

Nepal
Helping Hands Health Education
April 5-May 18, 2001

I chose to seek a fourth year medical school elective in Nepal for two reasons. I was interested in a foreign medical experience, and I sought the mountainous adventure that Nepal offers. I found information about Helping Hands Health Education in the international medicine office. Three prior students had traveled to Nepal during their fourth years, all facilitated by Helping Hands. They all had positive feedback about their trip and about HH in particular. Since I had never traveled to a third world country, I was looking for an organization like HH to arrange everything and ensure a quality medical experience worthy of my time and worthy of credit by CWRU School of Medicine. Their price for the trip was also reasonable. I paid \$2750 for the complete trip, which included almost everything except some spending money, and any meals I ate at restaurants. Volunteers can visit for up to three months at this same price, but I visited for six weeks. I feel any time less than one month is too short. They provided plane tickets between Los Angeles and Kathmandu on Thai Airlines (which had excellent in-cabin service), transportation to and from the airports overseas, hotel for layover in Bangkok both ways, hotel in Kathmandu for two days, residence in Kathmandu while in the city, a cook who made three meals per day at the residence, a two week trek in the Annapurna mountain range, and a seven day health camp. I spent extra money on cabs around Kathmandu, restaurants, souvenirs, and tips (<\$15) for health camp cooks and the trekking guide, and airport fees. I had to purchase my own plane ticket from Ohio to LA. I flew out of Columbus because it was significantly cheaper. Other volunteers made special arrangements, such as buying their own plane tickets and paying HH a reduced rate for the remainder of their services. This strategy may reduce the total cost.

In Kathmandu, I worked at HH's permanent clinic in Chabahil, a Kathmandu suburb. My responsibilities were similar to those in a typical rotation in the US. I saw patients with the aid of an interpreter in my own exam room, and I usually presented them to a Nepali doctor in one of the next rooms. The clinic has x-ray, some basic labs, EKG, and a pharmacy. Many of the problems we saw were typically seen in the US, such as GERD, URIs, UTIs, pneumonia, asthma, headache, dizziness, visual problems, and nonspecific abdominal pain. We referred patients to the hospital or specialist when it was appropriate, but frequently, patients were unable to afford such service. We saw some problems that were uncommon in the US, such as uterine prolapse, TB of the rib, measles, hepatitis A, scabies, and many rashes that I couldn't identify. In Kathmandu, many patients had rashes. If you decide to take this elective, bring a good dermatology text that can help you diagnose and treat a rash that you see. I expected the clinic to have a dermatology text in their library by now, but they didn't. I don't expect they will have one any time soon, so bring your own.

For seven days, a group of US and Nepali volunteers went to a rural health camp designed to offer villagers access to health care. Due to various reasons, our camp was changed at the last minute to a village close to Kathmandu, Indrayni, which already had a HH doctor during the mornings. We camped in tents, and we had wonderful Sherpa cooks to provide meals and offer laundry services. The friendships and hospitality that we experienced at the village were amazing and extremely rewarding. I think the US volunteers grew closest to the Nepali kids that served as our translators while seeing patients. The kids and volunteers had such a large impact on each other that it was very sad to leave after just one week of service in this area. On the other hand, I did not find the medicine in this camp particularly interesting or rewarding. We were unable to get adequate histories to make a confident diagnosis. I thought the patients were unable to give good histories because they were unaccustomed to giving a thorough history to a Western doctor, and I think the interpreters could not accurately understand the questions we asked of the patients. One other factor contributed to the difficult medicine we practiced at this particular camp. Because these villagers did have access to medical care, our camp was probably different than most of the other HH camps. I don't feel the patients had problems for which they would normally seek a doctor. If they did, they would have done it before we came since they had reasonable healthcare access. It was common for a patient to complain of 20 years of headache or 15 years of abdominal pain, which I found hard to believe. We found it difficult to identify any pathology or etiology associated with these complaints, which was very different from stories in other health camps and our own experience in the Kathmandu clinic. I thought the patients simply were interested in "visiting" a Western doctor (us), and they presented with whatever minor complaint they could think or dream up. This was easy for the patients to do because the

clinic was very cheap, even for Nepalis, and it included their medicines. I suspect that some of the patients may have just wanted medicines to sell on the street, but I cannot be sure. Most of these patients were not sick. Again, this did not seem the case with the other health camps, and the camp was still a fantastic experience after I learned to deal with this frustration. This camp was probably the best experience I had learning the Nepali culture.

HH has many volunteers, mostly from the US, coming and going throughout the year. The volunteers do many activities together. I often paired up with another medical student when we saw patients. We ate together and went sightseeing. Everyone stays at the volunteers' residence while in Kathmandu, except for the first two nights that I stayed in Hotel Harati. HH provides these first two days so volunteers can explore the city and stay smack dab in the middle before moving to the residence and working in the clinic.

The experience also includes a trek in the Annapurna range. The typical trek is 12-14 days in the Annapurna Sanctuary to Annapurna Base Camp. My group of three volunteers opted for the Annapurna Circuit trek, which has more mountain scenery, travels to higher elevation, and is more strenuous. We had to pay an extra \$60 for a plane ticket in order to expedite this trek, but it can be done in about 15 days without flying if you have the time. I had to catch a flight back to the US. The trek was one of my favorite parts of the trip and gave me a chance to spend time in the Himalayan Mountains.

HH is very flexible and usually able to accommodate any schedule or request. They can give you time off whenever you need it. They are able to change your itinerary in Nepal easily if you give them a few days or even hours notice. Some people choose to take extra time to vacation in Thailand. Others were interested in rounding at the hospital in Nepal. This elective is as rigorous or as relaxed as you make it. You will get out of the elective what you put into it.

Interpreters are usually provided for the volunteers while seeing patients, but they are not always very good. They are almost never trained in a health care field. They are usually people who know some English and Nepali and are available. This limitation can make the experience frustrating if you are not prepared to accept it. The interpreters are good enough to get by, but I found it difficult to obtain an accurate and detailed history that led me to a specific diagnosis. Frequently, I had to treat for my top two or three diagnoses. Although it is not necessary, I found it helpful to learn some Nepali while I was there. A small Nepali language book and the medical phrases that are provided in the HH folder is a good place to begin. Spoken Nepali is an easy language to learn for those who are experienced in any foreign language.

Overall, the Nepali people are extremely friendly, generous, hospitable, and eager to have Americans in their country. HH is a stable and responsible organization, and I recommend them to any volunteer. They facilitated a satisfying and rewarding elective. I'm not going to delve into details, but I offer one caution. If you seem too carefree with your money, I think the HH people (specifically Twice Trekking travel agent in Nepal) may try to take advantage of you. I had very few problems, and I'm only talking about perhaps an extra \$10 US. I would use HH again myself and I hesitate to mention the caution. I just want any future volunteers to hold HH responsible for their service, and I want every volunteer to get exactly what they pay for. This trip was an excellent compliment to the rest of my fourth year.

I would be happy to answer any questions in the future that students may have about a trip to Nepal. I am doing a residency at MetroHealth Medical Center, so I am closeby to students at CWRU. I can be contacted at:

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