



Report for Fondation Eagle: Medical and Educational Aid to Kenya - Eye & Dental mission Merti, Isiolo Province, Kenya October 1st – 8th, 2017

Donor:

Fondation Eagle, Switzerland

Donor's Reference: 00423/020

Date of Donation:

17th July 2017

Amount of Donation:

\$29,889.87

Dates of mission:

Pre-screen – September 2017

Surgical mission (eye & dental) – October 1st – 8th

Post-surgical review – November 2017



Patients awaiting cataract surgery.

The piece of Micropore tape on the forehead indicates which eye is to be operated upon

Summary of achievements - Eyes

- Total number of eye patients screened & reviewed, including school children = 2652
- Total number of cataract operations to restore sight = 195
- Other eye operations = 6 (on children, to be performed in Nairobi)
- Total number of eye operations = 201
- Medication used, including pain relief and antibiotic eye drops dispensed = 1460
- Pairs of reading glasses dispensed = 310
- Pairs of sunglasses dispensed = 200

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Registered Charity No 1093115

Summary of achievements - Dentistry

- Total number of patients screened & reviewed = 578
- Total number of extractions performed = 479



Trip Summary:

This was an extremely successful eye & dental mission with over 3000 patients reviewed and nearly 700 patients benefitting from either eye or dental surgery. There was excellent engagement from the local community & county resulting in the community embracing the project & excellent patient recruitment for the eye & dental teams to assess.

The eye & dental problems in this area appear to be mostly dental caries & cataracts. The amount of eye infections seen in children was not dissimilar to other areas we have worked. All operations were conducted in the field, apart from six children who were referred for eye surgery, which will take place in Nairobi, as they need a general anaesthetic.

The clinic area that was allocated to us was clean & spacious, able to accommodate the various specialities needs (eye & dental theatres, pre-op preparation, post op recovery, screening, equipment sterilisation etc) with suitable areas for patients to stay overnight.

The weather did however make the mission challenging: It was extremely hot with the temperature every day exceeding 100 degrees, with little relief at night. The area has been suffering from a prolonged drought & as a result the conditions were incredibly dusty, which was not only unpleasant but made it very difficult to maintain a sterile environment for eye surgery. Fortunately for us, our team our used to these conditions and performed admirably.

As always, success is a team effort & MEAK would like to thank:

- Fondation Eagle for their generous sponsorship, without whom this mission would have not gone ahead & so many local people would have continued to suffer;
- Nargis Kasmani for her wonderful & tireless work in setting up & organising this mission;
- The MEAK eye and dental team who always work in the most difficult circumstances with good humour, skill & dexterity; and
- The Isiolo County ministry of health, the drivers & the cooks from Bunduz, who as always have worked long hours & without complaint to facilitate the success of the mission

MEAK Trustee Mike Fels Mission Diary:

Day 1: Sunday, October 1st

On Sunday morning I met up with MEAK Director Dee Belliere, MEAK eye project manager Nargis Kasmani, MEAK supporters Isabel & Georgia & the internationally renowned photographer & film maker Tom Munro & Stephen Kidd respectively. Tom is going to be taking professional photographs for us and Stephen will film a documentary which we can use to promote MEAK activities. They are very generously donating their professional services for free, for which we are extremely grateful. We eagerly await the results!

The overland truck being put to use in the field



The eye and dental medical teams have set off first on the overland truck. They are carrying all our water, food supplies, tents, bedding and medical equipment for the trip.



We are not anticipating that we will be able to source supplies in the Merti area, so we need to be very organised. The team have had a very long road trip that began on Thursday morning & ended at Merti plateau late Friday evening. This included 6 hours of 'off road' driving which by all accounts was very uncomfortable in the truck!

The clinic and operating theatre set up was done at the clinic on Saturday, ready to start seeing patients first thing Sunday morning. As expected from the pre-screen, it was a busy day.

Day's total: Screened 112 eye patients, of which 10 of these were patients with cataracts for surgery, the dentist screened 16 patients.

Day 2: Monday October 2nd

As with all MEAK missions, there was a lot of activity going on from very early in the morning with many people waiting to be screened, which is fantastic. It was obvious that this mission had been very well pre-screened & the local community were very engaged which helps to make the mission a success.

The Merti area has not had any rain for over a year making it incredibly hot & dusty. Unlike Turkana, which has strong winds & gritty sand, the Merti sand is fine. The strong, hot wind makes it permeate everything. It is almost impossible to keep clean here as the sand covers everything. We are going to eat it, breathe it & basically have to learn to deal with it. The theatre team are meticulously trying to protect their theatre from dust, which is a very real problem when operating in the bush as compared to a sterile hospital theatre.

The camp area is without any trees for shade, making it very hot for staff and recovering patients. As the day progressed it became clear we would not have enough mattresses for all patients to sleep



A patient having her eyes checked for cataracts

overnight, such was the volume of patients in clinic. I did a lot of scavenging, but despite we were still 2 mattresses short. I went looking further afield and I found mattresses in the maternity delivery room. I knew that these would not be used overnight as there was no midwife working due to the nurse's strike. This strike has been going for 8 months & is showing no sign of resolution. It comes after the doctors strike last year & is crippling Kenya's medical services & putting hundreds of thousands of patients at risk. I took the 2 mattresses from the delivery bed so we can use for the night. I spare a thought for any expectant mother who comes to clinic this evening with a traumatic labour. Not only will she find no midwife, but she doesn't even have a bed.



this

Day's total: Screened 217, cataracts operated 27, Dental patients seen 104



Day 3: Tuesday, October 3rd

I made a big mistake last night. It was so hot that I left my tent flap open to try & get some breeze. & consequently, I was eaten by mosquitoes. I won't make that error again.

Dee and the others went out in the vehicles screening whilst I stayed & helped at the clinic. Busy, busy day in temperatures over 100 degrees Celsius. On her travels Dee found a small child with multiple problems. Nargis will try & get the baby seen in Nairobi to see if anything can be done to treat her. The mother is incredibly grateful, although I fear that not much will be able to be done. I also met a young man with a deformity of one of his arms that will also require treatment in Nairobi. Again, Nargis will try and facilitate this when she gets back. All part of a holistic approach.

It was obvious by quite early in the afternoon that we were going to be drastically short of accommodation for our overnight patients. The truck went on a long road trip & brought in another 30+ people. Industrious, we managed to transform 3 additional rooms into accommodation using matting that Nargis & Isabel had gone out to buy, which solved the problem.

Day's total: Screened 160, cataracts operated 34, 71 dental patients seen



Day 4: Wednesday, October 4th

After a busy couple of hours screening I joined Dee and the others in the big truck taking a group of patients back to their villages after their cataract surgery. It was long, hot, slow progress. On our return back to clinic we screened in a small village which produced another 4 patients for surgery.

We did not get back to the clinic till 7.30pm and the team were just finishing for the day. We set these patients up in the overnight accommodation area as they would now need to wait until the following day to see the medical team.

Day's total: 118 eyes screened, 40 cataracts operated, 70 dental patients

Day 5: Thursday, October 5th

Another busy morning for the first few hours, attending to post op patients & removing bandages, plus dealing with the new admissions for the day.

Whilst this was happening, a gentleman came & asked for assistance to bring his 105 year old mother to the clinic. As we were driving to collect her he said:

“(MEAK) are the first medical charity that has been to this area since independence in 1963.the work that has been done so far is like a miracle.” His effusive praise for our efforts made us all feel so very humble.

No outreach trips today but Nargis went to a local school to screen and give oral and eye health information to the students. The hospital is very full, so we stopped admitting patients around 4pm.



Children at one of the local schools awaiting having their eyes tested

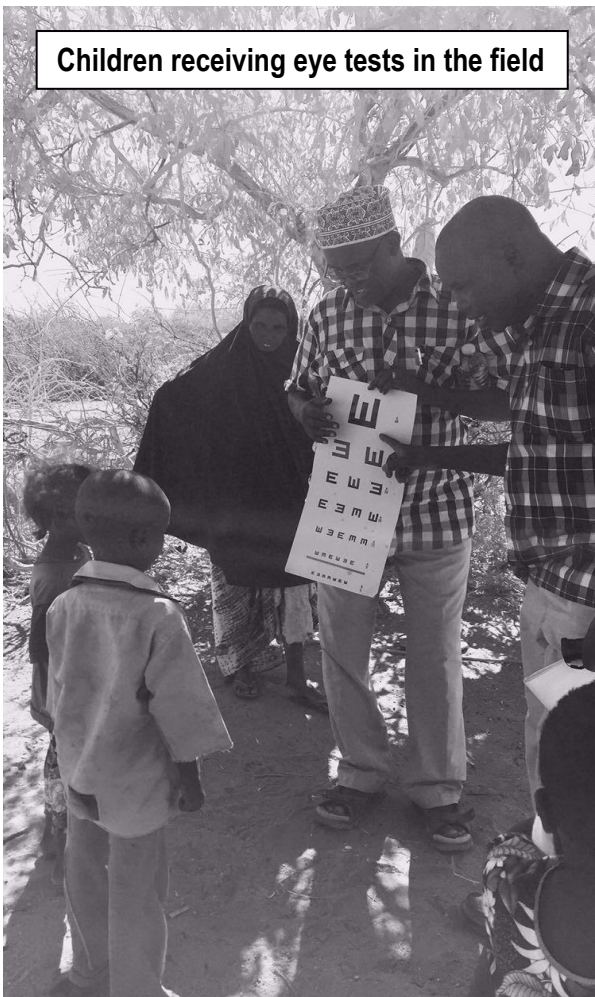


Patiently awaiting eye surgery

Day's total: 192 Eyes screened, 34 cataracts operated, 48 Dental patients



Day 6: Thursday, October 5th



Children receiving eye tests in the field

Another busy morning in the clinic. Around 30 to 40 school children came in first thing along with our regular supply of local patients. It is only midday and we have already registered nearly 200 dental and eye patients. It is going to be another busy day for the team.

I went out in the big truck with Osman to return patients to their homes and villages & then to do some screening on our way back to clinic. This is a 100km round trip, which will take the best part of 5 or 6 hours. Our furthest point out is Dadachabasa which is the last part of Isiolo county, just before you get to the county of Wagir.

I shared the front cabin of the truck with the assistant chief of Dadachabasa, a dynamic young lady named Rukia. I had a long discussion with her about protecting their environment. There is plastic waste everywhere you look. It is killing animals & ruining the land. I urged her to try & do something about the problem & raise awareness in the villages about the perils of plastic. Not an easy task I know, for any community, even ours with sophisticated recycling programs. Hopefully the plastic bag ban which was recently instigated in Kenya will start to make an impact. For now, all that can be done here is to collect the plastic and then

burn it to dispose of it, which of course has it's own environmental issues, such as toxic fumes.

Dee went out with Metu, Isabel, Tom, Stephen, Georgia & I to screen some distance away. We screened a several villages, checking eyes & dispensing medicines & eye health advice to help people avoid eye infections, for example. We found one young woman with a cataract. She has a young daughter to care for & could not come with us straight away to the clinic, but promised to come in tomorrow using a motorcycle taxi. We can only hope she does. It was a long, hot, dusty drive back to camp & we arrived back at 8pm.

Day's total: 139 eyes screened, 29 cataracts operated upon, 75 dental patients seen

Day 7: Friday, October 6th

What a nightmare! Tom has become very sick with suspected Malaria. He has been airlifted back to Nairobi with Nargis who will see him safely into hospital. This is an incredible shame although on the bright side he has already taken thousands of photographs (Addendum: Tom made a full recovery & wasn't suffering from malaria, thankfully)

Meanwhile, work continues with another busy morning in clinic & over 100 people waiting for registration this morning. It was a bit unruly for a while but a local contingent helped us with queue control & interpreting to smooth the process & by 2pm we had registered & screened everybody.



I had the same environment talk to another local chief. He says he will work with Rukia, which is great. Probably the hottest day so far, around 110 degrees!

Day's total: 94 eyes screened, 18 cataracts operated upon, 53 dental patients seen



Checking for cataracts



Eye surgery in theatre

Day 8: Saturday, October 7th

A busy day for me without Nargis as I assumed her responsibilities of organising the team, the patients and distributing the staff gratuities as the mission was drawing to a close. The clinic was still busy with last minute registrations which resulted in 3 cataract operations being performed.

Day's total: 84 eyes screened, 3 cataracts operated upon, 27 dental patients seen



Day 9: Sunday, October 8th

The team went to do the last 3 posts op checks, which is quite an involved process:

- The eye bandages are removed & the eyes washed with saline solution
- The vision checked (tears usually from us & the patient when they realise they can see again)
- Distribute sunglasses for the patients to wear to protect their eyes & eye drops dispensed for use in the immediate post-operative period
- Detailed discussion with the patients regarding what they can & can't do post their operation to get the optimal results
- Details of where & when the post-operative review clinic will be in about 6 weeks-time for them to attend
- Take the patients home to their villages

While this was going on we all packed up and tried to de-dust everything to get ready to leave what was a very successful mission.



Applying eye drops after surgery



On the way home after eye surgery, wearing sunglasses to protect the eyes



Trip review & learning points:

Logistically, this was a challenging location to perform a medical mission. The distances for the team to travel were long with poor roads & incessant heat and dust. There are no scheduled flights and the cost of chartering aircraft is prohibitively expensive for a large team. It is these factors which limit the number of medical teams that come into this area. In fact, we believe that we are the first eye & dentistry team to operate in the area.

Clinically, the mission was a huge success with fantastic levels of community and county engagement, resulting in good numbers of patients from the very start of the mission. On an additional positive note, we were also able to screen & give eye health advice to many school children, focussing on preventative eye & dental health, which is also very satisfying.

Dentistry again proved to be an extremely worthwhile addition to the eye mission with a very high number of extractions performed, which is an impressive result in the short time frame. This highlights how neglected oral health is outside of major city centres & reinforces how we must include dentistry on all future eye missions, where possible.

At the end of the mission the MEAK team were invited back next year by the local County, which is extremely encouraging from a medical and a continuity of care point of view. It is unlikely that we will be able to get back in 2018 as the schedule is already planned and this is such a logistically difficult area to get to, but we will try to arrange another trip for 2019 to further support the area.

Thank you:

Of course, MEAK cannot do this work alone & we give our heartfelt thanks to our eye & dental teams & to our sponsor Fondation Eagle for their generous grant which has made all of this possible.

We would also like to take this opportunity to thank all our collaborators in the field, namely:

- Isiolo County Ministry of Health
- Lions Sight First Eye Hospital in Nairobi
- Merti Sub-county Hospital
- The MEAK eye & dental teams who have worked with their usual vigour & outstanding attitude
- Nargis Kasmani, who's tireless work and organisation behind the scenes to make these trips happen often goes unnoticed.
- Mr Magne Albrigsten who provided 1000 litres of fresh water for the mission

Fondation Eagle can feel justifiably proud that they have made an immeasurable difference to a lot of people's lives & wellbeing. We look forward to further similar collaborative efforts in the future.