



Friends of Junbesi

Friends of Junbesi is an online community formed and supported by trekkers who have been guided by Ang Tshering Sherpa in Nepal. We operate with five volunteers from Auckland, Sydney, Canberra, Perth and Cornwall in the UK, raising awareness and financial assistance for Kushudebu Public Health Mission in Nepal. Contributions for inclusion in the Newsletter are always welcome. Please send them to

jennifer.dagg@ozemail.com.au

We hope you will enjoy receiving some up to date news from Junbesi. More photos and news is always available on the web page **www.kushudebu.org.np**

Separately attached with this newsletter is a descriptive flyer briefly detailing information about health conditions in Nepal and giving some of the background and origins of Kushudebu Public Health Mission Nepal (KPHMN). Recipients are welcome to print and circulate this in support of individual, company and community fund-raising efforts. The flyer is 2 sided so if printing, reproduce on the front and back of the same sheet and then fold into three panels.

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NEWS & UPDATES FROM ANG

One of the scholarship owners of Kushudebu Public Health Mission Nepal, Ms. Kamala Devi Bastola has completed her course of Proficiency Certificate in Nursing successfully on 2012. Now she has been appointed as the Nurse in the Health Camp from April 1st 2013. We, Kushudebu Public Health Mission Family would like to congrats for her achievements and also like to welcome her as a new member of our organization.



Kushudebu Public Health Mission Nepal in collaboration with Newington College Sydney, Australia had successfully completed three days project from 2nd January to 4th January 2013. The program was attended by total 19 participant including 16 students and 3 teacher on the behalf World Expeditions Australia. During the project, the participants have painted the outer wall of Medical Center

with Lime dust paint. Likewise the doors and windows were also painted with Enamel paint and the windows of the Staff Quarter are grilled with iron grills. After completing the project the participants also had trekked to Tengbuche successfully.

Visit **www.kushudebu.org.np** or email Ang direct on **Kushudebu2005@yahoo.com**



THE WILDERNESS COMMUNITY NEPAL MEDICAL CLINIC AND TREK 2013



Dr. Janice Pasioka, Daphne McLeod, Dr. Ruth Connors and Dr. Nancy Cullen

37 people from the wider Wilderness Community set out for Nepal (a mixture of doctors, a dentist, a physiotherapist, 3 nurses, a paramedic and other members) and conducted a medical clinic at the Kushudebu Public Health Mission in April 2013.

Dr Janice Fletcher compiled the following report.

Coordinated by Dr Sally Nobbs the Medical Clinic was run under the direction of Mr Hilary Regan. A team of 35 multidisciplinary volunteers provided assistance to the Health campaign and construction of infrastructure of the community health service centre.

The specialist doctors in orthopaedics, surgery, paediatrics, general practice, geriatrics, women's health and dentistry were supported by nurses, a physiotherapist, pharmacists and other volunteers who triaged the patients, measured them and made sure they reached the right place.

More than 2000 prescription items were dispensed. Many of the medications were supplied by donations.

Until the time of the closing ceremony,

more than 550 patients were seen for 700 specialist consultations. A further clinic was conducted later that day.

Overall:

- Orthopaedics saw 87 patients with problems mostly affecting the back and knees related to carrying loads and the arm. They provided some splints and bandages and anti-inflammatory treatments.
- Surgery saw approximately 50 patients, with abdominal pain and gastritis/gastro-oesophageal reflux. Minor surgical treatment was provided to 2 patients with haemorrhoids and abscesses. 2 patients were diagnosed with gallstones.
- Geriatrics/General medicine saw 72 patients - one person was since found to have thyroid deficiency
- General practice saw 160 patients with a range of conditions. Approximately 30% had upper respiratory tract infections. 15 specialist gynaecological/women's health services were provided.
- Paediatrics saw 125 patients, in 129 consultations. Although many of these children presented for routine health screening, approximately half had medical conditions requiring further assessment.
- One child presented with

dehydration secondary to acute infectious gastroenteritis requiring intravenous rehydration and intravenous antibiotic treatment. She re-presented the same day and received further intravenous treatment. She was dramatically improved at review the following day.

- 3 children were diagnosed with congenital heart disease. 2 of these need specialist cardiac assessment and are likely to need heart surgery. A further child has a probable flow murmur.
- Another child will require specialist surgery to repair a cleft palate. This has been arranged through the NGO Interplas for 6 months time with the assistance of Ang Tshering Sherpa and one of the nurses.
- One child previously treated in Kathmandu for bone cancer presented with recurrence of the cancer and chest x-ray revealed the presence of metastasis. He was seen by the orthopaedic surgeons who have written to the Ministry of Health for assistance with funding his palliative care pain medications.
- 3 children have suspected congenital hypothyroidism. Medication will be sourced to treat this condition that causes short stature, delayed or retarded development, chronic constipation with abdominal pain and fatigue.
- One child was diagnosed with cerebral palsy. Expanded newborn screening will be performed to exclude the small chance of an inborn error of metabolism as the cause of this child's problems.
- One child was diagnosed with bilateral abscess of the eyes.
- 2 children had scabies, 2 had scalp /neck dermatitis and itch related to head lice and 4 others had infective skin conditions; the overall incidence of skin conditions was less than 5% . In general, the skin of the children was in good condition, although dry skin was very common.
- A number of children reported

headaches and nose bleeds with no significant underlying conditions detected, although one child had a squint detected on cover testing.

- 4 children had gastritis.
- 10 children had URTI.
- 2 children had cough, haemoptysis, anorexia and malaise (possible TB but initial screening tests were negative). Both were treated with antibiotics.
- It was notable that no problems of chronic otitis media or malnutrition were detected.
- There was decay in many baby teeth. The children from the school and their teachers are to be commended for the very good state of the adult teeth of these children. The teeth of the children of the monastery were not in such good condition and many were referred to the dentist for treatment.
- 110 of the 125 children (87%) had blood collected for a study of their thyroid function.
- 2 children require ophthalmology review, which may be possible in Phaplu: one with a latent squint and headaches and one with poor visual acuity requiring spectacles.
- Dentistry saw 70 patients

After the medical clinic most people went on either a short trek to Numbor



or the longer trek to Goyko Lakes.

Heather Davis, Rosie Broderick, Julia Tannebring, Sue Harvey, Daphne McLeod and Sally Nobbs then visited the Bhadure School, where we gave the Bhadure School Council our yearly donation.

We also were able to meet and talk to the female students that we have given scholarships to and to find out about the female students going into Year 11 and 12 and starting university. We hope to be able to provide scholarship for the 3 students going on to university,

the 6 students starting Year 12 and the 9 students starting Year 11.

We also had a very productive discussion about starting a Boarding House in Bhadure, which will be supported predominately by our boarding community here – rural people in Australia helping rural people in Nepal.

For further information on scholarships for girls in Nepal please contact Dr. Sally Nobbs at snobs@wilderness.com.au

MEDICAL REPORT

Out Patient Services	1153	Male	696
		Female	457
Integrated Management of Childhood Illnesses	53	Safe Motherhood Services	
Male	34	1. Anc follow up: 17	
Female	19	2. Safe delivery in birthing center 2	
Top Ten Diseases		Free health services	
1. Hypertension	73	Health Camp Services	
2. Eczema /dermatitis	86	April 9, 10, 11, 12, 2013	
3. Pain abdomen	52	Total 760	
4. Fall injury	59	Eye Camp services	
5. Noninfectious diarrhoea	60	September 2012 Male = 47	
6. COPD	60	Female = 21	
7. Acute tonsillitis	118	First Aid Service	
8. APD	74	under 5 years 46	
9. Conjunctivitis	56	Adult 107	
10. Viral fever/Typhoid Fever	66	Immunization Services	
11. Other	429	B.C.G : 4	
Family Planning Services		DPT-hepB : 1st :1 , 2nd :2 , 3rd 5	
1. Condoms	1100 units	OPV : 1st :1 , 2nd :2 , 3rd 4	
2. Pills	22 Females	Measles: 9 to 11 months 4	
	new users: 11 Females		
3. Depo-Provera	37 Females		
	new users: 21 Females		



WILDERNESS COMMUNITY NEPAL TREK AND MEDICAL CLINIC 2014 OPEN TO THE WHOLE WILDERNESS COMMUNITY

There will be a Wilderness Community Nepal Trek and Medical Clinic in 2014. It is open to the wider Wilderness Community, with current students needing to be accompanied by a parent or guardian. As a result of the very successful Medical Clinic this year, we are looking for any medical professionals, and if possible a dermatologist, paediatrician, eye surgeon and an anaesthetist.

It will involve the following:

- A night in Singapore
- 2 nights in Kathmandu, with the medical professionals being involved in a meeting at the Nepal Medical Council
- 6 day medical clinic at the Kushudebu Public Health Mission, Junbesi, with some time at Phaplu Hospital (assuming anaesthesia is available)

People will then be able to choose one or some of the following:

- Return back to Kathmandu and Australia
- Do the 'High Road to Tibet' – return to Kathmandu then fly to Lhasa, the capital of Tibet, spend 3 days in Lhasa, drive to Everest Base Camp (no walking at all – about 5 days), drive back to Lhasa (2 days) and then take the train to Beijing (2 – 3 day train trip from Lhasa to Beijing), flight from Beijing
- Do Everest Base Camp (about 19 days trekking, to 5300m)
- Do the shorter Numbur trek (numbers permitting – about 9 days)
- Visit Bhadure School in the Annapurna region

Please contact Dr Sally Nobbs for further information – snobbs@wilderness.com.au

THANK YOU FROM ANG

I would like to thank all the crew, porters, cook and sirdar sherpa for their help and support to make this trek successful.

Likewise I would also like to thank the entire group members for visiting this area and supporting for the medical center.

Many thanks to the program organizer, Wilderness School principal Jane Davers, Doctor Sally Nobbs and Hillary Regan.

Great thanks to the staff of Kushudebu Public Health Mission Nepal, Media partners, local committees, all the government staff and local villagers.

I would also like to thank Kantipur Daily newspaper, Solu News, Himal F.M. and Avenues T.V. for providing media coverage of different activities organized by Kushudebu.

Last but not the least I would also like to thank Mr. Geoffrey Rischbieth for providing auto clave and generator for the medical center and Teresa Bridseye and Sue Tyson financing the fund for a Baby Warmer. Kushudebu Public Health Mission Nepal will be always grateful for their help, support and suggestion.



CONTRIBUTIONS TO THE HEALTH CAMP

Our thanks go to those who donated in December toward repair of the X-ray machine and for the new security-grills for the staff quarters at the Health Centre. We had a very generous response. An X-ray technician was flown in from Kathmandu for several days to repair and maintain the machine which we are glad to say has received maximum use since. The security grills were made to measure in Kathmandu and duly fitted to the staff quarters by local carpenters. Hopefully they will prevent further break-ins.

The lap-top damaged on the same thunder-storm as the X-ray machine has been replaced by an anonymous corporate donor and delivered to KTM by a prospective trekker. This very acceptable donation was organised by 'Friend' Michael Turcin and his contact Simon Abeshouse and greeted with enthusiasm by Ang and the staff at the Health Centre. A copy of the beautiful photographic book, 'Wilderness Nepal' published by the Adelaide Wilderness School has been presented to the donor by way of thanks from 'Friends of Junbesi'.

Details of the very successful Health Camp in April are mentioned elsewhere in this newsletter. Sally Nobbs and the Adelaide Wilderness School have generously offered to carry the substantial cost of the Camp and at this point another is planned for April 2014, depending on funding between now and then. Donations to this end would be gratefully received, both as 'one off' payments or by regular direct credits to the 'Friends' bank accounts in Australia, New Zealand or U.K. listed in this newsletter.

The Junbesi Health Centre and KPHMN are not supported financially by the Nepal Government or major international NGOs and are therefore dependent almost entirely on individual donations contributed by 'Friends of Junbesi'. Our thanks also go to all those who contribute regularly by Automatic Payment to KPHMN and to New Zealand retailers who have supported KPHMN by purchase of Nepalese sourced products from Craft Nepal New Zealand. Profits from Craft Nepal amounting to approx. US\$6000 per annum are remitted direct to KPHMN.

NATIONAL ACCOUNTS FOR DONATIONS

AUSTRALIA

Commonwealth Bank Australia, Potts Point NSW, Sydney, Australia
– Kushudebu Public Health Mission Nepal

BSB: 062014

Account: 10402716

NEW ZEALAND

Westpac, St. Heliers, Auckland, New Zealand
– Kushudebu Public Health Mission Nepal

Account: 03 02630223978 00

UNITED KINGDOM

Nationwide Building Society, 4 Pydar St., Truro, Cornwall, UK
– Kushudebu Public Health Mission Nepal Treasurers Trust

Sort code: 07 00 93

Bank account: 33 33 33 34

Acc. No.: 0402/704 138 407

CONTACTS

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**For detailed information about the Kushudebu project at Junbesi please access the KPHMN website:
www.kushudebu.org.np**