

Dr. Paul Zwiebel

LIVING A LIFE OF BALANCE



LIFE-CHANGING, LIFE-SAVING CARE

Dr. Paul Zwiebel, MD, DMD, has a flourishing cosmetic surgery practice in Denver. His sought-after aesthetic specialty services include facial and breast plastic surgery as well as body-sculpting procedures. However, Dr. Zwiebel also offers his expertise to an entirely different group of patients—those in desperate need of life-changing and sometimes life-saving surgical care in developing countries.

Dr. Paul Zwiebel established his practice 13 years ago after completing dental, medical and surgical training with an exceptional fellowship in Paris, with Dr. Paul Tessier, a world-renowned cranio-facial reconstruction expert. Over the last three years, Dr. Zwiebel has been a key participant in several medical and surgical missions in South America and Africa. His most recent mission was with International Medical Relief (IMR), a Denver-based nonprofit

**DENVER-BASED
INTERNATIONAL
MEDICAL RELIEF
COORDINATES MEDICAL
MISSIONS THAT
PROVIDE CRITICAL
SURGICAL CARE,
FIXING BURNS, SCARS
AND CLEFT PALATES**

organization founded in 2000 and led by Shauna Vollmer King.

In 2007, Dr. Zwiebel was contacted by King and recruited for an important surgical mission to Mekele in North-Central Ethiopia. The purpose of the trip—proposed by Dr. Mirutse Asmaw-maw, a surgeon from Mekele—was to provide urgently needed plastic surgery and reconstructive surgery for the local population using the town's very limited medical resources.

CHALLENGING CONDITIONS, INTENSE

CHOICES In August 2008, an IMR volunteer medical team, including

STORY: **VICTORIA C. SMITH**

nurses and medical students, headed by Dr. Zwiebel and his associate Dr. Victor Chavez, arrived at the local hospital in Mekele.

Dr. Zwiebel recalls, “As we walked through the wards, the odor was intense. Each ward was lit by a single electric cable and bare lightbulb; the patients lay on bare mattresses with unlaundered linens. The hospital had no ability to separate patients with infections from others or those who were post-op,” he says. Families were responsible for washing, toileting and feeding the patients. “There was a great shortage of basic medical needs, and the O.R. lacked any reasonable monitoring equipment. It was very challenging and spoke volumes for the work that Dr. Asmawmaw had been doing

there for his people,” says Dr. Zwiebel.

When the IMR team arrived at the Mekele hospital, there were long lines of people waiting outside the door. The team evaluated the patients: “There was a very broad range of conditions and some we couldn’t help. There were many neglected tumors, cancers, old infected fractures and strange parasitic skin conditions,” says Dr. Zwiebel. “We had to select patients [to operate on] on the basis of what would have the greatest impact or benefit for the individual by improving their life, or in some cases prolonging their life, within a margin of safety for what we could offer,” Dr. Zwiebel explains. “The hardest thing was saying ‘no’ if we could not help them.”

THE DETAILS

THE ZWIEBEL CENTER FOR PLASTIC SURGERY

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- 303-470-3400, PAUL.ZWIEBEL@PZWIEBEL.COM, WWW.DRZWIEBEL.COM

INTERNATIONAL MEDICAL RELIEF

- SHAUNA VOLLMER KING
- 1600 EMERSON ST., DENVER
- 970-635-0110, SHAUNA@IMRHQ.ORG, WWW.IMRHQ.ORG

1 DR. ZWIEBEL DURING A TREK IN ETHIOPIA’S SEMIEN MOUNTAINS AFTER COMPLETING A SURGICAL TRIP

ONE WEEK, 100 SURGERIES During the one-week mission in Mekele, Dr. Zwiebel and his team performed more than 100 surgical procedures on 38 patients. Approximately one-third of these cases were cleft lip and palate repairs on children ages six months to



9 years, one-third were hand surgery cases and another third were general reconstructive surgery cases, including a significant number of burn victims. “In impoverished areas, families cook over an open fire, and this is often the mechanism of injury for burns in children,” explains Dr. Zwiebel. “A toddler may fall in to the flames, or be scalded by a pot of water, or a hut may catch fire and the burning roof caves in before the family and children can run out,” he adds.

Dr. Zwiebel describes one compelling case of this type: “A beautiful female in her 30s had been burned by exploding gasoline, which had been thrown onto a fire to get it started. She had severe scarring of her upper body; her arms were scarred and tethered to the side of her chest and her chin to her chest, so she could not lift her arms or chin, and some scars had not healed,” he says. “At 9 p.m. at night, she showed

up at the door of the hospital, having heard we were there. She had walked some distance from another village. We saw her and said, ‘We have to help her.’ We started her surgery at 9 p.m. that night and at 2 a.m. we finished what we could do for her, including skin grafting and releasing the scars.”

ENLIGHTENING EXPERIENCES Dr.

Zwiebel shared his experience in Ethiopia with his 21-year-old son, who joined the mission after traveling in Namibia. When the medical team left, father and son spent time traveling in Ethiopia and saw first hand the complexities and challenges facing the native people. In a country that relies heavily on agriculture, with an extreme “almost biblical” climate of

1 THE LOOK ON A MOTHER’S FACE WHEN HER CHILD RETURNS FROM SURGERY IS THE EMBODIMENT OF GRATIFICATION FOR THE DOCTORS

flood and drought cycles, the poverty, political conflict and enormous corruption in the country have prevented development of an efficient system to protect valuable food resources. Dr. Zwiebel saw no irrigation or drainage systems. “In the rainy season, when we were there, hundreds of acres of crops were ruined by flooding, and there is no infrastructure in place to deal with this,” he says.

Dr. Zwiebel encourages anyone who is interested to volunteer their time and efforts to a medical mission, such as those arranged by IMR. “Enormous opportunity exists on medical missions. For anyone who might consider doing this type of work, it is an enriching and life-changing experience. It gives a sense of perspective in terms of the tremendous privilege and wealth that we have here in the U.S.”

“On these missions, the need far exceeds what you can provide, but the gratitude is overwhelming. We received far more than we gave,” he says.

Readers can make donations to International Medical Relief, sign up to receive information and volunteer to join a mission on the IMR website: www.imrhq.org. Donations of basic medical equipment—including dressing supplies, surgical instruments, O.R. monitoring devices and medications—are also needed. **CE**

Victoria C. Smith is a board-certified Family Medicine physician and freelance medical writer.