Five Years of Going Global

Portraits of hope: Each of these children was born with a life-threatening heart defect, in a part of the world where no cardiac care was available until Heart to Heart teams trained local doctors and developed new children’s heart programs. Since operating on our very first patient, back in 1989, everywhere we’ve been, we have been fueled by a universal reality: a family’s love and commitment to care for their sick child.

Going Global: Five Years, Thousands of Children Saved

Our successful work in Russia has culminated in a network of six new regional children’s heart centers where tens of thousands of children have already been saved through open heart surgery. The cardiac teams at these self-sustaining centers now save the lives of more than 2,000 children each and every year.

Building on our expertise, Heart to Heart has been exploring options to scale our model in Latin America. In the process, we have been able to save lives and raise awareness about the treatability of congenital heart defects in Peru, Mexico, Paraguay, Guatemala, and Costa Rica. On the other side of the globe, we have begun collaborating with our talented medical colleagues from Russia, to expand access to heart care for children in neighboring Caucasus, starting in Armenia. And this December, we will conduct our first site assessment to Africa, our fifth continent, in Accra, the capital of Ghana.

As we travel worldwide, the parents we meet all tell a similar story. First, there is the heartbreak of learning their child’s diagnosis. Next comes the fear and helplessness they feel when a local doctor says that nothing can be done. And then, new but desperate hope when they learn that their child can still be saved through timely surgery.

The reality is that for 85% of children on our planet, there is not yet any place for their parents to take them for heart surgery. The answer to saving these children is to develop regional cardiac centers in metropolitan areas around the world. Each Heart to Heart self-sustaining children’s program gives access to heart care to tens of thousands of families.

Your ongoing support ensures that our incredibly capable medical volunteers will continue to have the resources they need in order to train new teams of cardiac specialists. They in turn will save thousands of children in areas of need around the world. The value and impact of your contributions will grow for generations to come.
Saving lives on five continents  Every 30 seconds, somewhere in the world, a baby is born with a life-threatening but highly treatable heart defect. Developing self-sustaining regional cardiac centers is the best way to reach the 85% of the world’s children who still lack access to heart surgery. Heart to Heart has the expertise to give more children born with heart defects a second chance at life.

Aitana, from Matamoros, Mexico

Even the tiny exertion of yawning caused newborn Aitana to turn purple. The family doctor detected her heart murmur, and suspected she might have been born with holes in her heart. Fortunately, the doctor had learned of a new campaign at University Hospital in Torreon, to raise awareness about heart defects in children. He quickly referred Aitana’s parents. Several weeks later, baby Aitana was the very first child to undergo open heart surgery at University Hospital, performed by the joint Heart to Heart-Torreon team. Today, Aitana is a healthy toddler, and her parents are tremendously relieved and grateful that now “she can be like every other child.”

Alejandro, from El Gabino, Mexico

Six-year-old Alejandro is an enthusiastic soccer player, and loves everything Spiderman. Shortly after he turned five, what his family thought was a case of the flu turned out to be something much more complex. Alejandro’s parents had to wait more than a year for him to see a specialist in Torreon. The doctor discovered a large opening between Alejandro’s aorta and pulmonary artery, which, left untreated, would lead to heart failure. Alejandro’s procedure was performed by the joint Heart to Heart-Torreon team. He has made a full recovery and is expected to lead a normal, healthy life. Alejandro tells us, “When I grow up I want to be a doctor so I can help other children who need their hearts fixed.”
## GOING GLOBAL TIMELINE: 2015–2020

|---------------|---------------|---------------|---------------|---------------|---------------|
| **APRIL** Chelyabinsk, Russia  
- adult  
- pediatric | **MARCH** Lima, Peru  
- pediatric | **MARCH** Moscow, Russia  
- pediatric | **APRIL** Asuncion, Paraguay  
- site assessment | **APRIL** San Jose, Costa Rica  
- pediatric | **MARCH** San Jose, Costa Rica  
- Paraguayan colleagues scholar exchange |
| **MAY** Lima, Peru  
- site assessment | **JANUARY** Lima, Peru  
- pediatric | **APRIL** Asuncion, Paraguay  
- pediatric | **JUNE** Samara and Moscow, Russia  
- pediatric | **APRIL** Yerevan, Armenia  
- pediatric | **SEPTEMBER** St. Petersburg, Russia  
- international conference |
| **OCTOBER** Kaliningrad, Russia  
- pediatric | **JULY** Chelyabinsk, Russia  
- pediatric | **SEPTEMBER** Torreon, Mexico  
- site assessment  
- Guatemala City, Guatemala  
- site assessment | **SEPTEMBER** Cleveland, Ohio  
- Russian colleagues scholar exchange  
- Krasnodar, Russia  
- international conference  
- Oklahoma City/Cincinnati  
- Russian colleague scholar exchange | **OCTOBER** San Jose, Costa Rica  
- site assessment  
- Yerevan, Armenia  
- site assessment | **OCTOBER** San Jose, Costa Rica  
- site assessment  
- Yerevan, Armenia  
- site assessment |
| **NOVEMBER** Phoenix, Arizona  
- Peruvian colleagues scholar exchange | **DECEMBER** Lima, Peru  
- adult  
- pediatric  
- Tomsk, Russia  
- pediatric international conference | **SEPTEMBER** Yerevan, Armenia  
- site assessment | **DECEMBER** Moscow, Samara and Tomsk, Russia  
- pediatric  
- Torreon, Mexico  
- adult  
- pediatric | **NOVEMBER** Yerevan, Armenia  
- site assessment | **NOVEMBER** Yerevan, Armenia  
- site assessment |
| **DECEMBER** Lima, Peru  
- adult  
- pediatric  
- Tomsk, Russia  
- pediatric international conference | **MAY** Kaliningrad, Russia  
- pediatric | **MAY** Torreon, Mexico  
- site assessment  
- Guatemala City, Guatemala  
- site assessment | **MAY** Torreon, Mexico  
- site assessment  
- Guatemala City, Guatemala  
- site assessment | **OCTOBER** San Jose, Costa Rica  
- site assessment  
- Yerevan, Armenia  
- site assessment | **OCTOBER** San Jose, Costa Rica  
- site assessment  
- Yerevan, Armenia  
- site assessment |

### Building the future on multiple fronts
Heart to Heart brings cardiac care to different corners of the world via: surgical and medical educational missions, on-the-ground site assessments, and scholar exchange programs. Nearly 12,000 children are alive today thanks to the work of our colleagues at our partner sites over the last five years. In the next five years, as additional sites become self-sustaining, even more children will be saved.

### Mabel, from Itaugua, Paraguay
Mabel is 23 years old, and she lives three hours from the National Hospital in Asunción. Like many young people in countries with limited healthcare, Mabel developed a life-threatening heart problem simply due to a lack of penicillin. As a child, Mabel suffered from rheumatic heart fever, which irreparably damaged her mitral valve. In her teens, she became seriously ill, experiencing heart palpitations, shortness of breath, and back pain. Her condition worsened, forcing her to leave her job. Fortunately for Mabel, a joint Heart to Heart-Asuncion team replaced her mitral valve during an exploratory mission. Mabel received a second chance at life. Her smile, the day after her surgery, was a bit timid, but so heartfelt.

### Celestino, from Luque, Paraguay
Celestino’s family owns an orchard where they grow corn and mandioca. Because his native language is Guarani, to interview him, we spoke Guarani, Spanish, and English. Valvular heart disease has taken the lives of both his father and his younger brother at 42. Years ago, Celestino began to tire more easily, and he experienced shortness of breath. He knew he needed help, but for many years had nowhere to turn. Accustomed to working very long days, this ordinarily strong man had to significantly reduce his work load, until even the walk to the family orchard became too much. Now that he has successfully undergone valve replacement surgery, Celestino can’t wait to get back to his favorite part of working the land: planting new seedlings.
**2015–2020: BY THE NUMBERS**

- 2 more pediatric sites now self-sustaining
- 5 continents reached
- 7 medical-educational missions to two countries
- 8 site assessment trips to seven countries
- 14 surgical-educational missions to six countries
- 203 hours of lectures and teaching during missions
- 2,643 hours of hands-on clinical training during missions
- 11,963 children’s lives saved at Heart to Heart partner sites...and counting!
- $4.8m of in-kind medical services provided by our dedicated volunteers

**OUR MISSION**

Heart to Heart develops self-sustaining new medical programs in areas of need, measurably expanding access to life-saving cardiac care. Teams of specialists trained by Heart to Heart help to reduce the global burden of heart disease today and for generations to come.

**OUR VISION**

Worldwide, all children and adults, regardless of where they are born or where they live, will have access to life-saving heart care.

**THANK YOU FOR SUPPORTING THE WORK OF OUR MEDICAL VOLUNTEERS**

*Alta Bates Summit Medical Center:* Elaine Patton, echosonographer  
*Children’s Healthcare of Atlanta/Emory University:* Brenda Jarvis, PCICU nurse; Dr. Kirk Kanter, pediatric cardiac surgeon; Ann Marie McGoldrick, perfusionist; Amanda Mendez, surgical technician; Heather Smith, PCICU nurse; Linda Steinhauer, PCICU nurse; Dr. Elizabeth Wilson, pediatric cardiac anesthesiologist; Dr. Michael Wolf, pediatric cardiac intensivist  
*Children’s Hospital of Philadelphia:* Alex Chappell, perfusionist  
*Cincinnati Children’s Hospital:* Dr. Laura Berenstain, pediatric cardiac anesthesiologist  
*Duke University Medical Center:* David B. Adams, echosonographer  
*Mayo Clinic:* Dr. Grace Arteaga, pediatric cardiac intensivist; Glen Au, PCICU nurse; Caitlin Blau, perfusionist; Dr. Bryan Cannon, pediatric cardiologist (electrophysiology); Dr. Frank Cetta, pediatric cardiologist; Dr. Joseph Dearani, pediatric cardiac surgeon; Eric Egger, PCICU nurse; Dr. Nathan Taggart, pediatric cardiologist; Laurie Utne, PCICU nurse; Joan Wobig, surgical assistant  
*Medical City Children’s Hospital:* Dr. Kristine Guleserian, pediatric cardiac surgeon  
*Nationwide Children’s Hospital:* Tamara Clark, PCICU nurse; Dr. Mark Galantowicz, pediatric cardiac surgeon; Daniel Gomez, perfusionist; Ashley Hodge, perfusionist; Dr. Aymen Naguib, pediatric cardiac anesthesiologist; Dr. Janet Simsic, pediatric cardiac intensivist  
*North Kansas City Hospital:* Brigid Culey, echosonographer  
*Phoenix Children’s Hospital:* Dr. Kavitha Pundi, pediatric cardiologist  
*UC Davis Medical Center:* Dr. Harmee Bhullar, adult cardiac anesthesiologist; Dr. Jonathan Dayan, pediatric cardiologist; Olesya Dushkova, surgical technician; Dr. Dali Fan, adult cardiologist; Stuart Grant-Coons, perfusionist; Dr. Anna Kowalczuk, adult cardiac anesthesiologist; Debbie Lewis, surgical technician; Dr. JoAnne Natale, pediatric cardiac intensivist; Susana Noel, ICU nurse; Dr. Gary Raff, pediatric cardiac surgeon; Dr. Victor Rodriguez, adult cardiac surgeon; Dr. Thomas W.R. Smith, adult cardiologist; Dr. Jeffrey Southard, adult cardiologist; Andrew Studin, OR/circulating nurse; Dina Taylor-Schmidt, pediatric echosonographer; Dr. Garrett Wong, adult cardiologist; Dr. Aubrey Yao, adult cardiac anesthesiologist; Dr. Nilas Young, adult cardiac surgeon; Mary Zanobini, PCICU nurse  
*UCSF Benioff Children’s Hospital:* Dr. Mark Cocalis, pediatric cardiologist; Dr. David Teitel, pediatric cardiologist  
*University of Texas Health Science Center San Antonio:* Dr. John Calhoun, pediatric cardiac surgeon; Cindy Eckhardt, PCICU nurse; Rachel Lopez, surgical technician; Dr. Clinton Pizitz, pediatric cardiac intensivist; Dr. Deborah Rasch, pediatric cardiac anesthesiologist; Joshua Walker, perfusionist; Cathy Woodward, PCICU nurse