

28th Health Camp, Namkha, Yalbang, Humla
5-6 Nov 23 (१९-२० कार्तिक ८०)





Introduction :

Ek Ek Paila Foundation, a non-profit organization fueled by the dedication of volunteers, tirelessly extends vital medical services to remote corners of Nepal. Graced by the benevolence of Nepalese donors, local organizations, and government support, the foundation stands as a beacon of partially sustainable healthcare initiatives. Straying from political entanglements, Ek Ek Paila remains steadfast in its commitment to addressing genuine healthcare needs, with an unwavering goal of enhancing access for marginalized communities.

In the aftermath of the devastating April 2015 earthquake, claiming over 9,000 lives, Ek Ek Paila emerged as an emergency response, delivering critical medical aid to rural areas in dire need. Anchored by a devoted team of Nepali doctors, nurses, paramedics, and community volunteers, the organization embarked on a year-long mission, dedicating one week per month to conducting impactful medical outreach programs nationwide.

Marking its inaugural outreach program on June 6th, 2015, in the Sindupalchowk district, Ek Ek Paila has since orchestrated 27 comprehensive outreach programs across Nepal. Beyond this, the organization has undertaken localized initiatives, leaving an indelible mark with 42,022 cross consultancies benefiting 18,844 patients. The saga of Ek Ek Paila epitomizes a compassionate journey, transcending boundaries to heal and uplift communities in need.





Why Namkha -Humla ?

Namkha-Humla, a jewel nestled in the expansive beauty of Humla District within the Karnali Province of Nepal, unfolds as the canvas for our 28th compassionate endeavor. Spanning a vast 2,419.64 square kilometers and home to a resilient population of 3,900 individuals, Namkha stands as the largest rural municipality in the country, adorned with six wards.

This picturesque locale, however, is not untouched by the harsh realities of healthcare challenges. The heart of Karnali province witnesses the struggle of its people as they navigate treacherous journeys lasting up to three days to access medical assistance, hindered by the rugged terrain and the absence of roads. In the midst of this, the district grapples with the stark insufficiency of human resources and essential medicines in its hospitals and health centers.

The deficiency extends to the local health posts, where the absence of vital testing facilities poses a formidable hurdle to timely and convenient healthcare provision. Despite the presence of a district hospital and primary healthcare centers, Namkha-Humla bears witness to the inadequacy in health services, with Village Development Committees lacking essential staff like Auxiliary Health Workers (AHWs), Auxiliary Nurse Midwives (ANMs), and Community Health Workers (CHWs).

Intricately woven into this healthcare landscape are cultural beliefs that often lead individuals to consult Dhamis and Jhakris before embracing allopathic treatment. This complexity underscores the challenge faced in balancing human resource shortages and traditional beliefs, impacting the accessibility and utilization of allopathic medical services.

It is in this challenging terrain, both geographically and culturally, that Ek Ek Paila has chosen Namkha as our 28th paila. Our mission is to unfurl comprehensive medical and surgical services, bridging the gap in healthcare provision and bringing solace to the resilient souls of Namkha-Humla.

Overview - 28th Paila

Ek Ek Paila orchestrated a transformative two-day medical and surgical camp, unfolding its 28th compassionate chapter at Namkha, Humla, on Karthik 19 and 20, 2080. In this brief yet impactful timeframe, the foundation's unwavering commitment reached and touched the lives of 1,475 individuals. A remarkable feat, with over 4,000 cross consultations seamlessly executed across various specialized departments.

This medical and surgical odyssey unfolded a tapestry of diverse specialties, embracing Ophthalmology, ENT (Ear, Nose, and Throat), Dental, Obstetrics and Gynecology, Dermatology, General Medicine, Pediatrics, Orthopedics, Radiology, Pathology, and more. Ek Ek Paila's spectrum of services not only addressed immediate healthcare needs but also sowed seeds for enduring well-being in the hearts of Namkha, Humla.

The resonance of compassion echoed through every department, leaving an indelible mark on the landscape of healthcare in this remote corner of Nepal.



Ophthalmology



Camp was carried out in coordination with Tilganga Eye Hospital. Refractive errors, eye dryness, and cataracts were common eye conditions among patients.

In Namkha:

Total consultations : 650

Cataract surgeries : 39

Limi Valley is 30 kms plus from Namkha, due to bad weather and lack of transport, patients could come to our health camp. Our eye team decided to reach to them.



In Limi Valley:

Total consultations : 168

Cataract surgeries : 10



Dermatology



Total No. Of Consultations : 123

The cases were usually due to high altitude and winter dryness which had led to itching in the elderly. The other cases comprised of sun related illnesses mostly polymorphic light eruption and chronic itching on the lesions leading to lichenification.

Infectious diseases were seen in the younger children comprising of both viral and bacterial infections. The young adolescents came for a check-up for lesions on the face comprising of acne vulgaris and also for fungal infections and scabies.

Intralesional corticosteroids were given to 3 patients who had keloid. Overall the skin diseases were diverse and comprised of diseases most related to altitude, prolonged sun exposure, and dryness of the skin.



Ear , Nose And Throat [E.N.T]



The total number of OPD patients : 292

There were maximum cases of Age-related sensorineural hearing loss (Presbycusis), Chronic otitis media, Allergic rhinitis, and Pharyngitis.

However, other ENT cases were also observed such as Laryngopharyngeal reflux disease, Epistaxis, Nasal polyps, foreign bodies in the ear, etc.

A total of 22 ENT procedures were carried out. they are as follows:

Tympanoplasty - 8

Foreign body ear removal - 9

Examination under a microscope and suction clearance - 3

Split ear lobule repair - 2

The dressing of tympanoplasty cases (performed on the first day) was demonstrated on the second day to the local paramedical staff.



Pediatrics



140 children up to the age of 18 years were examined over the two days.

The most common presentations were chronic headache and gastritis for which lifestyle modification and dietary advice were provided besides medications.

Three children with urological conditions were referred for surgery, Four children with primary nocturnal enuresis (bed wetting) received preliminary management advice and referred for second line medical management if condition failed to improve. One child is being brought to Kathmandu for further management of a solid growth in the arm. An ultrasound scan revealed a growth in the deltoid muscle with no evidence of bone involvement. A child with respiratory illness and borderline low saturation of 91% was also referred. Four children had Hepatitis B positive during screening.

Overall, the nutritional status of children seemed grossly appropriate with no evidence of severe deficiency states such as marasmus or kwashiorkor.

Primary immunization uptake seemed satisfactory although handheld records were unavailable.

The majority of the children attending the health camp received deworming medications.



General Medicine

Total no. of consultations:555

Endoscopy procedures:5

Most of the patients had health issues related to the gastrointestinal tract such as ascariasis, acid peptic disease, upper respiratory tract infections, uncontrolled hypertension, bronchial asthma.

36 patients tested positive for hepatitis B



Orthopedics

Total no. of consultations: 338

100 intraarticular injections were given.

Most of the patients had musculoskeletal problems such as osteoarthritis of knees, trauma, and tennis elbow.



Dentistry



Total no. of consultations: 161
65 dental extractions and 38 restorations
were done.

Oral hygiene awareness reached people through the "Danta Puran" initiative, including the distribution of toothpaste and toothbrushes to approximately 300 individuals.

Common issues observed included poor oral hygiene, extensive caries, and inadequate periodontal health.



Radiology

155 ultrasound procedures were performed including ultrasound of the abdomen and pelvis, breast, thyroid and other body parts.

most common findings were cholelithiasis, nephrolithiasis, lipoma, uterine fibroids, fatty liver disease, and ovarian cysts.

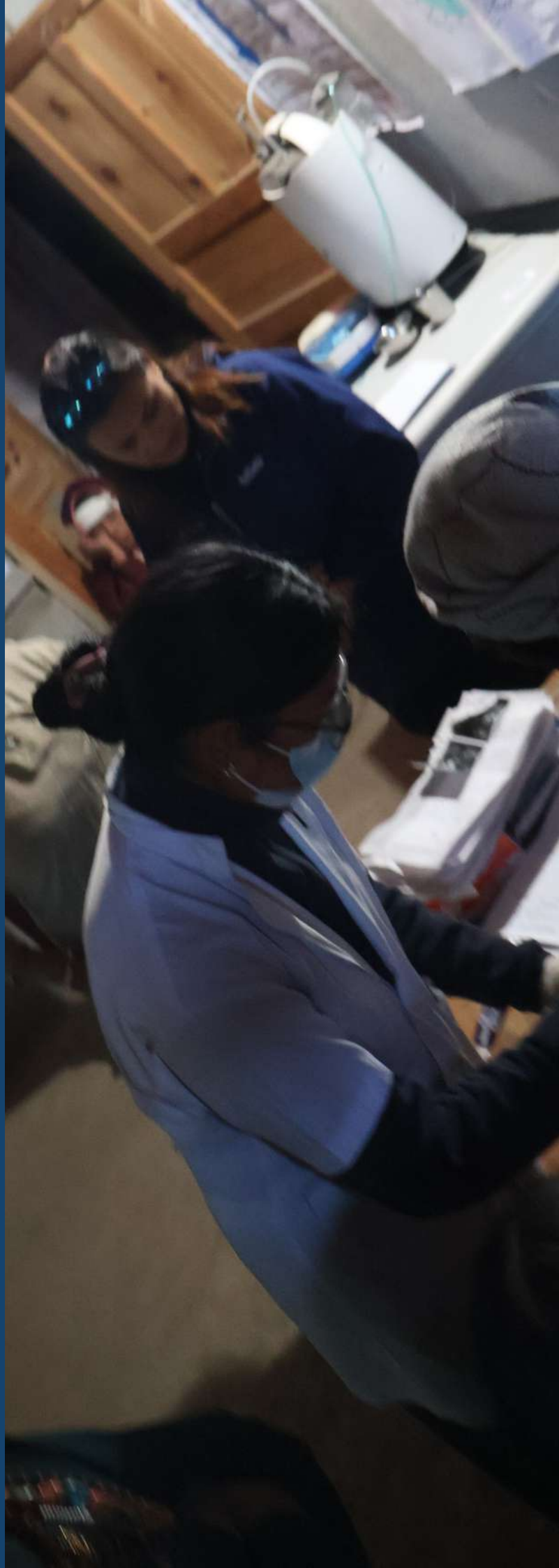


Pathology



330 patients had done lab work up.

Lab tests: CBC, blood urea, blood creatinine, blood glucose, urine routine, liver function test, FNAC, urine pregnancy test, serology-hepatitis b-HBsAg, Hepatitis c-HCV, HIV.



Obstetrics And Gynecology

Total no. of consultations : 330 | Pap smears: 70 | Thermo-coagulation procedure:3 | Cervical biopsies :3

Menstrual hygiene awareness program was carried out and free reusable sanitary pad kits were distributed. Most common findings were bacterial vaginal infection, cervicitis, fungal infection, urinary tract infection, abnormal uterine bleeding, etc. More than 70 % of women had completed their family by age 30. Depo-provera was the choice of contraceptives for the majority of women.



Pharmacy

The most commonly distributed drugs were :

Antibiotics (Ciprofloxacin, cefixime, amoxicillin+clavulanic acid, amoxicillin, azithromycin),

NSAIDs (paracetamol, aceclofenac, diclofenac, naprosyn)

proton pump inhibitors-pantoprazole, omeprazole

COPD/asthma drugs (Seroflo r/c , Asthalin inhale, Foracort r/c).

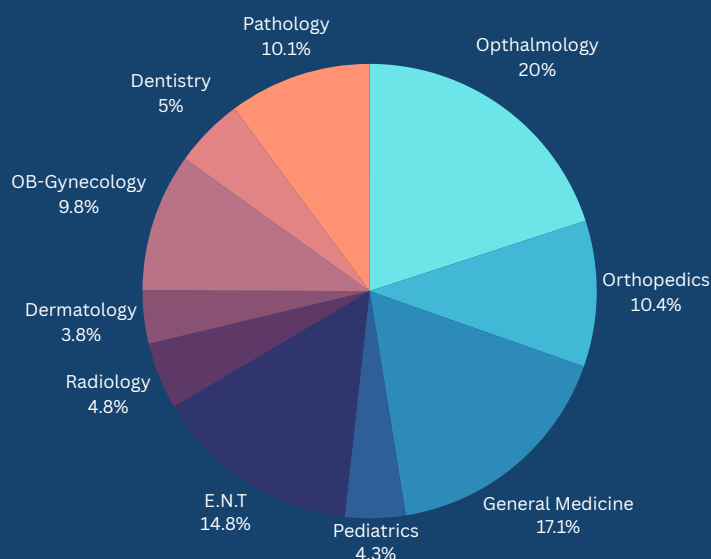
OTC drugs and multivitamins such as zinc, calcium, vitamin d3, iron, and folic acid).

antihypertensive and diabetes medicines.

deworming was done in more than 80 percent of patients with albendazole.



Summary



S.N	DEPARTMENTS	REMARKS
1.	OPHTHALMOLOGY	- Total consultations: 650 and 39 cataract surgeries in Namkha - Total consultations: 168 and 10 cataract surgeries in Limi valley
2.	GENERAL MEDICINE	- Total consultations: 555 - Endoscopy procedures: 5
3.	OBSTETRICS AND GYNECOLOGY	- Total consultations:320 - Thermo-coagulation-3 - Pap smears-70 - Cervical Biopsy-3
4.	ORTHOPEDICS	- Total consultations: 338 - Intraarticular injections:100
5.	PEDIATRICS	Total consultations: 140
6.	E.N.T	- Total consultations: 480 22 ear surgeries/procedures - Tympanoplasty - 8 - Foreign body ear removal - 9 - Examination under a microscope and suction clearance - 3 - Split ear lobule repair - 2
7.	RADIOLOGY	Total ultrasonography: 155
8.	DENTAL SURGERY	- Total consultations:161 - Dental extractions :65 - Dental restorations:38
9.	DERMATOLOGY	- Total consultations: 123 - Intra-lesional corticosteroid injections :3
10.	PATHOLOGY	330 patients had done different lab tests.

Conclusion

Medical Practices:

- The general health condition of the people in Namkha is poor.
- Many patients resort to alternate medicines for various ailments and patients took medicines by themselves without consultation.
- community still adhered to traditional beliefs, consulting Dhamis and Jhakris, and often resorting to local practices before seeking allopathic treatment
- Respiratory Conditions:
 - Chronic Obstructive Pulmonary Disease (COPD) and Bronchial asthma were prevalent, largely attributed to smoking habits.
- Hypertension was also common, possibly linked to smoking and alcohol consumption.
- People had gastrointestinal issues such as acid Peptic disease and worm infestations probably due to eating habits and lack of sanitation.
- Infectious and skin Diseases:
 - Common skin conditions included acne, scabies, viral fungal infections, and melasma, often due to high altitude and winter dryness sun damage.
- The Hepatitis B virus had a HIGH prevalence.
- Children's Health:
 - Protein-energy malnutrition was comparatively less in children.
 - Common issues among children include acid peptic diseases, upper respiratory tract infections, and skin diseases.
- Women's Health:
 - Vaginal infections, cervicitis, Urinary Tact Infections were common among women.
- Access to Healthcare:
- Due to a lack of awareness, Geographical difficulties and financial constraints, many patients with health conditions went untreated.
- Oral Health:
 - General oral hygiene status was very poor.
 - Patient had less initiative for dental treatment.
- Orthopedic diseases:
 - Arthritis and lower back pain were common among patients.

It's important to note that improving awareness, addressing financial constraints, and promoting healthier lifestyle choices could contribute to better overall health in the region. Additionally, enhancing oral hygiene practices and addressing common health issues through healthcare education may also be beneficial.

Team

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2. Dr. Kripa Dongol-ENT
3. Dr. Suman Thapa- OPHTHALMOLOGY
4. Dr. Sudhamshu KC -GENERAL MEDICINE/HEPATOLOGY
5. Dr. Sabeena Bhattarai-DERMATOLOGY
6. Dr. Shristi Shrestha- DERMATOLOGY
7. Dr. Riwarz Acharya-RADIOLOGY
8. Dr. Neil Pande- DENTAL
9. Dr. Binita Adhikari-DENTAL
10. Dr. Sabin Giri- DENTAL
11. Dr. Sapana Amatya Vaidya- ob-GYNECOLOGY
12. Dr. Richa Giri-ob-OGYNECOLOGY
13. Dr. Ganesh Parajuli- PATHOLOGY
14. Dr. Abhisek Thakur- ORTHOPEDIC
15. Dr. Sabina Shah Pahari-PEDIATRICS
16. Dr. Sajani Dongol-GENERAL MEDICINE
17. Dr. Sujan Vaidya-LOGISTICS/PATHOLOGY
18. Shakti Om Makaju-OPHTHALMOLOGY
19. Sanjeev Mahat-OPHTHALMOLOGY
20. Dinesh Rai-OPHTHALMOLOGY
21. Dolkar Ghale-PATHOLOGY-VOLUNTEER
22. Samjhana Khakurel-PATHOLOGY- LAB ASSISTANT
23. Usha Thapa-DENTAL HYGIENIST
24. Radhika B-ENT NURSE
25. Ena Prajapati-ENT NURSE
26. Suraj Dhami-PHARMACY
27. Gopal B Bika-ENDOSCOPY-ASSISTANT
28. Sekhar Chettri-IT
29. Srijana Pande-REGISTRATION
30. Ashok Pandey-REGISTRATION
31. Saishree Chettri-LOGISTICS
32. Binod man shrestha-DOCUMENTATION
33. Manahor Prasad Sharma-EEP-USA PRESIDENT
34. Smriti Bohara-NURSE
35. Sonam Dolma-NURSE
36. Madhav Aidi-PHARMACIST
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