Chief medical editor's corner of the world



his past summer I had the pleasure of meeting an amazing ophthalmologist named John Nkurikiye, FC Ophth(SA), who is the current president of the Rwandan Ophthalmology Society. Along with his wife and fellow ophthalmologist, Ciku, John organized and hosted the first ever congress of the College of Ophthalmologists of Southern, Eastern, and Central Africa (COSECA) in the Rwandan capital city of Kigali. Attending this conference, I was impressed by the clinical scope of the meeting and the enthusiasm of the approximately 300 attendees from nine different African countries.

One cannot visit Rwanda without being impressed by the country's remarkable revival from the horrific genocide that occurred in the spring of 1994. Following decades of animosity and conflict, nearly 1 million Tutsi civilians were brutally killed by extremist Hutu militia during a lawless three-month period. Inexplicably, the world stood by and failed to intervene as helpless men, women, and children were brutally tortured and massacred-usually by machete. The movie *Hotel Rwanda* portrayed a true story of courage amidst this tragic period. In 1962, John's parents had fled Rwanda to a Tutsi refugee camp in neighboring Burundi, where John was born and raised. Overcoming great odds, John became one of the few Rwandan refugees to graduate from college and medical school. He then joined the Rwandan Patriotic Front (RPF), which was the rebel force mainly made up of Tutsi refugees that fought to topple the Hutu government. As a captain in the RPF guerilla army, John lived and fought in the jungle for four years until his battalion became the first to enter Kigali during the 1994 genocidal conflict. Eventually, the victorious RPF ended the genocide and took control over the country.

Once his family was able to return to Kigali, John decided to become an ophthalmologist and he received his training in South Africa. He met Ciku as a visiting volunteer eye surgeon at a time when few outsiders dared come into Rwanda. They got married a few years later. After working separately in the public service they now work together in a busy private surgical practice but continue to support eyecare delivery in Rwanda at all levels. John is considered the leading ophthalmic surgeon in Rwanda and is the president of the Rwandan Ophthalmology Society.

> David F. Chang, MD, chief medical editor

A Rwandan profile in courage

by David F. Chang, MD

Dr. Chang: Can you attempt to describe for our readers the anguish of fighting in Kigali during the time when your fellow Tutsi were being massacred by the Hutu militia?

Dr. Nkurikiye: This was the most difficult time of my life. We had to fight our way into Kigali from our base. We marched continuously for four days and four nights in order to reach Kigali as quickly as possible. Our mission was to rescue our RPF political leaders and our battalion that was guarding them. Our RPF leadership was in Kigali waiting to be included in the coalition government that was stipulated by the recently concluded peace agreement in Tanzania. We started seeing the magnitude of the killings as we reached the outskirts of Kigali. We found dead bodies and dying victims. Every evening we had to organize rescue missions in enemy areas and we managed to save many lives. These operations, however, had many challenges as only a few of us knew our way around Kigali. The people we were trying to rescue were in hiding and we sometimes failed to reach them. There was no

means of communication. As the war continued, the killings by the government forces and Hutu militia became more and more systematic and the chances of survival for Tutsi people in the government-controlled areas became more and more precarious. That is how I lost an uncle and his eight children in the course of 45 days. We never managed to reach them where they were hiding in a convent and they all got killed there. These rescue missions were of course combined with intense fighting in and around Kigali.

Dr. Chang: The rebuilding of Rwanda and the reunification of the people is truly an astonishing story. How have your country and its leadership been able to accomplish this?

Dr. Nkurikiye: The genocide itself happened as a result of irresponsible leaders. The transformation today is a reflection of what responsible leadership can achieve. To move out of that messy situation and to get Rwanda to where it is today is nothing short of a miracle. The current leadership had a clear vision of what they wanted Rwanda and Rwandans

to become. President Kagame's determination and vision is what made it possible for Rwanda to achieve what it has accomplished despite many obstacles along the way. He managed to instill a sense of pride and dignity in Rwandans despite the horrors of our past. All Rwandans today have equal opportunities for education and employment based purely on merit. This is a clear sign for us to see that the future is brighter.

Dr. Chang: After the war ended and you were able to resume your career as a medical doctor in Rwanda in 1994, what made you decide to become an ophthalmologist?

Dr. Nkurikiye: After qualifying as a doctor in Burundi in February 1990, my first ambition was to become a specialist and pediatrics was at the top of my wish list. The University of Burundi opened its doors to post-graduate training later that year. When I inquired about joining, I was told that only Burundians were allowed to enroll despite the fact

continued on page 14



Dr. Nkurikiye (far right) with his father and son

A Rwandan continued from page 13



Mass grave marker at Kigali Genocide Memorial Center

Source (all): John Nkurikiye, FC Ophth(SA)

the class throughout medical school. My frustration did not last for too long because on October 1, 1990, the Rwanda liberation war started and I joined RPF. During the war, I performed a lot of general surgery, and when the war ended my ambition of specializing was still alive. I wanted something that was a new challenge, something I knew nothing at all about, and something that combines both medical and surgical care. In my mind the options were OB-GYN, ENT, or ophthalmology, and the choice to pursue the latter was clear to me. If I were to choose again, I would not hesitate to choose the same!

that I had always been at the top of

Dr. Chang: Rwanda has overcome many challenges during the past two decades. What is the biggest challenge for delivering eyecare in your country?

Dr. Nkurikiye: The biggest challenge is our shortage of medical manpower—both quantity and quality. If we can overcome this, the other issues are things that money can solve.

Dr. Chang: You and your wife Ciku are very committed to providing eyecare to the underserved people of Rwanda. What inspires this commitment?

Dr. Nkurikiye: First of all, this commitment is what made the two of us meet, fall in love and finally get married. The burden of blindness in Africa is huge and as you know 80% of these problems are treatable or preventable. Unfortunately the elderly, usually unemployed, are the most affected by these blinding diseases. The only way to help these people is to develop a good community ophthalmology system in the country. When we go out there and help restore sight for these underprivileged people, it costs us almost nothing and yet for them, it makes a huge difference in their lives. This is what keeps us going, and we believe everyone deserves a chance to regain vision—whether they can afford to pay or not. Ciku and I still have an unfulfilled dream of building a community eye surgical center that provides affordable care to all Rwandans who need it, in an environment of clinical excellence. We will be preoccupied with this goal before we can retire.

Dr. Chang: Many of our readers know little about the genocide in Rwanda. As we approach its 20th anniversary, what lessons must the rest of the world learn and remember from this horrible tragedy?

Dr. Nkurikiye: I think what happened in Rwanda could still happen in other parts of the world. The solution is to have good leaders who care for their people, to establish good governance, to fight poverty and ignorance, and provide equal opportunity to all. Sometimes these good leaders have to make tough decisions. These may be disapproved by international observers who are quick to judge without fully understanding the history that has to be dealt with in order to ensure a stable future for all. The culture of accountability should be developed at all levels of leadership. There has never been a genocide that was not government sponsored and outside intervention always seems to come too late. Prevention is therefore the only solution. EW

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video launch 14