Dr. Gary Stephens



George Subraj (left) and Dr. Jindal



Dr. Jindal and George with team at Dr. Balwant Singh Hospital



Gloria and George Subraj with Munesh Mangal and mother

care is very important, so we can't do more than one right now."

In addition, he said that the operations will serve as training grounds for staffers of the Balwant Singh Hospital.

Dr. Balwant Singh's Hospital became the venue of the surgery after the GPHC stated that they

had suspended the program to formally develop the system. Because illness does not take a time out, Dr Jindal had to immediately find an alternate and suitably equipped operating theatre. After examining the facilities at the Dr. Balwant Singh's Hospital he felt assured that they would be capable of undertaking the procedure there.

But in a heartbreaking twist with surgery set for Gopinath Rampersaud, March 18, his father passed away during the writing of this story, just under ten days before. All X-rays and laboratory tests have been completed for both himself and his brother, Kapildeo. The hospital has been officially booked and the eager staff is looking forward for this important day. The flights of the medical and coordinating teams from various locations across the United States, have all been confirmed; so have all the accommodation and every other important and necessary arrangements.

Whatever the immediate decision, one thing is for sure; George Subraj will continue to vigorously push for more and more medical experts to travel to Guyana, not only to perform complicated surgery and leave but to share and teach the local community. This he hopes would save many more lives and spare others the humiliation of having to find thousands and thousands of dollars in complex circumstances.



Dr. Rahul Jindal and Munesh with his mother.



Gopinath Rampersaud (sitting) will undergo kidney transplant on March 18. His brother Kapildeo Rampersaud (standing) is the donor.



George Subraj: President of Zara Realty

Dr. Jindal Part of Historic Islet Cell Transplant

at Walter Reed Army Medical Center

Indian-born Transplant Specialist at the Walter Reed Army Medical Centre, Dr. Rahul Jindal, who gained sky-high admiration from the Caribbean community through the sponsorship of president of Zara Mr. George Subraj, for Guyana's first kidney transplant was recently part of another historic team that conducted a successful Islet Cell Transplant.

Here is an excerpt of a report from the Diabetes Research Institute in the US.

A 21-year-old airman severely injured while serving his country in a remote area of Afghanistan is recovering at Walter Reed Army Medical Center (WRAMC) in Washington, D.C. after several surgeries and an unprecedented transplant.

Airman, Tre Porfirio, was struck by three high velocity bullets on November 21 and was operated on twice by surgeons in forward combat medical bases in Salerno and Bagram, both in Afghanistan.

The surgeries included a rare but life-saving trauma Whipple, in which the head of the pancreas, a portion of the stomach, gallbladder,

and entire duodenum were removed. In addition, a portion of the airman's large and small bowels were also removed.

The airman was taken back to the operating room at Walter Reed by Dr. Craig Shriver, chief of general surgery, to have his entire intra-abdominal structure reconstructed. During this operation, what was remaining of the airman's pancreas was found to be damaged beyond repair from the gunshot wounds.

"The optimal procedure at this point was to remove his entire remaining pancreas to prevent further leakage of the pancreatic enzymes and control the bleeding, which could be fatal," said Dr. Shriver. "We knew that the procedure would lead to the most severe and life-threatening form of diabetes, which tends to be very brittle and difficult to control in this type of situation."

At this point in the operation, Dr. Shriver sought the opinion of Dr. Rahul Jindal, a transplant surgeon at Walter Reed and a clinical professor of surgery

at George Washington University in Washington, D.C. Dr. Jindal had training and experience in islet cell transplantation, which is considered the best hope for curing diabetes.

In islet cell transplantation, the insu-

lin-producing islets are isolated from a donor pancreas and then reinfused in a patient's liver where they later begin to produce insulin.

Dr. Shriver proceeded to remove the remaining portion of the pancreas; and



Tre Porfirio, the airman who received the transplant, with his team of doctors, Dr. Ricordi, Dr. Shriver, and Dr. Jindal.

Less than one week after surgery, there was clear evidence of pancreas islet function in the wounded warrior's liver, as shown by the presence of a specialized blood test called c-peptide. Fifteen

days after the procedure, that same blood test indicated the transplanted islet cells were functioning in the normal range.

As time goes on, the pancreatic islets in the liver will take up new blood supply and the patient's requirement of exog-

enous insulin is expected to further decrease, facilitating diabetes management and preventing the onset of complications of the disease, and improving his overall quality of life.

Why is this an important first worldwide?

- It was the first post-traumatic autologous pancreatic islet transplant ("Autologous" means transplanting from one part of the body to another in the same individual.)

- It was the first islet cell product shipment to a remote site with the islets already prepared in the Ricordi Infusion Bag kit ready for infusion (since WRAMC did not have the facility and local expertise to reprocess and package an islet cell product for transplant following shipment with a conventional protocol).

- It was the first time islet shipment was performed at cool temperature instead of room temperature (in an attempt to minimize metabolic activation of the concentrated islet cell product).

- It was the first time the transplant was done via Telemedicine assisted live communication between Dr. Camillo Ricordi and the WRAMC team in the operating room.