

Medical camps and their usefulness

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Nepal is a small country with a population of just above 20 million. It is a landlocked country bordered by China in the north and India in the South east & west. The east west distance is 500 miles and the distance between the north and south is about 50 miles only. It is physically divided into 3 horizontal regions namely Himalayan with a population density of 33/sq km, Sub-Himalayan with a density of 167 sq km, and Terai with a population density of 330 sq km. Different ethnic groups like Rai, Limbu, Sherpa, Gurung, Magar, Teli, Brahmin and Kshatriya have been living together in harmony for many years¹.

Along with this ethnic diversity Nepal also has diversity of disease² in different regions. However diseases like diarrhoea, malnutrition and anaemia due to hookworm infestation are prevalent throughout the country. Diseases like malaria, kala-zar and encephalitis occur mainly in the terai region where tropical climate prevails whereas chronic bronchitis and chronic cor-pulmonale are the health problem of the hills. The prevalence of diseases also depends upon the religious belief and standard of living of the people. Certain section of the population consumes pork and suffers from cysticercosis. Though infectious and communicable disease is most common in Nepal, non communicable diseases like liver disease, renal disease, chronic bronchitis, diabetes, hypertension, cancer and coronary artery disease are also on the rise. They are in need of early diagnosis and therapy to avoid long term morbidity and mortality. Properly organized Health camps can be helpful for this purpose^{3,4}.

Besides various medical conditions, people in Nepal also suffer from gynaecological, ophthalmological, dermatological, ENT, psychiatric and surgical problems. Surgical problems like piles, gallstones, hernias, hydrocoeles and tumours can be diagnosed and treated. Similarly eye diseases like cataract and gynaecological conditions like prolapse of uterus, fibroids and fistula can be cured by surgical procedures that can be carried out in mobile surgical camps. Even ear surgeries are being conducted by various mobile surgical camps^{5,6}.

Most of the non-communicable medical conditions mentioned above need regular follow up and life long

treatment. The doses of the medicines have to be adjusted from time to time and therefore frequent medical advice is needed. One time medical consultation does not help this group of patients except for early diagnosis and initiation of therapy. On the other hand infectious diseases can be diagnosed and cured with a course of medicine.

Medical camps in various specialities on a regular basis are very popular in the developing countries. In the developed countries, most of the people live in the urban areas and the sick population has no problem in attending city hospitals. Thus medical camps are very rarely conducted there. In the developing and under developed countries like ours majority of the population live in the rural areas. The annual income of our population is only 180 US dollars and because of the difficult terrains and lack of proper transport, sick population cannot visit health institutions for their medical treatment. Only 20 % of our rural population have access to safe drinking water and health care⁷. Until the development of nation wide health service in the remote and rural areas, the medical camps or outreach clinics will have great importance. Many NGOs and INGos^{8,9} are conducting health camps in Nepal. Similarly city based hospitals and medical colleges are also conducting infrequent health camps on individual basis. However well planned and organized health camps covering the whole of Nepal and its needy population appear lacking.

The medical camp conducted once in a while is useful in providing services in surgery or treating an infection, which can be cured by a course of treatment. A person suffering from anaemia due to hookworm infestation can be cured with a course of treatment

The chronic non-communicable disease like hypertension, diabetes mellitus, chronic airway obstruction and many others require regular follow up. These diseases can be diagnosed in the medical camp but cannot be cured by a simple course of medicine. They require regular check ups. Majority of the patients in the medical camp come under this category.

The ideal cost effective medical camp:

The outreached medical camp should be regularly conducted at a regular interval. The specialists from the medical colleges, regional and zonal hospitals should visit the same place regularly and provide medical service. There should be local medical centre with medical personnel to follow up the patients seen by the specialists. The one time visit by a medical team from a tertiary medical centre is not going to provide effective and useful health delivery to the needy population. The specialists from the tertiary health institutions can help in the diagnosis and initial management of the patients. Follow up management of the patients should be either by a regular visit of the medical manpower from the tertiary centre or by the local medical personnel. In this context the various medical colleges in the country can be of help. Each college can cover some zone in co-ordination with Ministry of health, non-governmental organizations and local administration. This can be more effective in giving health services to all the rural population.

Prior screening of the patients

In the medical camp usually a limited number of medical manpower is available to provide service to a large number of patients who attend the camp with the hope of getting best treatment. Quite a few patients would have travelled long distances and then attended these medical camps. If such patients are not properly diagnosed and treated, the main objective is not achieved. People are troubled without much benefit. Moreover some persons attend health camps with the sole aim of collecting common medicines for future use. Such a thing has been happening in the past. To avoid such a situation, advanced or local medical team should screen the patients long before the day of the medical camp. The screening team should consist of a medical graduate, lab technologists and para-medicals. Target population should be identified and a fixed number be registered. Height, weight, waist, hip ratio and blood pressure could be noted. Smoking of cigarette, chewing of tobacco and alcohol consumption is also recorded. A medical person should be identified for each of the above activity. The patients are advised to go through different tables for recording the activities mentioned above. Local volunteers could help in advising the patients. On the day of the medical camp, patients are examined by the doctors and advised. Simple essential medicines should be available for the patients.

Local health statistics

Prior knowledge of the prevalence of disease in the community will be very useful in planning a medical

camp on a scientific basis, specially in choosing the type of medicine required for the camp.

Investigations and treatment

Only simple investigations are possible in the camp situation. Essential and less expensive drugs should be made available locally so that the patients can buy them even after the medical camp is over and the doctors have gone back. The leaders of the society should be encouraged to make such an arrangement in the community. Unless the local leaders of the society take interest, medical camps will not be able to achieve its objective.

Prevention of diseases and promotion health

During the course of the health camp, simple health education should be provided to the people. Treatment of sore throat in time can prevent rheumatic heart disease. Change in life style will prevent coronary artery disease, hypertension and diabetes mellitus. Advice about consumption of tobacco and excess alcohol will reduce the incidence of many diseases. Patients and their relatives attending the medical camp should be encouraged to live a healthy life and promote their health. Medical camps should be encouraged to provide health education to the people attending the camp.

Conclusion

Health camps carried out with prior planning and in a very organized manner with collaboration between governmental and non-governmental organization including medical colleges can be more effective and useful for the needy rural population of our country.

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