Editor's note:

We've had many ad-hoc articles over the years from our readers describing their experiences overseas be they as part of a medical outreach mission or as a fellowship/HMDP programme. From this month on, we've decided to dedicate a new regular column – "**Docs Across Borders**" – in the SMA News to such overseas ventures by our doctors, as they give our readers both an interesting read and another dimension in the practice of medicine across our shores.

So if you are a doctor who has recently participated in medical mission work or undergone fellowship/HMDP across our borders, we'd love to hear about it. Please email us with your article at news@sma.org.sg. Also, if you are an overseas doctor or fellow working with us in Singapore, we'd love to hear of your experiences in Singapore and how it compares to that back at home! So write in!

The "Bat" Mobile Clinic - Sri Lanka Medical Outreach Programme

by Dr Jayant Iyer, Editorial Board Member

"To help make the world a better place." "Because it's a noble profession."

"Everyday we're bombarded with images from So*&^%\$ or some famine-stricken part of the world. I just want to stop sitting there and do something about it."

"... I just know ... (time for that sincere look...) that's what I want to be... (turn to look them in the eye now) a doctor!"

Many a potential medical student would be internalising mutated versions of these lines as they prepare for the daunting (and most opaque) medical school admissions interview. Some would actually go on to proclaim varied versions of these noble urges as the jaded interviewer listens warily on.

And many students subsequently end up getting rejected, temporarily dejected, and land up with arguably swankier, cushier jobs than their slogging medical peers ten years down the road... Argh...

But hang on a bit... That's not what this article's about. (Gosh, griping can be so addictive! For your monthly dose of dedicated, professional griping, please read The Hobbit)

Many of us successful medical school applicants (whether we said it or wisely omitted from doing so) do want to perform a good deed or two beyond our call of duty. Altruism or not, good karma or not, many of us do want to feel good going out of our way using whatever skills we might have acquired as doctors to help. Just that exams, family life, social life, army and so on seem to provide the perfect excuse sometimes...

Having quite a few noble-intentioned friends around me going for their regular medical mission trips, I decided that as part of my New Year's resolution list for 2010, I should try my hand at medical mission work myself. My initial plan to participate in a Myanmarbased cataract camp thwarted due to leave/



docs across Borders

manpower issues, I was glad I still managed to actually make good on my resolution when I signed on for a YMCA-organised primary medical care mission trip to Batticaloa, Sri Lanka. It is not often that such fulfillments of my resolutions occur – my 2009 resolution to lose weight tragically served as more of a jinx, much to my wife's dismay – so this year's achievement was all the more sweeter.

YMCA Singapore had surplus funds from donations collected for the Sri Lankan tsunami victims that it wanted to put to good use in helping the now war-ravaged eastern part of the island. So in collaboration with the YMCA Batticaloa (an Eastern Sri Lankan Tamil town previously under Tamil Tiger rebel control) and another local Tamil volunteer group, it aimed to establish a mobile medical clinic that would service villages surrounding Batticaloa, Sri Lanka, with:

- a. Weekly review and follow up by a local medical team and volunteers, and
- b. Twice-a-year medical missions from Singapore to augment supplies and medical aid.

This was to be the inaugural mission trip. Given the slightly unstable political situation at the period, our trip dates were changed a few times until it was finally settled for the week of 17-24 April, one week following the first post-civil war Sri Lankan elections.

The team comprised four doctors (Sobhana, who pretty much got the team organised, Angeline, Ian and I), four eager medical students (Chong Keat, Yii Ean, Theresa, Peixuan), four dedicated Red Cross volunteers (Esther, Eddie, Connie, Melissa) and two able YMCA administrators (Andrew and James). In addition to our mission to provide basic medical care, we added on an optometric care component for our patients.

Preparation in the weeks leading up to the trip included getting basic Tamil lessons going (even though much of the Tamil my wife, Vidhya, and I tried teaching the team had to be tweaked, i.e. Sri Lankanised subsequently), sorting out medical supply orders, packing and categorising donated pairs of spectacles, and even preparing Tamil public health education posters – courtesy of the medical students.

We finally left for Sri Lanka on 17 April. The initial scare we had when I was a tad late to check in for the overbooked Sri Lanka-bound flight was quickly addressed when the Cathay Airlines officer apologised and offered me a business class seat instead. I grudgingly accepted this compensation (punctuality doesn't pay, though it did take me a while to win back some friends!).

We landed in Katunayake, the airport town off Colombo. Our first day was spent travelling across the island (from West to East) in a van, which gave us a good feel of the island. Lush green landscape, neatlypaved roads, the large serene Buddha statues peering from peaks of hills or mountains and clear blue skies made the island seem like a tropical paradise - something many of us did not expect from a country that had just emerged out of a civil war. Along the way, we stopped by a 4th century World Heritage site at Sigiriya (a castle structure built atop a massive rock formation that some in our team had challenges scaling... don't worry Ian, the rest of us had difficulty trekking up too, even if we had you believe otherwise!) and did a short elephant safari as well. After putting up at Polonnaruwa, the medieval capital of Sri Lanka, for the night, we moved on towards Batticaloa. It was interesting to note that as we travelled towards the eastern Tamil areas of the country, smooth roads gave way to bumpier ones, Buddhist stupas gave way to mosques and subsequently temple and church structures reflecting the zones each ethnic group - Sinhala, Muslim and Tamil - lived in.

We were warmly welcomed by the staff at YMCA Batticaloa. With Esther (Red Cross volunteer and ex-nurse who practically played the crucial role of the ward "sister" in our trip) at the helm, we quickly settled in and got down to business – packaging medication syrups, organising surgical supplies and so on. We learnt that the government permitted us to set up mobile medical clinics in three villages over the following three days and apportioned our supplies accordingly.

The mobile clinics were set up in village school premises. Each clinic included a "Triage/Registration" station, a "Doctors' Review" station, an "Eye and Refraction" station for glasses dispensing and a "Pharmacy" station. The children were then sent to a "Health Education" station where the volunteer medical students gave basic public health and hygiene talks with the help of Sri Lankan Tamil translators.

We saw 850 patients over the course of the three days. Most of the villagers looked 10-20 years older than their reported age. The commonest ailment was that of malnutrition. Multivitamins, mebendazole and vitamin B12 injections were the order of the day. A few referrals to the main Batticaloa Teaching Hospital were also made for conditions that required further management like the odd throat cancer, hyperthyroidism, intraocular tumor and cataracts, to name a few.





I was particularly happy that the optometry component of the outreach mission seemed to be quite a beneficial add-on. We dispensed about 60 presbyopic glasses and 40 myopic glasses in total. The glasses were so popular that some patients insisted on getting glasses even though they had no refractive errors – the donated pairs of shades we brought along came in handy!

Through the trip and bumpy rides to each village, we had fun bonding over bad jokes, puzzles, "truth or dare" games, frequent stops for ice creams, and even more bad jokes. What wasn't too funny however was that when we were given five rooms for accommodation, of which two were air-conditioned and three fanventilated, a retrospectively unwise chivalrous decision was made by the "boys" that they take the three non-air-conditioned rooms, leaving the spacious air-conditioned rooms at the ladies' disposal. What was not realised at the time was the rather ornamental nature of the ceiling fans that hung over our heads as we slept in our saunas. One of the ladies joked of our fans that at least the boys had soothing percussion playing in the background while we slept... Like I said, bonding over bad jokes...

Even though just out of a war, our counterparts at Batticaloa were very warm, pleasant and friendly. The YMCA Batticaloa officers-in-charge, David, Charles and other volunteers like Mr Nalasivam, went to great lengths to ensure that the Singapore contingent felt at home. From taking some of us to sightsee ancient Hindu temple sites in the wee hours of the morning to making sure that everyone got a taste of the famous Sri Lankan crab (while also getting me some vegetarian food, which was not that easy to come by, much to my dismay), they played terrific hosts. Our local counterparts, Dr Francis and Nursing Officer Stella were also great to work with, thankfully ensuring that we had enough mebendazole and multivitamins to go by (more than we'd initially planned on bringing), helping with translation and also ensuring that this project remains sustainable by continuing with the mobile clinics on a weekly basis.

Many of the villagers we served seemed to be happy enough with the knowledge that there was at least someone coming to care for them,

