Professor to launch dental clinic in Turkey to treat Syrian refugees

BUFFALO, N.Y., USA: “We have friends in Syria who were visited by police because their son had attended a rally. When they told the police that their son wasn’t home, the police proceeded to shoot the three children who were there, in front of their mother, as a warning. One of those children was three years old.”

This is just one of the many stories about conditions in Syria told by Othman Shibly, DDS, MS, assistant professor in the Department of Periodontics and Endodontics at the University at Buffalo School of Dental Medicine. According to recent news reports, when the United Nations withdrew its observers in Syria in June, deaths increased by 78 percent; in July they went up another 55 percent; and then up nearly 48 percent in August to more than 5,000. Deaths of Syrians are now in excess of 30,000 since the rebel uprising began in March 2011.

Syria was Shibly’s home country; it is where he still had family. He wanted to contribute something meaningful to help those Syrians who had been displaced and injured and are now living in the Turkish refugee camps. On June 29, he went to Turkey to attend an academic conference in Istanbul and during the second week of his visit he went to one of the camps — the Kilis Refugee Camp next to the Syrian Border in Gaziantep City in Turkey — and spent a week assessing the oral health needs of those who had escaped from the Assad regime. At the time, the camp had 11,000 people.

Shibly had anticipated a great deal of need but what he found shocked him.

“There were people with broken or infected teeth — this I expected. But that’s not all. There were people who had been injured by having soldiers push the end of a rifle into their teeth; people with broken jaws. People with injuries to the face. So many people. Some of these were children,” said Shibly.

Shibly knew that one visit wouldn’t be enough to address all the problems. The camp needed a dental clinic with trained personnel to help with oral health and injuries every day.

Shibly said that when he returned to Buffalo, to UB, he put together a plan. First, he determined the costs needed to purchase enough dental equipment for two camps. It would take from $70,000 to $100,000 per camp.

When people heard Shibly’s stories they wanted to help. He was able to raise $15,000 from friends’ donations in Western New York and received $30,000 from dentists in Waterloo, Ontario. And when he told another group of friends and associates that he was $5000 from his goal, they told him not to worry: they had the rest of the money.

Shibly has just sent the donated funds through a charity to a dental company that sells its equipment in Turkey (the dental company discounted the merchandise in support of this humanitarian cause). Once the instruments arrive, Shibly will travel back to the Turkish camp this fall with his colleague, Fadi Ayoub, UB assistant professor of restorative dentistry.

Syrian medical relief workers will provide a place within their medical centers in the camps to set up the dental clinics.

Shibly and Ayoub will then work with Syrian camp refugees — who are also dentists — to have them run the clinic’s day-to-day dental operations for an allowance, and both of them will return about every two months on a rotational basis. A team from the Syrian Medical Society and the Islamic-American Medical Society is also collaborating with Shibly and Ayoub in their clinical rotations.

Additionally, Shibly is organizing a schedule for American dentists to choose the times they wish to donate care so that the clinics are always adequately staffed.

“We have to go back because there is so much work. As a periodontist, I can do oral surgery. I can also bring oral surgeons under whose guidance I can perform specialized procedures,” Shibly said.

While Shibly is elated to have raised such a large amount of money in such a short time, the conditions that surround his volunteer initiative weigh heavily on him.

“From a humanitarian perspective, the United Nations has failed. And the world community just watches. They have given money, which is appreciated, but it’s like giving Tylenol to a cancer patient for pain relief. It’s not enough.”

“The world has not learned its lessons from the atrocities of the Holocaust, Bosnia, Somalia and Rwanda. How many must die before there is intervention,” he said.

Then his voice softens as he speaks with thanks and admiration about the orthopedic surgical resident who put his training on hold to go to Syria to provide medical care, working for nothing, and the Syrian-American pharmacist who brought her whole family with her — her children scrubbing the floors of the pharmacy — while she provides her expertise for free.

“So even out of bad there is some good,” Shibly said smiling.

(Source: University at Buffalo School of Dental Medicine)