

Angel Heart International

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www.angelheartintl.org



HOSPITAL VISIT: Lan Xiaohua gets a checkup from Dr. Shouyan Lee in Gansu, China.

From Gansu with Love

By ALINA YANG
Volunteer

Lan Xiaohua had Ventricular Septal Defect, a hole between the two ventricle of her heart. She was already 13; medical doctors said she would only live to be about 20. Xiaohua's family had known about her congenital heart disease (CHD) since she was 7 years old, but with the humble living they made by coaxing wheat and other crops from the dry, parched land of Gansu, China, the necessary surgery expenses would have required 10 years worth of their income. It was 10 more years of money they couldn't afford - 10 more years of waiting that Xiaohua couldn't afford.

Xiaohua's condition was not untreatable. On the contrary, her CHD requires what is considered one of the simpler cardiac surgeries. If Lan had been operated on earlier, the chances of a successful surgery were almost 99 percent; after the surgery, she would have been completely normal, with no lingering symptoms at all.

Instead, she tired easily during even the simplest everyday activities, such as walking. Her lips tinted with blue whenever she did any work, and breathing was painful. Xiaohua was more susceptible to other diseases and caught colds frequently, another symptom of poor blood circulation. Additionally, she was shorter than other 13-year-old girls because her faulty heart stunted her rate of growth and development. Xiaohua desperately needed the heart surgery, but there was no money; her parents could do nothing but wait for time to take their child away.

When Angel Heart International (AHI), a nonprofit organization dedicated to helping children with CHD in China and other developing countries, met Xiaohua in a local clinic, the volunteers decided to follow up with a visit to her home. During a two-hour drive along an unpaved muddy road, AHI was introduced to one of the many difficulties Xiaohua's family had had to deal with in their daily lives: the road was so unserviceable that their

car got stuck.

When they finally reached the house, the volunteers were warmly greeted by all the family members. After the accompanying doctor performed a preliminary checkup on Xiaohua and assessed the severity of her condition, AHI volunteers reviewed her family's financial status and discussed the best available treatment. Little by little, we learned their story.

Her dad, ardently devoted to his daughters, had continued to send both Xiaohua and her older sister to school, hoping against hope that his youngest child could still have a chance at a happy future. Despite all obstacles, they were both exceptional students; Xiaohua shyly presented a composition she had written at school, words carefully inscribed on the yellowed sheets of a small notebook.

A rough interpretation translates:

I Love the Little Grass of Spring

"When spring comes, the earth
[See Love, Page 6]

AHI Receives Grant

By QUAN ALLEN CHENG
Volunteer

In late October 2008, Edwards Lifesciences granted Angel Heart International \$15,000 to help fund its programs.

The award ceremony was held on Nov. 13 at the Edwards Lifesciences' headquarters in Irvine, California. AHI founder and president Shouyan Lee as well as volunteers Quan Allen Cheng and Hengchu Cao attended the celebration.

Edwards Lifesciences has been a leading cardiovascular device manufacturer since the 1970s. It went public and started to trade in the New York Stock Exchange in 2004. Edwards Lifesciences support advancements in research and improvements in the quality of life, a mission AHI shares. In fact, some employees of Edwards Lifesciences, whose headquarter is located in Irvine, California, have already become AHI volunteers.

On June 12, 2008, Angel Heart International decided to launch a Corporation Grant application in order to raise enough funds to help even more CHD patients in the upcoming year. The first goal was the Edwards Lifesciences Fund (ELF).

To help fund for AHI's program Mending Young Hearts in Gansu (MYHG), AHI applied for both ELF's strategic grant and community grant. The strategic grants are given to supports projects that "expand awareness of cardiovascular disease, its prevention and treatment or enhance support and access to care for underserved cardiovascular patients," while the community grants are given to support projects that "provide opportunities for Edwards' employee involvement, help strengthen the community and improve the quality of life."

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Also in this issue



Partner Hospital

Learn more about AHI's relationship and history with Gansu Province People's Hospital.

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Children's Stories

Get acquainted with the children that AHI has helped and find out how their lives have changed.

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Inside the Journey

Take a trip with AHI volunteers to Gansu and read about their thoughts and experiences.

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Mission Statement:

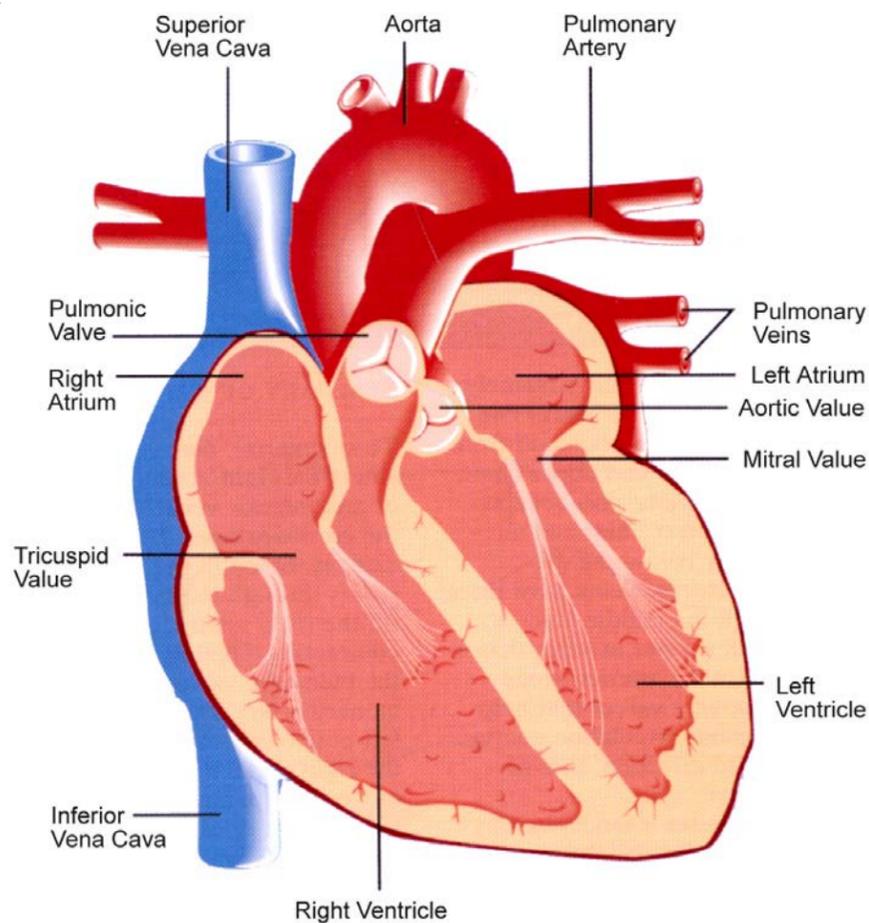
Angel Heart International is committed to serving children with congenital heart diseases in developing countries. We promise to do everything possible for these children, and work not only to show them compassion, but also a future.

Our Vision:

We seek more grassroots efforts to give love and care to the CHD children and their families, and to go beyond simply providing medical services to them.

We seek collaboration with other charities and NGOs so that the children AHI serves can later benefit from education, poverty alleviation and other relief organizations. Our goal is to create a chain of care for these children.

Congenital Heart Disease



www.niaaa.nih.gov

A. What is it?

Congenital heart defects are problems with the heart's structure or the large blood vessels near the heart that are present at birth. These defects can involve the walls of the heart, valves inside the heart, or the arteries and veins that carry blood to the heart or out to the body. CHD is the most common form of major birth defect in newborns, affecting close to 1% of all newborn babies (8 per 1,000).

B. What causes CHD?

Currently, doctors don't know why congenital heart defects develop. Heredity may play a role in some heart defects. For example, a parent who has CHD may be more likely than other people to have a child with the condition. In rare cases, more than one child in a family is born with a heart defect. Researchers are still studying other factors.

C. Symptoms

Severe defects can cause symptoms that include:

- Rapid breathing
- Cyanosis (a bluish tint to the skin, lips, and fingernails)
- Fatigue

- Shortness of breath
- Buildup of blood and fluid in lungs, feet and legs

Normal growth and development depend on a normal flow of oxygen-rich blood to all parts of the body. As a result of a faulty heart, a child with CHD may not gain weight or grow as he or she should. These children may become tired easily or short of breath during exercise or activity. Because many types of CHD cause the heart to work harder than it should, in severe defects this can lead to heart failure. Other common effects include life-threatening brain infections and hemorrhaging of the heart.

D. Treatment

The outlook for a child with a congenital heart defect is much better today than in past years. Most types of CHD are now treatable, and many of the surgeries have almost a 99% chance of success, given that they are performed in time. The best time for surgery is between ages 0-6 years of age; the younger the better. Most children who receive the surgery can grow into adulthood and live active, productive lives.

Our Services

Mending Young Hearts in Gansu

Primary Goal

To save the under-privileged children born with life-threatening congenital heart defect whose family cannot afford the essential medical expenses for corrective surgery.

Location in Effect

Rural areas of Gansu Province, China, which is one of the poorest areas in China.

Mending Young Hearts in Gansu includes the following three sub-programs to help children with congenital disease and their families:

Medical Assistant Program

This program aims to facilitate access to appropriate medical treatment for CHD children from low-income families. The program is currently providing fully sponsored surgeries with AHI partner hospital in Gansu to under-privileged CHD children whose average annual family income is around \$100.

Support Group Program

The support group provides a communication platform for the patients' families to support each other and obtain medical information from volunteer physicians. This program also serves as a platform to increase



A group of doctors stand outside of a local clinic in Dingxi, China.

public awareness of congenital heart disease in not only Gansu but also China. The program will be later expanded to include educational resources to help patients obtain basic medical knowledge and care for their specific ailments.

Better Medical Care Program

This program aims to facilitate advances in the treatment of congenital heart disease in Gansu. It also aims at advocating and promoting research for better prevention, diagnosis and treatment of CHD.

To Angel Heart Contributors,

On May 12, 2008, an earthquake of magnitude 8.0 hit China's Sichuan Province and sent subsequent aftershocks to neighboring provinces of Gansu,



www.abc.net.au

Shaanxi and Yunnan. Buildings were destroyed and families ripped apart; the death toll stands over 80,000 while a recorded 370,000 + are injured. Devastated by the destruction and heartbreak, Angel Heart International, Inc. jumped into action, hoping to contribute to the relief efforts. We initiated a call for donations, and people from California to Pennsylvania, from

grieving adults to innocent children, rose together, raising a total of \$6,218. The first collection of money, \$2,284, was immediately sent through Gansu Province People Hospital to purchase medicine and other necessary supplies which were to the Wudu District of South Gansu disaster area. Our first shipment of medical supplies arrived at the Wudu on May 28. The second collection of money, \$3,934, was sent to the Chengdu Chinese Medical Hospital in Sichuan and was also used to purchase medical supplies to support the medical relief team helping the victims in Pingwu area.

To view the invoices of the purchased medical supplies or pictures of our shipments and the areas of devastation, please go to our website at www.angelheartintl.org.

From everyone at Angel Heart, we sincerely thank you for your contributions, your support and, most importantly, your compassion. May God bless you all.

With love,

Angel Heart International, Inc.



DR. SHOUYAN LEE

Word from the Board

A few years ago when the children of our board members were battling against congenital heart disease, we anxiously waited outside the operating room and then helplessly wept inside the ICU. At that time, we did not know that this challenge in life would later turn into a blessing to others in need.

At the beginning, this was just an idea, a whisper that touched our hearts, an impulse to heal the pain as experienced by ourselves, a sense that giving is more blessed than receiving.

A year ago, we started to turn our ideas and feelings into actions. Pure sentiments were nice, but it was the deeds that changed us.

Now, 12 months and 10 patients later, we are presenting this newsletter to you – all the people who supported Angel Heart International along its journey of life and of love.

It is you, doctors, donating your time and expertise going onto the dirt road, visiting and examining each CHD

kid, who made this possible; it is you, volunteers in Gansu, spending your weekends and evenings visiting and caring for each CHD child, who made this possible; it is you, a 6-year-old child, donating your Christmas money to the children in Gansu, who made this possible. And finally, it is you, our volunteers in United States, editing our web site, telling friends about us, contributing expertise in accounting, writing and artwork, or simply remembering us in your prayers, who made this possible.

It is love that brought forth this newsletter,

It is love that brought us together in the mission of Angel Heart,

It is love that connected the CHD families ten thousand miles away with every dollar you have donated and every minute you have volunteered and every bit of care and prayer you have offered.

Let AHI continue to be an organization of LOVE.

[Grant, from Page 1]

The application deadline for the 2008 Edwards Lifesciences grantcycle was July 15, 2008. To meet this deadline, AHI divided its



Edwards

volunteers into two groups, with one focused on accounting and the other focused on proposal writing.

The Accounting Group's task is to prepare AHI's 2007 financial statement and MYHG's budget plan. To meet non-profit auditing requirements, AHI had to set up a totally new accounting system and reenter all the transactions to comply with the strict accounting procedures in new system.

AHI immediately recruited a professional volunteer accountant to take charge of AHI's accounting system. AHI also received guidance from a Certified Public Accountant

who has audited for non-profit organizations for many years. With the help of these two professionals, AHI's Accounting Group soon got on the right track.

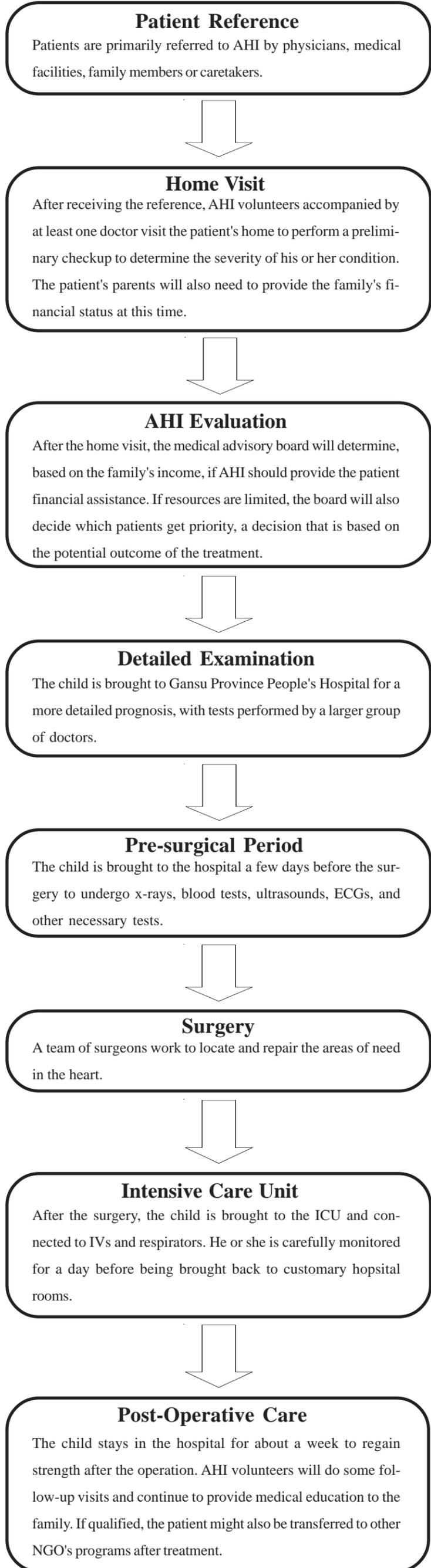
Meanwhile, the Proposal Group needed to clearly describe MYHG and illustrate how MYHG meets the goals and objectives of the community grant and the strategic grant.

Unfortunately, Lee was in Gansu, China from June 20 to July 11 for AHI. Without Lee's help, it became more challenging for the team to write the proposal. Although most members in this group had some experience in grant applications before, they had to spend a lot of time on reading all of AHI business documents to fully understand AHI's initial plan. In addition, the team had to do a lot of research to find accurate statistical data on Gansu's economy and congenital heart disease, and carefully study ELF's requirements before writing the proposal.

After a month of hard work, AHI successfully submitted the grant application online on July 15.

At the following celebration party, most volunteers who worked on the ELF grant application felt rewarded for their work when Lee reported that another two CHD patients received successful operations during his trip to Gansu. Everyone hoped that AHI could raise enough funds for MYHG and benefit more CHD patients and their families in the future.

Process of Recovery





AHI History

The journey of Angel Heart International started with our own kids' diagnoses with CHD. When we faced the test of life and death with our children in the Intensive Care Unit, nothing was comparable to the agony in our hearts.

September 2006: We started to realize that there are more innocent children in the world touched by the same life-threatening disease. In addition, many of their families not only have to fight the emotional pain but also have to fight poverty and the lack of medical services. We decided to use our experiences to help other children afflicted with CHD.

February 2007: Angel Heart International was incorporated in the state of California as a nonprofit organization.

July 2007: AHI received IRS approval of 501 (c) (3) nonprofit tax exempt status.

November 2007: With the assistance from the office of Gansu provincial government in Shanghai, Gansu Health Bureau, Gansu Province People's Hospital and Brook Education Institute, we made our first trip to Dingxi and Huining in the Gansu province to screen patients and visit patient families.

April 28, 2008: The first two CHD patients, Zhang Jiasheng (4.5 years old) and Liu Lele (3 years old), successfully received surgeries at Gansu Province People's Hospital.

June 25, 2008: Ding Xiaoyan (11 years old) and Lan Xiaohua (13 years old) went through successful surgeries. The first team of volunteers from the United States visited the patients' families in Dingxi.

August 2008: Four CHD patients, under the help of AHI's support program, successfully received surgical treatments at Gansu Province People's Hospital.

September 24, 2008: Two more CHD children, Chen Wenbo (3 years old) and Ran Lihong (10 years old), underwent successful operations.

Geographic Characteristics:

With an area of 3,638 km², Dingxi County is located in the central part of Gansu province. Altitude in the county ranges from 1,700 to 2,580 meters above sea level. The terrain is characterized by rolling hills and

Partnership with Gansu Province People's Hospital

By SHOUYAN LEE
AHI President

Gansu Province People's Hospital (GPPH) is a state-owned large synthesizer Grad A Class 3 hospital with more than 50 years of history. During AHI's first trip to Gansu in November 2007, GPPH was introduced to us by the Shanghai Office of Gansu Provincial Government through the Health Bureau of Gansu Province. The hospital immediately supported AHI's mission, and after a meeting with all the departments that would be involved in the project, we toured the hospital to visit patients. Two days later, in the first trip of many, we, accompanied by Dr. Xingguang Liu from GPPH's Department of Cardiovascular Surgery, went to the town of Huining to visit some of the patients' families.

The Department of Cardiovascular Surgery at GPPH has four cardiovascular surgeons and nine cardiovascular surgery nurses. Four hundred surgeries are performed every year, including those for congenital heart diseases (atrial septal defect, ventricular septal defect, patent ductus arteriosus, tetralogy of Fallot and endocardial cushion defect) and acquired heart diseases (prosthetic



GANSU HOSPITAL: Dr. Shouyan Lee confers with other doctors.

heart valve replacement, coronary artery bypass, thoracic and abdominal aorta aneurysm). The age spectrum of patients ranges from 6 months to 76 years.

In March 2008, GPPH and AHI quickly reached a collaboration agreement and AHI's first patient successfully received surgery in April. By collaborating with GPPH, AHI's patients will not only receive financial aid from the local government/the hospital (~30% deduction of the total medical cost) and the doctors' expertise, but also receive tender

loving care from the two of the surgeons, Dr. Tao You and Dr. Xingguang Liu, who have also become AHI volunteers.

AHI is also granted the "green channel" privilege at GPPH, which means that our patients will receive treatment first without any financial obligation. After the patient is discharged, AHI, GPPH and the Health Bureau will then work together on the invoices. AHI typically wires payment to the special AHI account at GPPH two or three months after the patient is discharged.

Focus: Dingxi, Gansu

The place that many of AHI's patients call home.



mountain ridges, with very steep cliffs.

Climatic Characteristics:

Dingxi has an annual mean temperature of 6.3 °C, with a monthly mean temperature of 18.4 °C in July, the hottest month, and -8.1 °C in January. The annual mean precipitation is 420 mm. Drought is common in Dingxi, which is also prone to hailstorms, low temperatures, frost, hot, dry winds and other common

natural hazards.

Dingxi is extremely arid. There is a saying that the only time the people can shower is "at birth, marriage, and at death" because of the scarcity of water. People sometimes hardly have enough to drink, and a barrel of water can cost \$80. All drinking and farming water used comes from rain.

Economic Characteristics:

Dingxi is one of the poorest

counties in one of the poorest provinces in China. According to a survey conducted by the County Statistical Bureau in 1999, the net per capita income of the rural population was 1,188 yuan (around \$170), far below the national average. For rural residents, the main sources of income are crops and animal husbandry, which together make up 70% of their total income.

Zhang Jiasheng (4 years old)

Operation Date: 4-28-08

During our first trip to Dingxi, China, we went to Shi Xia Wan (Stone Valley Creek) to meet two volunteer teachers from the Brook Education Institute. Shi Xia Wan is among one of the poorest areas in Dingxi.

With help from the two young teachers, AHI went to a local clinic to inquire of any CHD children in the area. There was only one doctor on duty and he was called away by a patient. As a result, we were told to ask around for ourselves. Glancing around the barren mountains and valley, we likened the task to finding a needle in a haystack. However, something miraculous occurred. During our aimless search, we happened to ask a lady packing potatoes outside a building if she knew of any CHD children. In the unlikely of coincidences, she revealed that her son Zhang Jiasheng was diagnosed with VSD, a treatable and common form of CHD.

When Jiasheng's family first learned of his disease, the doctor had recommended Jiasheng to undergo surgery as soon as possible. However, after hearing the surgical expense of \$3,500, "all I could do was cry and go



home," Jiasheng's mother told us. Truly, with a family income of around \$80 in 2007, the cost of the life-saving operation was an impossible amount for the family to reach. The only thing his mother could do was give Jiasheng the best food in the family — bread to eat while his three sisters only got potatoes.

Jiasheng is the first CHD child that AHI visited, and he is also the first patient. On April 28, 2008 after the successful surgery, we were hugging and cheering with Jiasheng's father, sharing the joy of life. Now Jiasheng is recovering well with his family after the operation. On June 26, 2008, AHI visited him again and are happy to say his fitness and health have both significantly improved. He will be a completely normal child.

Ding Xiaoyan (11 years old)

Operation Date: 6-25-08

On Nov. 19, 2007, the Health Bureau of Gansu Province and Gansu Province People's Hospital arranged a trip for AHI to visit patients in Huining, China. After hours of driving on dirt roads, we came to a dead end and had to park the ambulance and walk towards the village.

To our surprise, the village still resembles the typical Gansu villages I saw 30 years ago; there were no



improvements. When we approached a flat yard, we saw a girl helping her father do fieldwork. It's 11-year-old Ding Xiaoyan.

The last time Xiaoyan went to school was in kindergarten; she was not only needed at home, but her CHD had prevented her from making the long journey to school. To get an education, she had to climb for several hours up and down a steep slope and across a

large creek — the school is on the opposite side of a valley.

Although we had prepared ourselves, we were still shocked by the family's level of poverty. Xiaoyan's parents cannot read or write, and they have one son and five daughters.

Xiaoyan's CHD was discovered at an immunization appointment when she was 7 years old, but her family could not afford the lifesaving operation; they count on the rain and earth for food, only making about \$50 a year.

On June 22, 2008, Xiaoyan was admitted to Gansu Province People's Hospital. AHI volunteers visited her, comforted her and brought her drinks and fruits she had never seen before. When someone gave her a carton of juice, she took one sip and put it off to the side, not wanting to waste it. It was her first time drinking juice.

At the hospital, Xiaoyan was formally diagnosed with Tetralogy of Fallot, a more difficult type of CHD to treat. Her surgery on took more than 4 hours. In accordance, Xiaoyan's recovery took longer than that of other kids AHI had helped. During that difficult period, AHI volunteers were there at the bedside everyday, helping Xiaoyan eat, hoping to ease the pain and bring smiles to the family. When we had to depart, her father was crying.

It is love that bonded AHI to the family; it is love that changed Xiaoyan and her family's life. And it is love that changed us also.

Liu Lele (3 years old)

Operation Date: 4-28-08

We first met Liu Lele (meaning "happiness") at the local clinic of TuanJie, China. Lele's VSD was quite severe; she did not have much time left.

Though Lele was still a baby, she had already been brought to the hospital too many times; as soon as she would see the stethoscope, she would start crying. The loud murmurs made by her defected heart were so easy to hear even though she was crying loud.

In March 2008, AHI visited Lele's family and joyously told them that we could help financially with the surgery. On April 28, 2008, I went out of the operating room with Dr. Tao You, the chief cardiovascular surgeon at Gansu Province People's Hospital, to bring the good news of Lele's successful surgery to her father. Seeing smiles on our faces, her father quickly shook our hands before going out of



the building crying. He later wrote to me: "I cried on the day of the operation's success. Why? When I saw your smiling face, all my helplessness, all my hopelessness, melted away." Six days after the surgery, we saw a smile on Lele's face, and an AHI donor said, "I realized that we really could do something meaningful in our life." Lele's three-month follow-up check showed that she was recovering very well.

Latest Update

Chen Wenbo (3 years old)

Operation Date: 9-25-08

In June, AHI volunteers had visited Wenbo's and Lihong's families in the town of Dingxi in the Gansu province. Wenbo was diagnosed with VSD at 5 months old. Since then, his parents had been trying every means possible to make enough money to pay for his surgery. They had gone to the cities, becoming "peasant workers" in the city of Lanzhou and later Ningbo. However, the working conditions and the income (\$70 a month) were so poor that they could only support their own stay in the city. Meanwhile, Wenbo's condition continuously



worsened and his symptoms became more and more obvious. There was little time left for him to wait.



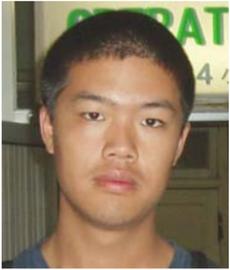
Ran Lihong (10 years old)

Operation Date: 9-25-08

Lihong's story is similar to Wenbo's. She also had VSD, though less severe than Wenbo's. However, with Dingxi's constant drought, how many more years would Lihong have to wait until her family's potato crops bring in enough to pay for her surgery? Lihong was introduced to AHI by the

father of Zhang Jiasheng, who is the first CHD child that AHI helped. Now, Jiasheng's father is an AHI volunteer, serving other CHD families.

Both kids were discharged from the hospital on Oct. 4, 2008. They are currently recovering at home.



KEVIN MO

FRESHMAN AT STANFORD UNIVERSITY

On my way to visit the first Angel Heart International candidate in Dingxi, Gansu, I couldn't help but feel a sense of fear and anticipation. I had already seen from the web site's pictures, and a slideshow, what the patients would look like. But pictures are very limited in the sense that an event is made up of much more than an image on a screen. One must also take into account many things: the smells, the temperatures, the moods, the personalities. In other words, it is the difference between knowing all the interview questions and sweating under the scorching intensity of the actual interview.

After riding for about an hour on a relentlessly bumpy and undeveloped road (the patients lived outside of the city in farmland), we finally arrived at the first child's house. To put it plainly, it was nothing like any place I've ever seen in the United States. The lack of street lights, paved roads, sewers, fire hydrants and electricity was made up for by the abundance of trees, soil, vegetation, animals and sense of tranquility. And then I realized that with such a low standard of living, it is no wonder that this family, and others like them, need the help of Angel Heart.

The first child was a shy 7-year-old boy. His name is Xiao Yong. He greeted us by hiding behind his parents, obviously not used to visitors, and definitely not used to visitors like us. When Dr. Xingguang Liu from the Department of Cardiovascular Surgery of Gansu Province People's Hospital first performed a check up on him, Yong had a scared, unsure look on his face. I imagine the freezing cold stethoscope upon his skin must have added to the unfamiliar feeling created by our group of volunteers standing in his living room. After Dr. Liu finished his check-up, my sisters and I were allowed to listen to his heartbeat. Although I already knew that the heartbeats of those who had CHD were supposed to be muddy and fast due to a hole in their heart's septum, I was shocked when I heard the little boy's heartbeat. I could hear the blood racing to get oxygen around the boy's little body. I could hear the mixing of the oxygenated and deoxygenated blood. And I could hear the absence of any clear beats. The sheer reality of this sound struck me to my soul. I felt a clinching soreness in my chest, making me thankful for the healthy life that I was born into. As we were leaving, Yong ran behind us, laughing with his friends. It was truly a glorious yet sorrowful sight because even in the face of a life threatening illness, this little boy had the strength to still be a kid.

The house of the next child, Ma

Juan, was on the top of a tall mountain. Our whole group had to climb up a long way through dirt roads, farms, and a pile of chicken feathers to arrive at her house. From the looks of their living room, this family was poorer than the previous one. Under a leaky ceiling made from mud and over a floor made of dirt, Juan's entire family crammed into this tiny room, anxiously waiting to see if they could receive Angel Heart's help. Angel Heart will help them after an ultrasound is conducted to show that Juan's CHD is treatable. The family would have to pay 500 yuan for this preliminary examination. Despite their circumstances, the family immediately replied that they would definitely do it, even though 500 yuan is probably more than they make in a year. After leaving, I heard that the father's brother even offered to sell all of his goats to help pay for the examination. This is what a family is: a group of people bonded by an indescribable love who would sacrifice themselves for one another. And this is the kind of idea that organizations such as Angel Heart promote: that humanity is a family, and that those who are more fortunate should reach out to help those who are in need.

The next day after we visited these two patients, we went to Gansu Province People's Hospital in Lanzhou. Dr. Liu and Ms. Niu, who are both AHI volunteers, were very helpful in guiding us around the hospital. First we visited a patient that had received help from Angel Heart. In a white room with nothing but beds and medical equipment, the little boy looked at us with curious eyes. When Dr. Liu walked into the room, you could see the clear gratefulness in the family's smiling faces. To a poor family like theirs, help from Angel Heart must truly be like help from an angel.

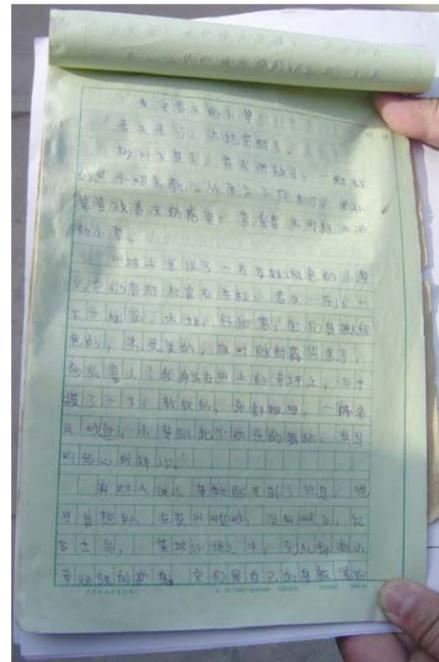
This trip to Gansu has revealed to me a completely new perspective on the life I have been living up until now. Throughout my entire life, the biggest problems I've ever had was getting good grades or finding time to practice fencing. In contrast, the patients in Gansu, even with Angel Heart's financial assistance for the surgery, could barely pay for a preliminary examination. To be brutally honest, I could pay for that examination with my own pocket money. This visit to Angel Heart patients has really opened my eyes to the upsetting existence of diseases such as CHD, and the natural obligation of humans who are better off to help other humans live normal, healthy lives. Despite our differences, we are one people living in one world.

[Love, from Page 1]

wakes up. Tree leaves sprout while flowers begin to blossom. Swallows fly from the south, singing enchanting songs and lovely tunes. I love the feeling of spring. I love the green little grass of spring.

On the hill, there's a spot of green grass. They're full of spirit, full of infectious vitality. When spring comes, they cover Mother Earth. I look, carefully: the shoots are fresh green, the essence of beauty and life. And I lie on the grass, touch it with my hands; it is so soft. When a gust of wind whisks by, the grass dances with delight. Watching them makes me feel so happy and content.

Some people say grass is too weak, too delicate. They never realized that it can be found everywhere: on the mountains, in the valleys, on the hills, on the yellow earth. They use their vibrant green bodies to decorate Mother Earth. Look, they lower their head and converse with her.



ESSAY: Xiaohua shows volunteers an essay she wrote for school.

Little grass, I want to be like you, contributing to the motherland, not for money, not for fame, but for the idea of sheer perseverance in even the toughest circumstances."

Like many of the other first AHI family visits, the willingness to personally understand each child's situation established a deep mutual trust between the family and Angel Heart members. We came to know them on a deeper level, beyond their faces and names, familiarizing ourselves with the children's personal accounts and lives. It was in this way that we became acquainted with Xiaohua's special story.

On June 24, 2008, Xiaohua's patience and determination were rewarded when she successfully underwent a surgical operation for her CHD. She and her family had arrived at the hospital a few days preceding the surgery, and Dr. Shouyan Lee, the head of AHI, talked with them for hours on end, lending an ear and giving constant encouragement when they were anxious.

Right before Xiaohua was rolled into the operation room, volunteers arrived to meet the family and offer support, supplying comfort to both the children and the parents. Dr. Lee and two volunteers from the United States accompanied Xiaohua during the entire operation. After the one-and-a-half-hour surgery, they and the surgeons emerged smiling to greet the anxiously waiting family. The operation was a success. When they broke the happy news, Xiaohua's sister rushed out of the hospital and very quietly began to cry.

As Xiaohua was wheeled out an hour later to the Intensive Care room, volunteers vigilantly watched as nurses placed her on the bed, abating the fears of the family who could not enter the room to be with her.

After the surgery, Xiaohua needs at most a week to recuperate before she can go back home and back to school. AHI volunteers check up on her almost daily, always carrying little gifts; to Xiaohua, they bring simple treasures such as fruits she has never seen before, new clothes she has never been able to own, and informative and amusing books she has never had the opportunity to read.

Xiaohua is brave as she smiles at the AHI volunteers who are holding her hand and talking softly with her parents. Dr. Lee urgently speaks on the other side of the room with the father of another child, Ding Xiaoyan, about the importance of education. Like Xiaohua, Xiaoyan was able to receive her heart surgery through AHI. Unlike Xiaohua, however, Xiaoyan would have to work on the fields with her father again, unable to attend school. After a lengthy conversation, Dr. Lee finally persuades Xiaohua's father; Xiaoyan will now also go to school.

I am a 16-year-old volunteer in AHI and, unlike many of the other members, I've only been a part of this project for about a year. However, even within this short period of time, I've grown to cherish this organization and its mission. AHI was created by an amazing man who not only had the love and patience to visit each child and spend most of his life on planes traveling between the United States and China, but also the ability to influence every person he came in contact with on both continents. When I traveled to Gansu this year and watched Xiaohua's operation, one doctor told me, "Every time Dr. Lee comes here, it's as if our spirits are reborn."

All I did was listen, learn, and write this story. The stories I record for this organization are not of the impoverished houses I witnessed when I visited these families, but of the happiness and hope AHI brought to the "little grass" of their lives. I write this with love because Lan Xiao Hua's story is of love.

As all Angel Heart International's stories are of love.



ALINA YANG

SENIOR AT SARATOGA HIGH SCHOOL

June 26, 2008

Angel Heart Intl. was on a different mission today. Another volunteer and I were to teach at Xing Jien Elementary School, situated in one of the poorest regions of China. After a two-hour drive on roads so dusty we couldn't even see the sky and winding trails that ran to the very tops of dry rocky mountains, we finally arrived at the school.

We met another college student who had volunteered to be a teacher, Zhu Ji Fan. She had already stayed there for nine months and planned to stay a year. As she showed us her living

space for their names, and they all quickly scattered away when any of the volunteers even so much as glanced at them. Small children would peek at us behind corners, silent, and then duck if I smiled. Not only was it slightly unnerving, but I also felt discouraged at not being able to communicate with them. No matter what I said, I was still a foreigner here.

At least that's what I thought. When we left shortly later to eat lunch ourselves, I saw six children waving wildly at us out of a class window. This time, even when we looked directly at them, they continued to wave goodbye,



SMILES: Some children, bashfulness forgotten, wave goodbye to the volunteers.

space (a simple dirt floor room with a single wooden desk in the corner and a tiny stove on which she cooked all her meals), she spoke about the joy of working with the children. Only when we asked did she speak of the difficulties living in such poor conditions; due to the scarcity of water, her weekly showers were just occasional wipe downs with a wet towel. In a region where people depend solely on rain collected in earthen wells, many families have problems obtaining even adequate drinking water. Consequently, many of the children have never washed before.

Even though we had arrived during the school's two-hour lunch break, during which children must go home to eat, many were still at school. When I talked to a fourth-grade girl in one of the classrooms, she said she wasn't hungry. Fan explained that many of the children chose to stay because either it took hours to walk home or their families couldn't afford the meal. So these children didn't eat lunch at all and instead wandered the rooms and school grounds, playing.

I immediately noticed the children's shy and unobtrusive natures. No one would speak even if I asked

small faces mixed with in with small hands. We waved back; we'd be back to teach later that day.

After a quick lunch, Angel Heart visited Zhang Jiasheng, the first child to receive help from our organization. After his surgery, he was recovering well, and he and his family were beyond themselves with joy. Jiasheng's mother couldn't stop laughing as she held the smiling boy in her arms. When air became frigid from the wind and rain, Jiasheng's mother lent me a jacket. As she escorted us back to our van, she stooped down and picked up handfuls of bean pods from their precious crop for us to taste. They were sweeter than any candy I'd eaten back home.

Angel Heart's kindness to her family had a large impact on both the family and the nearby community; Jiasheng's family introduced another neighbor's CHD child to the organization. The care and charity Angel Heart had shown to one had spread to another.

As we drove back to the school, I thought about my upcoming challenge in connecting with the students. Even as I entered the classroom filled with children, I had no plan. So we went impromptu.



JOY: A healthy Jiasheng smiles beside his happy mother.

In the classroom, about 15 students squished together on five rickety benches. Even here, the boys sat in the back while girls chose to sit in the front. This was a mixed grade classroom, with first, second and third graders all seated together. Drawings, essays and worksheets were plastered to the back wall, along with various colorful stickers and cutouts. A sign reading "Study well, rise higher each day" hung by a Chinese flag above the chalkboard; a simple bench was the only thing available to the teacher.

We started by passing out flashcards with everyday Chinese words on them, and asked if they could recognize any. When that exercise was complete, we began to teach them English. The children became a lot more interested at that game, and learned very quickly even though they would not be taught the alphabet for another year or two. Teaching them the words they wanted to know in English was the best way to communicate with them; the students had fun learning new things, and it was extremely satisfying to see them laughing freely with us. We'd broken the barrier.

the most difficulty. As we ripped papers into tiny squares and demonstrated the steps to each student, the children became even more vocal and open. Soon, many of the boys sitting in the back would be calling us for help them and turning around to help their neighbors. But I was sorely reminded of their living circumstances when I noticed insects scurrying through the hair of an 8-year-old boy as he bent over, intense on the tiny folded paper in his hands.

June 27, 2008

We crowded into a blue van. After two hours of driving, we arrived in Dingxi and met up with the man responsible for helping AHI locate CHD children who need treatment. Dr. Xingguang Liu led us, after trekking through a muddy road furrowed with gullies and troughs, to the house of Zhang Li, a girl my age.

After a quick examination by Dr. Liu, Zhang was diagnosed with ASD, one already in its final and most serious stages. Zhang's parents had known about her illness since she was 4 years old; however, her dad was only able to earn around \$150 a year from transporting people on carts. "Her surgery cannot wait anymore," Dr. Liu said. "At this rate, she will only live till she's 20."

When I saw the parents joke and wave us goodbye as we left, I was frozen in sadness. How could they still smile when they were just told that their daughter had only two more years to live? How could they remain so kind and courteous to the people who brought them that kind of news? I thought that maybe it was because they were already resigned, leading a kind of desperate, hopeless life. Or maybe it was because they had already known for years that they would lose her.

After leaving Zhang's house, we



SCHOOL: Students from first through third grade together learn from flashcards.

Afterwards, the blackboard was covered in words such as "school, banana, brother, home, apple and coat." The students were ready to have a hands-on activity, so we used origami to teach them English, specifically for "coat," the word with which they had

drove through a dust storm to reach Dingxi. It was like no city I'd ever seen before. All the buildings were either under construction or obstructed by some hideous gray wall or fence. Everything was the color of dirt, and

[See Diary, Page 8]

AHI's Financial Statement

Nonrestricted Public Support	2007	2008
Corporate Contributions	\$0	\$2,990.00
Individual Contributions	\$8,010.00	\$18,184.45
Total Contributions	\$8,010.00	\$21,174.45
Restricted Contributions		
Sichuan Earthquake Contributions	\$0	\$6,218.00
Investments		
Interest-savings, short-term CD	\$0	\$156.62
Total Income	\$8,010.00	\$27,549.07
Expenses		
Surgery Fees	\$0	\$9,540.00
Bank Fees to China	\$14.84	\$135.15
Sichuan Earthquake	\$0	\$6,218.00
Total Expenses	\$14.84	\$15,893.15
Net Income	\$7,995.16	\$11,655.92

Our journey begins
When a child falls ill
With congenital heart disease
Which can't be cured with just a pill

We reach our hands out
And take in the grieving family
In hopes that we can save them
From the soon-to-be tragedy

If we try our very hardest
If we work our way to the top
With love and compassion
This disease we'll surely stop

Now here's where you come in
With your help we won't fail
In saving a dying child
We surely will prevail

So press that volunteer button
Reach out your heart to lend
A child is waiting for us
Because love has no end.

-poetrymouse

[Diary, from Page 7]

and there seemed to be more piles of rubble than actual houses and shops.

We reached the home of 18-year-old Qi Ming after an arduous climb down and up the steepest slopes I've ever walked without footholds. After reaching the top, panting and wheezing, I discovered that Ming, who had accompanied us, had not even begun to breathe heavily. After walking these slopes his whole life, he was used to these treacherous climbs.

At first, I questioned if he really required immediate treatment. It was a callous thought but understandable after seeing other children with more perceptible and critical conditions on the waiting list. It was not until after learning his story from his parents that I understood.

In short, Ming's condition prevented him from attending college. It seemed like a trivial matter in comparison to the question of life or death, but was actually more significant

than I had originally thought. This family had risked everything to get their son an education so that he could escape the cycle of poverty and destitution they had lived in all their life. For the children fortunate enough to scream about how they hate going to school, there are people who shed tears and blood to attend the place others take for granted.

I realized that this is a story that transcends the simplistic consideration with which people regard humanitarian organizations. People often forget that when organizations like AHI say they work to save lives, their efforts are not only aimed towards rescuing the "physical." The word "life" encompasses far more than that. It's beyond sustaining the corporeal bodies; it's also about upholding the dreams and futures of the children.

And for Ming and his family, school meant "life."

The last family we visited that day was the home of Chen Wenbo, a 3-year-old boy with flushed cheeks and enormous adorable eyes. He sat on his grandma's knees; every time a volunteer beckoned him over to take pictures, Wenbo would dutifully get up, stagger over, gaze at us silently until it was done, then scoot back onto his grandma's lap.

The only words he spoke were when we gave him a small chocolate and asked him how it tasted. He replied, "Very sweet," sucking the plastic wrapper as he squeezed the melting confection into his mouth.

His condition, VSD with severe pulmonary hypertension, needs to be treated quickly.

Zhang Li's, Qi Ming's and Chen Wenbo's conditions all needed immediate attention. However, the next day, I was told that Zhang would be unable to undergo surgery because she had already missed the window, the chance, for recovery. Her condition



SHY: Wenbo sits on his grandmother's lap holding a piece of chocolate.

now was too severe, too deteriorated. I remember the smiles on her parents' faces.*

To me, these children became not just "victims of poverty," but real faces and smiles. Even though CHD was a significant obstacle, it didn't define the children's lives or personalities. Their stories are of love and compassion, of parents who smiled and sisters who cried, of not what they lacked, but what they could give. In the end, though it is money that makes surgeries possible, it is human compassion that inspires many others.

Update:

* Zhang Li was able to receive open-heart operation in August. An AHI surgeon, after conducting an reexamination, decided that she was operable. The surgery was a success. Under the support of AHI's support group program, Zhang was discharged on Sept. 4

Qi Ming's operation was made possible by AHI's support group program, which helped facilitate the process and provide comfort and care. Qi Ming is currently pursuing a college education.

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