

Hunggung, Bhotkhola, Sankhuwasabha Outreach Comprehensive Health Service November 26-28, 2024(Mangsir II-Mangsir 13,2081) 32nd paila



INTRODUCTION

Ek Ek Paila Foundation is a non-profit organization operating with a team of dedicated volunteers to deliver free medical services to remote regions in Nepal. Thanks to the generous support from Nepalese donors, Nepali-led organizations, and the local government, the foundation's services have been partially sustainable thus far. As a non-political entity, Ek Ek Paila focuses solely on providing healthcare services where there is a genuine need, ensuring that our efforts are driven by the goal of improving healthcare access for underserved communities in Nepal.

Following the devastating April 2015 earthquake in Nepal, which resulted in the loss of over 9,000 lives, Ek Ek Paila was established as an emergency response to provide critical and direct medical assistance to various rural areas affected by the disaster. The organization comprises a dedicated team of Nepali doctors, nurses, paramedics, and community members who volunteered their time for one week each month for a year to conduct medical outreach programs across the nation.

On June 6th, 2015, Ek Ek Paila initiated its first outreach program in the Sindupalchowk district of Nepal. Since then, the organization has completed 31 Outreach Comprehensive Health Service (OCHS) programs throughout the country, in addition to conducting other local outreach initiatives in nearby areas across Nepal with over 71,943 cross consultations across 31,650 patients.



WHY BHOTKHOLA, SANKHUWASABHA?

Bhotkhola, a rural municipality in Sankhuwasabha District of Province No. 1, Nepal, is a remote and mountainous area near the Nepal-China border. According to the 2011 census, Bhotkhola had a population of 6,576 distributed across five administrative wards, covering an expansive area of 639 square kilometers.

Access to essential services in Bhotkhola is severely limited due to its rugged terrain and lack of transportation infrastructure. Villagers often rely on mules and porters to transport supplies from neighboring regions, significantly driving up the cost of goods and services. The area's isolation and logistical challenges contribute to persistent issues with food security and healthcare.

Healthcare Challenges:

Healthcare in Bhotkhola is particularly strained, with a notable lack of medical facilities and trained professionals. Residents often endure long and arduous journeys to access even basic medical care. Food insecurity and limited access to nutritious foods further exacerbate common health problems. These issues are compounded by frequent supply shortages, worsened by the closure of border points with Tibet.

Bhotkhola relies heavily on cross-border trade for essential supplies, making the region vulnerable to acute shortages during any disruptions. The lack of resources, combined with harsh environmental conditions, places immense strain on the health and well-being of the local population.

OVERVIEW OF 32ND CAMP

Ek Ek Paila conducted 3 day- outreach comprehensive medical and surgical camp at Shree Guwachhesa School, Hungung, Bhotkhola, Sankhuwasabha from November 26 to 28, 2024 free of cost. This Outreach comprehensive health service (OCHS) was organized in collaboration with Bhotkhola rural municipality. In the span of 3 days, Ek Ek Paila Foundation rendered services to 753 individuals. 2635 cross-consultations were done within different departments. The medical and surgical services provided a wide range of specialties, including Ophthalmology, ENT (Ear, Nose, and Throat), Dental, Obstetrics and Gynecology, Dermatology, General Medicine, Pediatrics, Orthopedics, General Surgery, Radiology and Pathology. Free medicines and glasses were also provided to patients.



OPHTHALMOLOGY

- Total consultations -550
- Total surgeries -40
- Cataract surgeries
- Reading Glasses were distributed Free of Cost.
- Camp was carried out in coordination with Mechi Eye Hospital.
- Refractive errors, eye dryness, and cataracts were common eye conditions among patients.
- A patient with retinal hemorrhage was referred to BPKIHS, Dharan for further treatment.





ORTHOPEDICS

- Total consultations:255
- Most of the cases were of Osteoarthritis (OA) of knee, low backpain, multiple joint pain and generalized body pain.
- Total Intraarticular and Intralesional steroid injection -55 mostly for B/L OA Knee, Tennis Elbow, Golfer's Elbow and Planter fascitis.
- The likely cause of the increased number of OA might be difficult terrain causing increased mechanical load to joints, increase rate of alcohol consumption, lack of proper nutrition, lack of education about disease.



GENERAL SURGERY

- Total consultations:-103
- Total surgical procedures-8
- Surgery-2(1-circumcision of phimosis and excision of subcutaneous lipoma on back)
- General trends of disease in this camp were gall bladder diseases- stones and polyps.
- Other common diseases were:
- 1. Hemorrhoids
- 2. Hernia and hydrocele
- 3. Prostate related disease.

A patient was referred to higher center for venous malformation, granulomatous lesion.



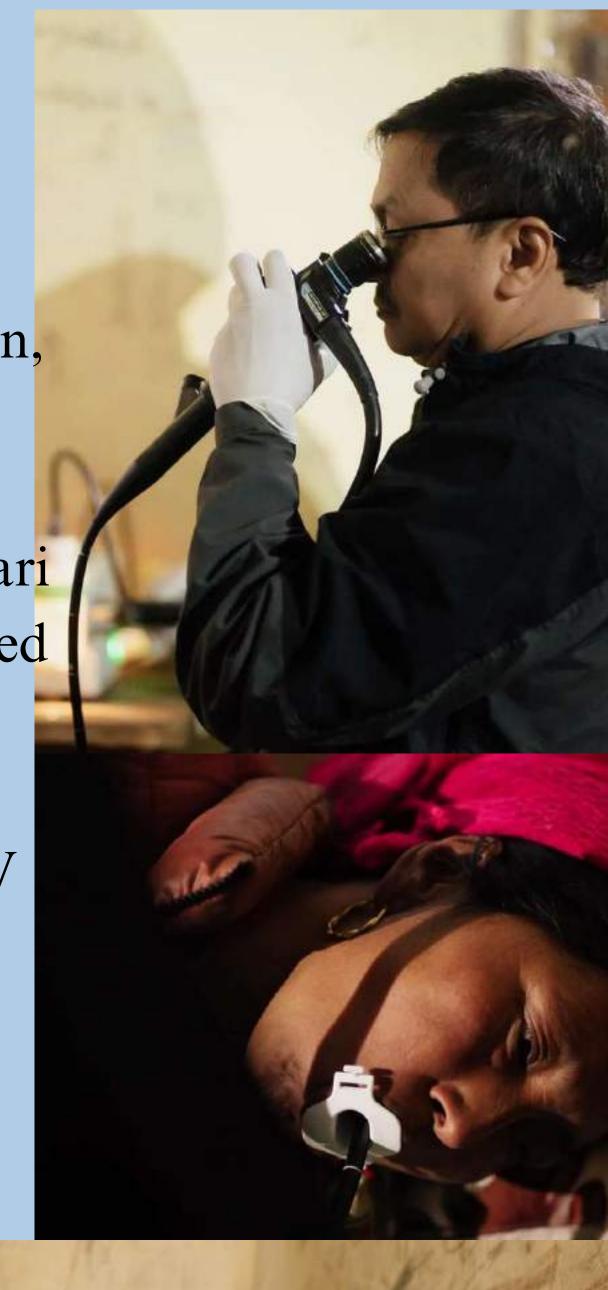
DERMATOLOGY

- Total consultations:127
- Most common diseases recognized during the camp were Acne vulgaris, PMLE, Folliculitis, Melasma, Alopecia etc.
- The majority of cases involved photo-induced diseases, such as polymorphic light eruptions, with chronic itching often resulting in lichenified lesions.
- 1 patient was referred to BPKIHS, Dharan for leprosy (pure neuritic Hansen disease).



GENERAL MEDICINE

- Total consultations:438
- Upper GI endoscopy:17
- Common endoscopy findings: hiatus hernia, gastric polyp, gastritis)
- Most common diseases were hypertension, acid peptic disease, COPD, GERD.
- 1 patient with hypertensive urgency and 1 with tuberculosis was referred to Khadbari district hospital, and 1 patient was referred to BPKIHS, Dharan for psychiatric consultation.
- 3 patients with Hepatis B and 1 with HIV were referred to higher center for further management.





DENTAL SURGERY

- Total consultations:228
- Total extractions: 97
- Total restorations:34
- 4-5 complicated extractions were performed along with 1 operculectomy.
- High caries index among children attributed to excessive consumption of junk food.
- Poor oral hygiene was noted due to lack of regular brushing.
- Severe periodontitis was noted due to inadequate oral hygiene maintenance.
- Some geriatric patients did not brush their teeth at all.
- 700 toothpastes and some toothbrushes were distributed free of cost.







PEDIATRICS

Total consultations: 86

Findings:

- 1. Acute infections (URTI, chest, skin, gastroenteritis)-16
- 2. Cardiovascular- 3 asymptomatic heart murmur
- 3. Developmental- 3 (Autism, Speech delay, ADHD)
- 4. Nutrition-3 malnourished
- 5. Gastro- 1 probable Gilbert's syndrome.
 - 3 patients were referred to higher center for cardiac consultation and 3 patients were referred to psychologist for autism, speech delay and ADHD screening.



EAR, NECK AND THROAT(E.N.T)

- Total consultations:256
- ENT surgeries: 11
 - -Myringoplasty-10
 - Excision of sebaceous cyst-1
- Most of the common diseases
 were acute otitis media,
 SNHL, presbycusis, upper
 respiratory tract infection,
 impacted wax.
- 2 patients were referred to TUTH for modified radical mastoidectomy,





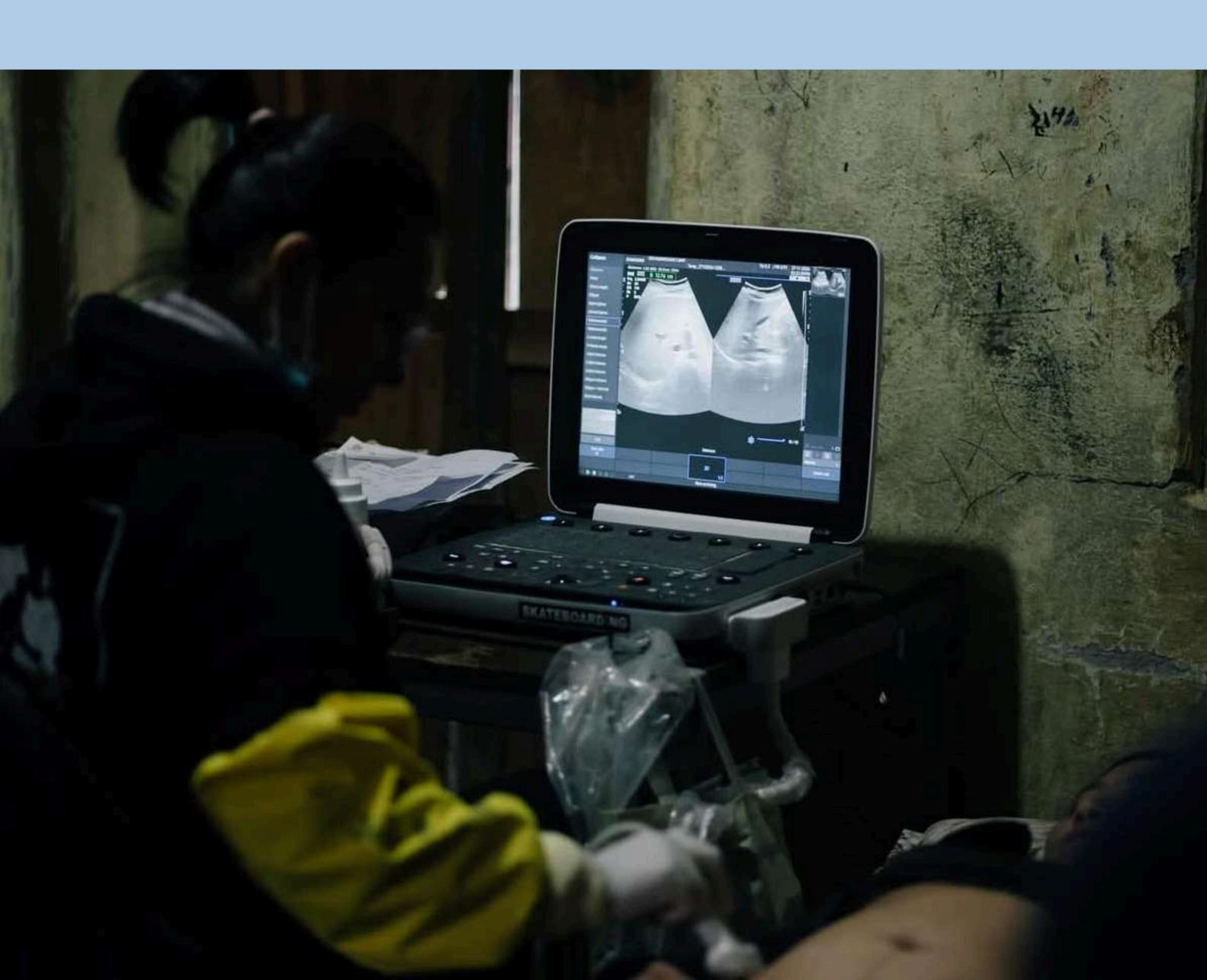
OBSTETRICS AND GYNECOLOGY

- Total consultations: 157
- Cervical biopsies were taken and sent for histopathology.
- Precancerous lesions were treated with thermocoagulation in 2 patients.
- Minor procedure/treatment are as follows:
 - Cervical polypectomy-4
 - Cervical biopsy-7
 - o Ring pessary- 1 for uterine prolapse
 - Antenatal care given-3
 - Pap smears taken-29
 - Most common findings were bacterial vaginal infection, cervicitis, uterine prolapse, urinary tract infection, abnormal uterine bleeding, etc.
 - Cancer screening, menstrual hygiene awareness, family planning counseling and STD prevention counseling were done. Cancer screening was done by VIA and pap smear.
 - 2 cases of adnexal mass were referred to Paropakar prasuti griha,
 Thapathali for further investigation and treatment.



RADIOLOGY

- 248 Ultrasound procedures were performed including ultrasound of the Abdomen, Pelvis, Obstetric scan and other body parts.
- Most common findings were Cholelithiasis, hepatic hemangioma, gallbladder polyp Lipoma, Sebaceous Cysts Uterine Fibroids, Fatty Liver Disease.



PATHOLOGY

- 198 patients had done lab work up.
- Total tests- 467
- Lab tests: CBC, blood urea, blood creatinine, blood glucose, urine routine, liver function test, urine pregnancy test, serology-hepatitis b-HBsAg, Hepatitis c-HCV, HIV.
 - HIV/HBSAG/HCV Serology- 161(HIV Positive-1, Hepatits B Positive 3)
 - LFT:3
 - RFT-2
 - ∘ RBS-55
 - CBC-15
 - Hemoglobin:18
 - Uric acid-8
 - Blood grouping-6
 - Urine routine -26
 - UPT-3
 - Alkaline phosphatase:11
 - Urea:11
 - Creatinine:19
 - Lipid profile:4
 - o SGPT:54
 - o SGOT:53
 - Biopsies: 7
 - o Pap Smear- 28



PHARMACY

- The most commonly distributed drugs were -
- Antibiotics (Ciprofloxacin, Cefixime, Amoxicillin +Clavulanic acid, Amoxicillin, Azithromycin),
- NSAIDs (paracetamol, Aceclofenac, Diclofenac, Naprosyn)
- Proton Pumb inhibitors-Pantoprazole, Omeprazole
- COPD/asthma drugs (Seroflo r/c, Asthalin inhale, Foracort r/c).
- OTC drugs and multivitamins such as zinc, calcium, vitamin d3, iron, and folic acid).
- Anti-hypertensive, Anti-Hyperglycemic and other medicines for chronic diseases were also provided.
- Liquid Handwash Sachets, Hairwash Shampoo Sachets baby hair oil, soap and baby powder were also distributed.



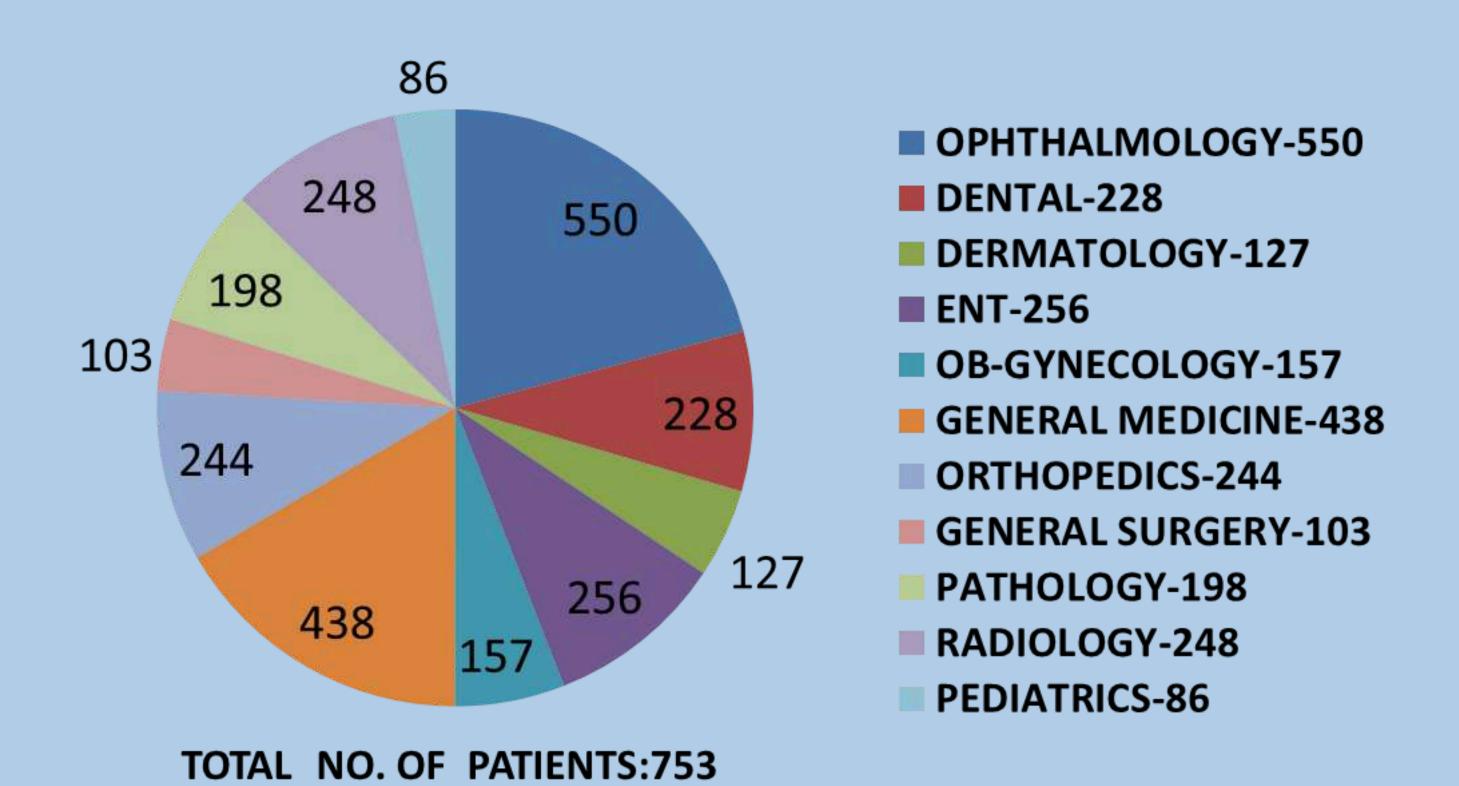
REFERRALS AND FOLLOW-UP

| S.N | DEPARTMENT | NO. OF PATIENTS | REASONS FOR REFERRAL | REFERRAL CENTER |
|-----|------------------|------------------|---|--|
| 1. | OPHTHALMOLOGY | 1 | RETINAL HEMORRHAGE | BPKIHS, DHARAN |
| 2. | GENERAL SURGERY | 1 | VENOUS MALFORMATION GRANULOMATOUS LESION | HIGHER CENTER |
| 3. | DERMATOLOGY | 1 | LEPROSY | BPKIHS, DHARAN |
| 4. | GENERAL MEDICINE | 3 1 1 1 | HEPATITIS B HIV PULMONARY TUBERCULOSIS PSYCHIATRIC DISEASE HYPERTENSIVE URGENCY | HIGHER CENTER HIGHER CENTER KHADBARI DISTRICT HOSPITAL BPKIHS, DHARAN KHADBARI DISTRICT HOSPITAL |
| 5. | PEDIATRICS | 3 | HEART MURMURS (ECHOCARDIOGRAPHY) AUTISM, SPEECH DELAY AND ADHD | CARDIAC CENTER(SHAHID GANGALAL HOSPITAL) KANTI HOSPITAL |
| 6. | ENT | 2 | SURGERY (MODIFIED RADICAL MASTOIDECTOMY) | TEACHING HOSPITAL |
| 7. | OB-GYNECOLOGY | 2 | ADNEXAL MASS/TUMOR | PRASUTI GRIHA, THAPATHALI |

- A total of twenty patients were referred to various medical centers for a range of reasons, including specialized consultations, further diagnostic investigations and treatment.
- Reports and referrals were submitted to the health in-charge for further coordination and follow-up.
- The health coordinator will coordinate and ensure seamless communication between the patients and the respective centers.
- This careful coordination aimed to guarantee timely follow-up appointments and prevent delays in the patients' care.

SUMMARY

- The health camp conducted in Sankhuwasabha marks a significant step toward improving healthcare access and addressing critical health concerns within the community. Through the collaborative efforts of healthcare professionals, Mechi Eye Hospital, and local authorities, the Outreach Comprehensive Health Service (OCHS) successfully provided essential medical services, health education, and screenings to a substantial portion of the population.
- In addition to addressing immediate healthcare needs, the camp played a vital role in raising awareness about preventive health measures and encouraging individuals to adopt proactive approaches to their wellbeing. Furthermore, it facilitated the early detection and management of health issues, potentially averting more severe complications in the future.
- The medical camp costs were successfully reduced through collaboration with local authorities.
- Patient referrals were carefully documented and coordinated by the health coordinator to ensure timely follow-up for further investigations and treatment.



CROSS CONSULTATIONS:2635

32ND PAILA MEMBERS

- 1. Dr. Suman Thapa- OPHTHALMOLOGY
- 2. Dr. Sudhamshu KC -GENERAL MEDICINE/HEPATOLOGY
- 3. Dr. Sabeena Bhattarai-DERMATOLOGY
- 4. Dr. Sabina Shah Pahari- PEDIATRICS
- 5. Dr. Prakash Dangal- GENERAL MEDICINE
- 5. Dr. Bishika Pun- RADIOLOGY
- 6. Dr. Arati Thapa- RADIOLOGY
- 7. Dr. Madhu Tumbahamphe-OB-GYNECOLOGY
- 8. Dr. Sebak Shrestha: OB-GYNECOLOGY
- 9. Dr. Kunjan Acharya- ENT
- 10. Dr. Rabindra Pradhanang- ENT
- 11. Dr. Geeta Khoju-ENT
- 12. Dr. Binita Adhikari-DENTAL
- 13. Dr. Sabin Giri-DENTAL
- 14. Dr. Arwinda R S Shrestha-ORTHOPEDICS
- 14. Dr. Bikram Basukala-GENERAL SURGERY
- 15. Dr. Sujan Vaidya-PATHOLOGY
- 16. Samjhana Khakurel- PATHOLOGY
- 17. Santi Tamang -ENT NURSE
- 18. Samjhana Pandit-ENT NURSE
- 19. Sudha Bista-GYNE NURSE
- 20. Justin shreesh-DENTAL HYGIENIST
- 21. Mahadip Shrestha-PHARMACY
- 22. Ek Dev Neupane-PHARMACY
- 23. GopalB. B.K-ENDOSCOPY ASSISTANT
- 24. Binod Man Shrestha- LOGISTICS/IT
- 25. Ashish Bhattarai-LOGISTICS
- 26. Ashok Pandey- REGISTRATION
- 27. Srijana Pandey-REGISTRATION
- 28. Keshab Mahao-REGISTRATION
- 29. Sagun Shrestha- DOCUMENTATION
- 30. Kabita Karki-OUTREACH OFFICER
- 31. Santosh Labh Karna-OPHTHALMIC ASSISTANT
- 32. Prabha Raut-OPHTHALMIC ASSISTANT
- 33. Kalpana Yadav-OPHTHALMIC ASSISTANT
- 34. Sharmila Shrestha-EYE HEALTH WORKER
- 35. Sushma Tamang-EYE HEALTH WORKER
- 36. Sujata Dhungana-EYE HEALTH WORKER
- 37. Kalpana Rai-EYE HEALTH WORKER
- 38. Manish B.K-DRIVER
- 39. Mandeep B.K-DRIVER



