

International Nepal Fellowship Ear Camp Report on Bajhang Ear camp in Far West Region of Nepal, April 2013

Anand Kasbekar, ear camp volunteer, ENT Registrar, Liverpool UK.

I have just had a hot shower, unpacked my backpack and switched on the kettle for a cup of tea. I had till 2 weeks ago, taken for granted running water, central heating and electricity. I have just returned from a 2 week "Ear Camp" to Nepal with the International Nepal Fellowship (INF) who are an organisation that undertakes surgical, dental, gynaecological, ear and other types of medical camps in the poorest and often remotest parts of Nepal where basic standards of living are frequently lacking.

I was part of a group of 22 made up of ENT surgeons, anaesthetists, dentists, nurses, helpers and organisers who headed out to Chainpur, a small village in the far north-western mountainous Bhajang region close to the border with India and Tibet. The population of a few thousand is spread out into little settlements all over the mountainous region and walking on narrow treacherous paths is the only means of getting to the main village of Chainpur. Chainpur itself has very recently acquired a road that allows a sturdy off road vehicle to reach it from the main town of Nepalganj which small commercial planes can fly into.

Arranging the camp

As a junior registrar 2 years ago at an ENT course I met an extraordinary consultant ENT surgeon by the name of Mr. Mike Smith and through Mike I learnt about the Nepal Ear Camps that he leads twice a year since he started it in 1993. Mike usually takes two experienced consultants and one senior ENT trainee per camp that he supervises. I had never undertaken work like this before but at the time thought it would be a good opportunity to help some of the poorest people in the world and also enhance my surgical experience. The element of adventure involved in travelling to a foreign and remote part of the world was also very exciting. I volunteered and a few months later I was chosen to attend the April 2013 camp.

INF arranges pretty much everything from flights, transfers, accommodation, food and Nepalese medical council registration and so preparation was relatively straightforward. Interested team members could add on a trekking holiday also if they wished.

Getting to the camp

Arriving into Kathmandu is an interesting experience with the melee of people, vehicles, sounds and smells that this part of the world brings. The temperature felt perfect, akin to a very warm summers day in the UK. The next day we were due to fly out to Nepalganj in the midwest of the country but the unpredictable nature of Nepal meant that due to a strike, the new medical members of the group were unable to get Nepalese medical council registration. We therefore spent an extra night in Kathmandu before flying out to Nepalganj on a small 30 seater plane to eventually join the rest of the camp members who had already set off to the camp site. The following morning in Nepalganj, at the crack of dawn we started out on the jeep ride to the remote village of Chainpur.

Two punctures, a jeep change, stunning scenery and 16 hours later; we arrived at our destination about 1000 metres above sea level.

The Ear camp

Our accommodation was in a local hotel that was very basic but did have running water and intermittent electricity. The day started with a very cold shower followed by an omelette breakfast on the rooftop under the glorious sunshine. A 10 minute walk to the nearby local hospital involved crossing the Seti river over a very long suspension bridge and navigating through the rocky terrain footpath used also by mule trains, sheep and goats. A lone doctor who singlehandedly dealt with all emergencies regardless of specialty including all emergency operations usually staffed the basic local hospital. At this time there were also two GP trainees from Kathmandu. The hospital serves a population of over 150,000. Part of this hospital was quickly turned into an operating theatre suite with 3 operating tables side by side, an ENT clinic room, an audiology room, a small dispensing pharmacy and a dental treatment room.

A crowd of patients was waiting for us every morning at 9am outside the hospital entrance, some having walked for days to get to us. The depth of poverty in the region was clear to see and the everyday hardship these people endured was painfully apparent. The INF administrators and nurses acted as translators but learning a few simple words and phrases pertinent to ear problems soon speeded up the out patient consultation! Mike having lived in Nepal for 10 years previously was fluent in Nepali and as we saw patients in one room we were able to hear each other's consultations and ask each other for advice. This was particularly important for me as a trainee and I felt appropriately supervised in the clinic and in theatre. Each operating table had an operating monitor mounted on the wall so that we could share in each other's experiences. A portable generator in the background ensured continued electricity. The simpler cases such as myringoplasties (grafting of an ear drum perforation) were assigned to me but as I soon found out, none of the cases were simple given the chronic diseased state of the ear.

Operations and out patients took place simultaneously and we moved between the two areas as needed. As operations were carried out under local anaesthetic and sedation, the turn around time was extremely quick allowing us to see roughly 560 patients in the 9 day camp and operate on 116 of them, an extremely high rate of conversion. This was probably due to the high level of ear disease prevalent in the area that had mainly gone untreated. The dentists, pulled many teeth and taught two dental paramedics. The audiologists, who provided hearing tests and hearing aids, saw several hundred patients. Patients comprised adults and many children.

Lunch was made up of samosas (potato deep fried in thick pastry) and dinner was "dal bhat" on most days. This is essentially rice and lentil curry with vegetables and the staple Nepali diet.

The days were long and demanding but as a surgical trainee being exposed to a vast amount of ear disease and operating on difficult chronic ears was something I relished and which more than made up for any fatigue. Perhaps the most rewarding experience of all was the utmost gratitude of the patients that were treated and the feeling that perhaps one aspect of their health and life would improve after attending the Ear camp.

The Nepalese

The Nepali people are very friendly, welcoming and hospitable. The rural folk were extremely grateful for the camp and the children raised in these areas showed remarkable resilience that only their tough upbringing could have shaped. Children aged as young as 7 prior to any sedation were quietly compliant with all our procedures including the insertion of cannulae and injections such that they would not even flinch. Some needed more sedation than others during the sometimes long procedures but certainly I could not imagine in the UK not having a battle on my hands when trying to insert a cannula!

The 8 day camp ended with a postoperative clinic when all operated patients were reviewed, head bandages replaced and postoperative care reiterated. The two weeks had flown by and left me with a feeling of real achievement that I had undertaken something really worthwhile. I have also made long lasting friends in the process. The experience is one that I will cherish and will definitely return to once I have completed my training. I cannot recommend this camp highly enough to those of you considering such work whether you are a doctor, nurse or dentist.

Work has already begun building an Ear hospital in Pokhara that will deliver high quality training to local Nepali doctors and also high quality care to the poor of Nepal.

INF Nepal

INF Nepal is based in Pokhara and the 2 other members of staff critical to the smooth running of the camp were Ellen Findlay and Eka Dev Devkota , camps coordinator (camps@nepal.inf.org) who will be able to provide you with information on becoming part of a future medical camp. Please email Mr. Mike Smith at mike.smith@earaidnepal.org if you would like to get involved with ear camps specifically. If you want to find out more about INF ear camps in general, please go to <http://www.inf.org/camps>.

For detailed information and many resources about the ear camp work and the planned training hospital go to www.earaidnepal.org

You can sign up for news or make contact through the site.

Ear Aid Nepal will soon be registered as an independent charity to promote the work and inform volunteers of the ear camp and ear hospital work that are undertaken by INF.

Both sites also have donation links if you wish to donate to these very worthwhile charities.



