

Green Pastures Ear Hospital Visit

In May 2019 I spent two weeks at the GPEH. This was an interesting experience, as in the past I had attended several Ear Camps situated in very rural parts of Nepal but never in a well-established hospital setting. The hospital is well designed in a traditional fashion with wards, out-patient department, operating theatre, administrative/educational department, as one might expect.

My first week included a two day visit to a very rural village, Mijure Danda, about 4 hours from Pokhara in the hills in the Madi Rural Municipality. The team included two health care workers, an audiologist, nurses and administrators to manage the OPD process. The clinic was in a village health post and included a clinic room, ear syringing facility/room and instrument cleaning/sterilising area. We saw around 350 patients and treatments included ear wax cleaning, otitis externa treatments and treatments for discharging ears and hearing loss. Many ear pathologies were seen including some congenital ear conditions. Unfortunately, the provision of hearing aids could not be achieved and patients were recommended to attend GPEH for help with this facility. The village was very hospitable and the accommodation, food and washing facilities were good....!

The second week was at GPEH, and this included helping and mentoring in the Ear clinics, which took place 9am – 5pm every day. Work in the operating theatre was confined to advising and observing the Nepali doctors/surgeons, of whom there were three.

I very much enjoyed the experience, which I felt was useful with understanding the function of the GPEH and its team of health workers. This allowed a good reflective process to generate some ideas to try to support the team for the future. For example, audit and research opportunities could be set up with support by skype and email from otologists in the UK or elsewhere. Educational programmes for the health care professionals could be supported and resources directed where needed. For example obtaining fellowships for the local doctors to obtain places on international courses/meetings. Work is required to try to find better ways of accessing the general population with hearing screening and provision of hearing aids and good ear/hearing care.

The hospital really needs support with audiological provision, in the form of staff and hearing aid devices, as well as the surgical resources required in the longer term. I would recommend, that anyone who feels that they have a skill or resource that would be useful to the Nepali setting should make contact with Mike Smith (mike.smith@earaidnepal.org).

My thanks go to Mike Smith and his Nepali team for setting up this visit for me. If you would like any further information then do contact me on dwskinner@mac.com.