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Woman on a mission

Dr. Sally Knox turned her skills and heart to helping cancer patients

By MICHAEL YOUNG Staff Writer

Trained as a surgeon, but with a missionary's heart, Dr. Sally Knox quietly combines the two to improve the lives of thousands of Dallas women and many more around the world. As the driving force behind The Bridge, a nonprofit agency that provides breast-cancer treatment for women without insurance, Dr. Knox has been a literal lifesaver for hundreds of women in North Texas.

And as an active and committed member of the Christian Medical Association, Dr. Knox has taken her skills to help women in Mexico, Ecuador, Latvia and, next year, all the way to Mongolia.

Close friends say she couldn't live any other way.

"I think there are doctors for whom medicine is a profession and those for whom it's a mission in life," said Kathy LaTour, a patient and breast cancer survivor and part of The Bridge's founding group.

"For Sally, it's a mission."

Not that Dr. Knox ever planned it that way. Instead, she attributes the course of her professional life mostly to circumstance and a far greater power.

"It's interesting," she said. "These were not planned decisions. The Lord had to have a hand in this or it never would have happened."

But door after door opened at the right time, plans were abandoned, and ultimately, Dr. Knox found a life of ministry, caring for women who had nowhere else to turn.
Finding her place

The daughter of a petroleum engineer and a mostly stay-at-home mom, Dr. Knox grew up in Bartlesville, Okla., where church and school and scouting filled her early years. And instead of being a doctor, she thought most of being an artist or painter or maybe a musician.

College drew her to Dallas and Southern Methodist University, where she was a chemistry major pursuing a pre-med curriculum.

"I was pretty much interested in being a doctor from my freshman year of college," Dr. Knox said. From SMU she went to the University of Texas Medical Branch School of Medicine in Galveston.

"I'm trained as a general surgeon," she said. "I had five years of surgical training and I was finishing up. But I knew as a woman in surgery, I'd be seeing a lot of women with breast problems, so I thought it would be smart to do a program in that."

She'd been working in Kansas City, Mo., but her decision to get specialized training brought her back to Dallas.

"Dr. Harold Cheek, in Dallas, he's the granddaddy of all the breast surgeons in that he saw the need and developed a program," Dr. Knox said. "I came and spent a year really studying with him.

"My intention as I entered that year was to go back to Kansas City and do general surgery with a breast emphasis. But I decided that year to stay at Baylor and do breast work exclusively."

She quickly found pressing needs in the community that no one had addressed.

"There are a lot of medical resources in Dallas, but nevertheless, I began to see that there were a number of women who had been diagnosed with something abnormal on a mammogram, or with breast cancer, and they didn't have insurance.

"They might be working, but they didn't fit into any category where they could easily access help. So at that point, I decided to try and do something about it."

Starting a nonprofit agency to provide medical care seemed the most logical thing in the world to her, but professionals in the charitable community warned her that while people would contribute money and equipment, no one would be willing to donate actual medical services.

"There were a lot of naysayers," she said, "and the idea of helping an uninsured woman with something as expensive as breast-cancer care was overwhelming.

"The only way I was able to overcome that was to take it one step at a time. Yes, it is overwhelming and takes a big boatload of money, but the only way to get from Point A to Point B is one step at a time, and that kept me from getting overwhelmed. Turns out, finding medical help and organizational assistance was the easy part.

"I began talking with some of my breast-cancer survivor patients, because I figured if anyone understands, they would," Dr. Knox said. "One was a lawyer, another an accountant, a third a journalist. And they immediately identified with the need and offered to help."

Ms. LaTour remembers that first meeting.

"When Sally walked in to the support group meeting that night and talked about the need to help women who were uninsured, she walked in to a board of directors, in essence," Ms. LaTour said.

"We didn't know it then, of course," she said. "But we had a phenomenal amount of talent in that room, and we picked up the infrastructure side of The Bridge while Sally engaged the medical side."

Getting help

Dr. Knox began talking with her fellow physicians, and many volunteered to help.

"I think this is something the public might not understand, but physicians are always happy to be able to help," Dr. Knox said. "The problem was not in recruiting physicians. They felt the way I did: They were frustrated to have patients in their offices who needed help but had trouble with resources.

"We probably started with 20 to 30 doctors who were willing to donate services."

"There were many physicians willing to help women," Ms. LaTour said, "but until then, there was no mechanism. The Bridge gave them an umbrella organization that would oversee everything."

But even with the people in place, The Bridge faced staggering financial needs to provide the hard costs of medical care, Dr. Knox said. "If someone needs an X-ray, for example, you need a machine and someone has to pay for it."

The staff of the fledgling charity kept careful track of contributions, expenditures and services rendered, and Dr. Knox quickly realized that for each dollar donated to The Bridge, it could provide \$5 to \$10 of care.

"It was much, much more than the dollars donated, because everything else that could be donated was donated, and we used the money only for those last things that couldn't be donated," she said.

During the past 10 years, since The Bridge opened, 4,000 women have been treated for breast problems, 400 of them for breast cancer, executive director Mary Morris said.

"Sally did a fabulous job," Ms. Morris said. "She saw the problem and began doing something about it and it just all came together here."

And Dr. Knox's commitment to The Bridge was extraordinary, Ms. LaTour said.

"The first year we were doing The Bridge, J.C. Penney had a volunteer of the year award, with a \$1,000 gift, and I submitted Sally's name," Ms. LaTour said. "Money was tight, and when they gave her the check, she handed it right to Barbara Whitaker Nelson [then executive director of The Bridge] and said, 'That'll take care of [a patient's] mastectomy.'"

Beyond the bridge

With The Bridge functioning well, Dr. Knox decided to step down as medical director in 1996, which allowed her to take on several other projects.

"I still see patients they refer to me, but I don't have to do the hands-on management now," she said.

About the same time she was pulling back from The Bridge, Dr. Knox became national chairman of the Christian Medical Association's Women's Ministry, traveling with the group on medical missions and missions of ministry.

"I'd always considered my medical career to be my mission or my ministry field," she said. "But in the past five years, I've been heavily involved in trips to Russia and Belarus that were not medicine-related.

"Those had to do with training church leaders in that part of the world."

But as a doctor, she saw needs there and felt compelled to help.

Through contacts she made there, she brought a family from St. Petersburg, Russia, to Dallas in 1999 and again in 2001 so their infant son could have eye surgery for an affliction that otherwise would have left him blind.

With help from Dr. Wynne Snoots, an orthopedic surgeon, and with ophthalmologist Dr. David Stagar quickly offering his services, Dr. Knox arranged for the little boy's care. And though her more-recent trips have been training missions for ministers, her next brings her back to medicine.

"I've been asked to join a trip to Mongolia in 2003 to teach at a medical school there that is in the process of setting up a breast-cancer clinic," Dr. Knox said. "Can you imagine that?" Ms. LaTour has no trouble imagining it. Helping people who need help the most comes from the core of Dr. Knox's being, she said.

"Sally is a missionary at heart," she said. "She was going to go into missionary work and then found it with women in need."

It's so much a part of her, Ms. LaTour said, that she doubts Dr. Knox even thinks about it. That's true, Dr. Knox acknowledged.

"I don't think consciously of being a missionary," she said. "It's just become a part of who I am."

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Dr. Sally M. Knox

Date and place of birth: Nov. 23, 1954, Bartlesville, Okla.

Current job: breast surgical oncologist at Baylor University Medical Center for past 16 years

Most interesting job: My current one. It brings me in contact with a lot of wonderful colleagues and patients.

My advice to a 20-year-old would be: Pursue knowing Jesus

My last meal would be: Lola Moore's cooking - she's a nurse I work with

My worst habit is: trying to do too many things all at the same time

My best asset is: I really care about people

Behind my back people say: "Does she ever eat?"

I'm happiest when I'm: making a difference for someone else

Nobody knows: I can get lost going around the block