



**JULIE STONE** - Missionary in Cameroon

**NOVEMBER 2016**

Dear Family and Friends,

One of the services I most appreciate here in Banzo is our Palliative Care Department. It is made up of four nurses and one clerical staff. All are committed, not just to palliating the symptoms of patients with terminal disease, but also to sharing the Gospel with them. Over 3 months ago, the Palliative Care nurses brought to our attention a young man by the name of Frederick. He had come to the hospital with a very painful and grossly disfiguring lesion involving his distal right leg and foot. He'd no funds even for pain medication. The Palliative Care nurses found Frederick in the "carers' kitchen" – an area behind the hospital where carers cook food for patients. Frederick was discovered to be in substantial pain owing to an exophytic lesion arising from his distal lower extremity associated with massive lymphedema. His disease appeared to be the result of a long-standing fungal infection. Having been present for over 15 years, the condition was growing steadily worse. On initial evaluation, Frederick's lower leg was suppurating and emitting a fetid odor – making it difficult for others even to be near him. Needless to say, he was miserable.

The nurses proceeded to take Frederick under their wing. They brought him to the Palliative Care Department where they cleaned and dressed his foot. He was offered pain medication from a fund maintained for indigent patients. When summoned to examine Frederick, we feared that the only viable option was an amputation. After taking the photograph, shown below, consultation was sought with a surgical colleague at our sister hospital, Mbingo. In responding to my e-mail, the surgeon maintained that – while an amputation might ultimately be required – he was willing to seek funds to cover the lengthy surgery necessitated by an attempt at limb salvage. Because Frederick was in so much pain, he had actually petitioned us to amputate his leg. However, after presenting the option offered by our surgical colleague, Frederick was willing to consider limb-saving surgery.

During this time of wound care and deliberation over the best course of action, Frederick heard the Gospel. His initial reaction to our discussions bordered on skepticism. This I found strangely refreshing insofar as, all too often, patients coming for help seem very eager to offer us an affirmative response. Still more unusual in Frederick's case is the fact that he was destitute and therefore dependent on us for whatever assistance could be offered.

**PRAISES**

- For the successful outcome of Frederick's surgery
- For the help of colleagues at Mbingo Baptist Hospital
- For the arrival of our surgeon, Dr. Ben, in September

**PRAYER REQUESTS**

- To know how to encourage Frederick – that he might seek to return to his village and eventually find permanent employment
- That our Palliative Care staff would persevere in the commitment to address the spiritual needs of patients

*Jesus' words to a man healed of demon-possession:  
"Go home to your family and tell them how much The Lord has done for you, and how He has had mercy on you."*

**Mark 5:19**



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Ultimately, Frederick did profess faith in The Lord Jesus and accepted the offer to attempt the more arduous limb-salvage surgery. He accepted the fact that this would involve more than one operation with need for skin grafting. Furthermore, if his limb did not heal, amputation would be required. With this understanding, provision was made for him to travel to Mbingo Hospital. Frederick spent almost two months at Mbingo undergoing a series of surgeries which, to everyone's delight, proved successful.

Frederick transferred back to Banso at the beginning of October for continued post-op wound care. On examining him at that time, it was wonderful to see the improvement in his leg with the operative site healing. His pain was virtually gone. Because, during the latter part of his stay in Mbingo, Frederick had no carer, we learned that he had been begging food from other patients there. Following his return to Banso, I told Frederick that it was important he find work – mentioning to him the Biblical mandate for work given in II Thessalonians 3. The problem was “Where could he work?” Our administration was kind enough to provide a position for Frederick in the hospital's Central Supply area where he faithfully reports each day to sort and fold surgical gauze. This assignment has allowed Frederick to keep his leg elevated as the surgical site continues to heal.

Frederick understands that this work arrangement is temporary – not indefinite, as he might have hoped. Ultimately, Frederick needs to go back to his village. Yet, he is clearly reluctant to return – worried that he may not have employment. Frederick has been encouraged to petition The Lord with these concerns. We do so hope that Frederick will one day go back - that he might share with those who earlier spurned him on account of his disease. May Frederick's physical restoration serve as a springboard to testify to his countrymen of the ultimate restoration available to everyone who turns to The Lord Jesus in sincerity and truth.

*Thank you for standing with us,  
Julie Stone*



Frederick's lesion on initial presentation after being cleaned by the PC Nurses



The Palliative Care Team together with Frederick some three months after his surgery