

American Native Inupiat (Eskimo) Medicine

Some asked of my experience of American Native Inupiat medicine in Barrow, Alaska. I write this at the end of my two month assignment.

Of course, it is cold here. During the first few days I tolerated the average minus 10 degree weather for one minute with only a hat on my head. I can now do the same for up to 15 minutes. The other day I went to "The Point", the furthest place north, to look for polar bears. The wind chill was minus 45. The wind chill charts display to minus 120 degrees. I suppose it would not make sense for charts to display values lower than this. We did not see polar bears. One of my patients told me her arthritis bothers her when the temperature dips below minus -17 degrees. Bless her.



Well heated snow covered house

Let me introduce you to Barrow, Alaska.

Barrow is the United State's northern most location at the Arctic Ocean. Barrow is a small town of 5,000 mostly American Native Inupiat, one of many Eskimo clans. Three generations ago the primary language and culture was Inupiaq. Now, it is English. Younger Inupiat do not speak their ancestor's tongue. The rituals, customs and culture of 50 years ago are also long gone.

No roads into or out of this city isolate us from the Lower 48. Because of the earth's tilt, the sun disappears the winter and is endless in the summer. The isolation combined with a no day-night cycle offers the opportunity, if not illusion, of tranquility and serenity. But, more on this later as I digressed.

**I wondered if I
would freeze
to death.**

There is no vegetation, trees or flowers. Will Rogers (famous humorist) and Wiley Post (famous pilot) perished in a nearby 1935 plane crash. The only chain store is an NAPA auto parts. Almost never, the town experiences an electricity loss. On my second day here, I wondered if I would freeze to death.

I ate at Pepe's, the continent's northern most Mexican restaurant. This was a true thrill and honor. My son, Jason, asked if the food was good. I may have said, "One does not dine at Pepe's for fine food." During the hospital Christmas dinner held there, I

performed magic (as a professional magician). One Elder Inupiat told me it was the first time he had ever seen a "live" magician. His words touched me.

Wishing I was youthful, I fancied skinny-dipping during the summer in the Arctic Ocean to become a "Polar Bear Club Member." The thought of emerging with frozen hair chilled me. One colleague proclaimed, "the locals do not do that silly thing." I walked on the solid ocean, instead. I am in awe the cap of this earth is ice.

Occasionally a returning villager from Anchorage will bring a few bags of McDonald's food or Krispy Kreme doughnuts. I yearn for a Domino's Pizza. Anchorage is about a 3-hour, 800 mile plane trip south of here. When the physicians need to transport a patient to the nearest hospital in Anchorage, we use a Medivac Lear Jet and not a Barrow-to-Anchorage commercial flight.

The medicine is not what I expected.

The hospital is a one-floor building that provides the only medical, dental and pharmacy services to the entire North Slope region, the continent's downward slope, of 98,000 square miles. The building has four inpatient rooms with no ICU or telemetry unit. It has two emergency room beds and two labor and delivery rooms. It has six rooms for walk-in and family medicine purposes. I delivered two babies while here.

We have an x-ray machine that, when needed, can transmit images to an Anchorage radiologist for advanced interpretation. We have an impressive ultrasound technician but without venous doppler ability, a concerning situation when I want to check for a deep vein thrombosis. We have no CT scan or MRI. All the nurses are superb. We call this "bush medicine." I had to adapt.

Our hospital serves Barrow and its handful of villages, each about 50-1,000 Inupiat, accessible by air only. The furthest is 550 miles away. The land between here and each village is inhabitable and frozen.

Some villages are not accessible by daily flights. It can take 3 to 5 days, in bad weather, for an Inupiat to receive a medication refill from this hospital.

Barrow has a paved runway for planes. The villages have cobblestone runways. Cobblestone in the summer, that is. In the winter, the runways are iced. The assistant



Dr. Mystic's 16 year old new Inupiat mother

director warned me to be mindful about the lives of the pilot, two paramedics and one patient when I authorize a Medivac trip for emergency purposes. The winter Medivac planes land and take-off on the ice.

If the weather is bad, planes remain grounded and death is sometimes an outcome. This is an unfortunate, but accepted, outcome of Arctic ice inhabitation.



Health Care 1930's

For my colleagues, I now illustrate bush medicine.

One man dislocated his shoulder. I relocated (reduced) his shoulder to a normal position. In Philadelphia, an often obligatory MRI is standard of care to identify a small bone avulsion or nerve entrapment. It is not standard of care in Barrow. When not clinically indicated, the lives of four people matter more than a risky Medivac to Anchorage for an MRI.

The EKG of a village woman with uncontrolled diabetes and chest pain showed a serious tombstone ST elevation heart problem. The village clinic did not have a beta-blocker medicine or morphine to lessen the ventricular response or metabolic needs. They gave her chewable Aspirin and oxygen. She was Medivac'd to Anchorage.

I stopped a posterior nosebleed with a special packing procedure on my first try in a woman with accelerated hypertension and pre-existing anemia. I then discovered a probable posterior bleed in the other nostril. Since we have no ICU to watch for blood leakage into the lungs with both nostrils packed, I Medivac'd her to Anchorage and transfused 2 units of blood on the way. I never before performed this tricky and bloody procedure. Out of patient sight, I read my procedures book.

We almost Medivac'd a 40 week term pregnant female whose late stage labor failed to progress. She was 7 cm dilated, 90% effaced and at a zero station. She



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received Nubain, a pain medicine, during her labor. We called Medivac after two long, late decelerations of 60 and 40. Fortunately, she precipitately delivered before they arrived.



Breath-taking glacier ice

The mom needed tear repairs. The nuchal times one baby boy needed Narcan. In this hospital, we managed the baby's persistent low blood sugar (hypoglycemia) for four days. In Philadelphia, a Cesarean section and a one or two day neonatal intensive care unit stay would have been standard of care.

We do not augment, perform epidurals, repair 3rd or 4th degree tears or deliver high-risk mothers. High-risk mothers move to Anchorage at 36 weeks of gestational age for delivery.

Finally, a 70-year old woman presented with a pure vertical (neck to toes) hemi-sensory loss of the entire left half of her body (front to back). I diagnosed a right medulla lesion inferior to the dorsal column decussation without an MRI, neurologist or neurosurgeon. Imagine that! I had to look up the decussation patterns, however. She was Medivac'd.

The culture is soothing, simple and sweet.

We keep medical records from birth for all patients. As a result, charts are a foot or more thick. The Tribal Council posts elections results in the library. Phone numbers are four numerals in length.

A 73-year old Elder male was sick and in our hospital. A vigil by 10 or so family members persisted for his hospital stay. Within one hour of his death, 65 people (including infants and children playing) occupied his room and the small hallway. The support was strikingly beautiful. They bury the dead with headstones, a recently adapted American tradition.

We do not call Inupiat Elders "elderly". People accord the Elders respect. When they walk into our clinic or hospital, they receive immediate treatment. When a physician walks into a room with an Elder and a younger person, we direct eye contact and conversation first to the Elder. When finished, we talk with and care for the others. Nursing homes do not exist on the North Slope.

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Twice a year, teams of North Slope village Inupiat catch a whale or two to dissever it for food in a ritual ceremony. Elders receive the choice meats. Non-Elders receive the other cuts. Holes dug 6 feet into the earth store the remaining meat. One whale feeds the entire North Slope for almost 5-6 months. Only recently is whale used for mainly food and art. Whale oil used to predominate in baking and storage. Whale skin used to provide ground cover. Whale ribs used to provide for building structure.



Omega-3-fatty acid rich whale meat

I do not imply the Inupiat have no social problems or ills. Unemployment is high. Alcoholism is prevalent. Education is ungenerous.

Imported preserved foods, Crisco oil, and butters lessened the native's reliance on seal and whale oils, high in the good omega-3-fatty acids, as a natural preservative. So, good (HDL) cholesterol levels have dropped and related diabetic and cardiovascular disease rates have raised.

I shall close by telling of a chance encounter with a typical Inupiat man.

A 45ish year old male came into my office for earache. He was not the most intelligent looking person I have met. He was scruffy and unkempt. He recently bathed, though.

He sported typical Inupiat clothing but with a new baseball cap and a nonbrowbeaten 9/11/01 T-shirt. I started a conversation after corroborating his name and reason for his visit. I pointed to his shirt and asked, "Where were you on 9/11?" I learned this question generates extended conversation. Physicians use conversation to assess mental status, orientation, alertness, memory, and cognitive ability. He said he was in Barrow just like everybody else.

My first thought was, "Of course, everybody else in Barrow was in Barrow." Never judge a person by his or her appearance.

We talked. And we talked. He needed minimal prompts to continue the conversation. When finished, I felt I was in a postgraduate course with a professor lecturing about advanced global-eco-politico-religious postulates.

One of his early statements was something like "angry people do bad things". "Okay," I thought. That was a respectable if not an astute first statement. Many of us may hear, "those damn [ethnic-group of the day inserted here]."

Another statement was something like, "As I look at the world, I do not think the Muslim beliefs are compatible with the North and South America cultures." He justified his statements.

We migrated to the topic of Osama Bin Laden and terrorist group funding. We agreed some USA citizens directly or indirectly contributed to Osama Bin Laden's funding with nonprofit contributions. "9/11 gives one pause to think about where our money goes when we contribute to nonprofit organizations," he said.

To hear his words, it was like listening to Peter Jennings, Morley Safer, or Tom Brokaw. If we saw him in Philadelphia, many would not accord him eye contact. I cared for his earache and wished I recorded the conversation.

Chance meetings like this happen every day. I have not the time nor the energy to record every single one.

Being in this American Native Inupiat culture has taught me about the love and dedication people have toward their various causes. I am so immersed in and touched by the North Slope Inupiat. I hold them in high regard. I hope this has been communicated.

From Barrow, I return to Philadelphia. I will seek a full-time permanent family medicine position in a small town to realize my long-sought "small-town doctor" desires.



**Inupiat woman's hand-crafted
Carabou mask**

For now, it seems the day-night cycle reminds me of a day's worth of stressed deadlines, unfinished tasks, and continued frustrations that instinctively roll to the next day's sunrise. My choice to abstain from television fostered reflection. In Barrow, time is timeless.

But it is all an illusion. My wife, Candice, upheld the daily finances, maintained the house and performed the child rearing. My parents completed my errands.

At this writing, I have unobstructed thoughts, impermeable serenity, and undisturbed tranquility. My soul has been at ease.

**Steven Applebaum, D.O.
Family Medicine Physician**