

[After the storm – Accessing medicine after Hurricane Maria \(10 min read\) \[1\]](#)

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"Apocalyptic"¹ was the word officials and reporters used to describe the devastation. Buildings and roads were blown apart. Power lines dangled onto roads. Shards of wood, once walls, and splinters of glass, once windows, were left broken, along with papers, photographs, clothing, toys all strewn into a wet pulp. This was the state of Puerto Rico after a single storm. That storm was Hurricane Maria, with winds of more than 155 miles (250 km) per hour when it landed on September 20, 2017. Earlier in the month, the island had already lost power after Hurricane Irma. With Maria, whether in a city like Ponce or a remote island like Vieques, almost all of Puerto Rico was severely damaged, if not destroyed. This was the worst known disaster in the territory's history.

~~After the storm~~ Accessing medicine after Hurricane Maria

Hurricane Maria, with winds of more than 155 miles (250 km) per hour, caused "apocalyptic" damage in across Puerto Rico.

What the hurricanes couldn't destroy was the Puerto Rican people's spirit to rebuild. But alongside rebuilding came day-to-day, or even moment-to-moment survival. In the days, weeks and months that followed, many residents did not survive due to Hurricane Maria's direct and indirect health effects, with the latter being the consequence of a massive access breakdown. Because the storm damaged infrastructure, many Puerto Ricans found themselves without medicines and medical care; as time went on, chronic or usually treatable ailments became severe, and even deadly. Though the hurricane's immediate death toll was reported as 64 people, there may have been at least 1,000 deaths directly or indirectly related to Hurricane Maria.^{2,3,4} As horrific as these figures are, the number might have been significantly higher without the efforts of people like Raul Pineda.

Now overseeing the AmeriCares team in Puerto Rico, Pineda is the Latin America Recovery Director at AmeriCares, an international health-focused relief and development organization that responds to people affected by poverty or disaster with health programs, medicine and medical supplies. On September 20th, as Maria hit Puerto Rico, Pineda and his team were already preparing to deploy; as in all disasters AmeriCares responds to, they monitored the situation as soon as it became a potential emergency. Thus, when the storm hit, they were ready to swing in to action to bring people and supplies to the island. When the team arrived, they discovered the devastation was massive. "There was no means of communication there: phone lines and mobile lines were down. There was no electricity, no water," Pineda said.

~~Medicine and other supplies were desperately needed after a disaster like Hurricane Maria~~

Medicine and other supplies were desperately needed after a disaster like Hurricane Maria. Where roads are

blocked, or areas are remote, planes deliver life-saving goods to patients in need.

Photo by William Vazquez/Americares.

As in all emergencies, the help starts with a situational assessment, so work can be prioritized. But without even the most minimal infrastructure, how did Pineda and his team proceed? “Person-to-person information,” Pineda explains. “We travelled as much as we could across the island, whether on foot, by jeep or helicopter, personally gathering information. Then we could assess what the people needed, what could be done, and where we could help.”

Help was needed everywhere – and it would be needed for an indefinite period. The first step was for Pineda to organize medical supplies to be delivered to affected health facilities. But finding a safe, climate-controlled location to store medicine during the blackout was a challenge. “So we established key contacts in Ponce, where there was a warehouse with enough fuel supply to run the facility for the first month. These contacts helped us get our medicine and medical supplies in position. Then we could deploy medical teams across the island, even to isolated areas.”

Making personal connections was also something that aided the Americares team in their journeys around Puerto Rico, explains Pineda. “We have seen so many heroic examples, even people who had never experienced an emergency, or one of this scale. Local people. People who are normally, for example, clerks. But once this emergency came, they were just helping others: clearing roads, transporting people, trying to be a voice of the people who could not speak up.”



The will to survive

These were not the only good deeds. Pineda and his team found that even people who themselves needed to get to the nearest health facility managed to put themselves into action in any way they could: “They were even clearing the roads themselves, to let us know they were there and needed to be evacuated. Without those persons...” Pineda pauses. “I mean, more people would have died. They were survivors themselves – they had lost their homes, even members of their families. And they were out there helping their neighbors.”

This level of effort was also necessary, Pineda continues. “Most of the roads in the countryside were closed. The dimensions of the disaster were so big that the capacity of agencies to clear roads was overwhelming. So many communities cleared roads on their own – which allowed us to find communities, and the patients that were house-bound, or out of medicines.” In addition to immediate health emergencies, people with chronic conditions like diabetes or hypertension found that otherwise manageable conditions became emergencies. “The pharmacies were closed, the doctors’ offices were closed,” explains Pineda. “And people were not keeping enough medical supplies; no more than two to three weeks’ worth. So we were helping them

through mobile medical clinics.”

- After the storm – Accessing medicine after Hurricane Maria

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Raul Pineda, Latin America Recovery Director at Americares

In one example, in the isolated island-municipality of Vieques, in the eastern part of the island, such a medicine shortage became a life threatening situation. “We were able to reach Vieques and get our medical experts there. In some cases we found, people needed to be flown to the main island for medical treatment. During one of these medical consultations, we identified a patient who had high blood pressure. Normal blood pressure is considered 120 over 80, but this man was almost 300 over 140. He was on the verge of having a heart attack. We were able to bring him to an emergency site, and then the military flew him to the main island for treatment. And that is just one example of a chronic patient, in need, who didn’t have his medicines for a long time.”

Supporting the first-responders

Pineda and Americares efforts have been supported by Sandoz since 1986, providing the organization with antibiotics and other essential medicines. Since 2016, the level of donated medicines to Americares has reached a value of USD 10 million annually. Today, these medicines include over 25 products for treatment of infections, cardiovascular conditions, eyecare, skin conditions and musculoskeletal pain. According to Leslie Pott, Vice President Communications, Sandoz US and a member of the Novartis Foundation, “We’re living in communities in Puerto Rico as a global organization. We have friends or even family in these places – personal connections. So when Americares goes to places like Puerto Rico with our medicines, that makes us proud.” But supporting Americares is about more than just company pride for Pott; it’s about how Americares serves communities in need: “Through their reach, thoughtfulness in product selection, their

approach and diligence – they are very careful with resources and so extremely effective in helping people.” In turn, Pineda and the AmeriCares team are also grateful for the contributions of partners like Sandoz. AmeriCares’ Donna Porstner relates, “With such frequency and intensity of disasters, we have to have a roster of professionals, and supplies, ready to deploy.” Adds Randy Weiss, AmeriCares Senior Director of Corporate Relations, “We’d be unable to do our work without our partners.”

Medical teams made house calls to check on residents

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Medical teams made house calls to check on residents. Especially for patients with chronic conditions, ongoing access to treatment is essential.

Photo by William Vazquez/Americares.

Even now, nearly a year after Maria, there remains much work to do, and there will be for the foreseeable future. Critical infrastructure, such as electricity, is not yet fully restored⁵. Puerto Rico not only has to repair past damage, but it also must prepare for the future. As just one example, Americares is hosting disaster preparedness workshops for health workers in Puerto Rico serving the most vulnerable residents. Pre-positioning medicines in strategic areas of the island to ensure access in catastrophic situations is also a priority going forward, he explains. "People are more aware after Maria about being prepared at all times and revising those plans." Pineda also explains that both for residents and first responders, support for post-traumatic stress is needed – and is being offered, as a key component of mental health, so everyone can be fully healthy – and ready.

This preparation is necessary. In 2018, the US National Atmospheric and Oceanic Association (NOAA) foresees a "near or above-normal hurricane season."⁶ Pineda remains calm in the face of such news. "The people of Puerto Rico are vulnerable to such extreme weather conditions, but they are helping each other. This level of dedication is indescribable," he says of the island.

As of the summer of 2018, major US federal organizations such as FEMA have scaled down operations in Puerto Rico⁷, and the US Army Corps of Engineers has left. But Pineda explains that as long as access to medicines is needed in Puerto Rico, whether because of Hurricane Maria or any other event, "Americares will be working there, even if it takes years." Thanks to their work, and the support of their partners, programs are in place to help Puerto Ricans prepare – both physically and mentally – for the upcoming hurricane season. Says Pineda, with complete certainty, "If anything happens, we will be ready."

2017 - the unrelenting Atlantic hurricane season

The Atlantic hurricane season, which runs from June 1st to November 30th annually, is the period when 97% of Atlantic Ocean hurricanes occur, September being the most active month.⁹ Hurricanes themselves are tropical cyclones, with a speed of at least 74 miles per hour (119 km per hour). These storms are ranked on a category scale of 1-5 (see infographic). Since 1970, the National Oceanic and Atmospheric Administration (NOAA), an American scientific agency, has been tracking hurricanes in this region. 2017 was predicted to be "above-normal."¹⁰ Three of the 2017 Atlantic hurricanes - Harvey, Irma, and Maria - caused particularly devastating damage and loss of life.#

1. <https://edition.cnn.com/2017/09/25/us/hurricane-maria-puerto-rico/index.html#>
2. <https://www.nejm.org/doi/10.1056/NEJMsa1803972>
3. <https://edition.cnn.com/2018/05/29/us/puerto-rico-hurricane-maria-death-toll/index.html>
4. <https://edition.cnn.com/2018/08/02/health/jama-excess-death-hurricane-maria-invs/index.html>
5. <http://interactive.nydailynews.com/project/how-long/has-puerto-rico-been-without-power/>
6. <http://www.noaa.gov/media-release/forecasters-predict-near-or-above-normal-2018-atlantic-hurricane-season>
7. <https://www.fema.gov/news-release/2018/06/20/fema-still-here-help-puerto-ricos-hurricane-survivors>
8. <https://edition.cnn.com/2018/05/18/us/puerto-rico-power-army-corps/index.html>
9. <https://web.archive.org/web/20060718065833/http://www.aoml.noaa.gov/hrd/tcfaq/G1.html>
10. <http://www.noaa.gov/media-release/above-normal-atlantic-hurricane-season-is-most-likely-year>

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