



The LOVEQTRA base camp in Yushu

Leave Your Comfort Zone to Care for the Needy!

By Dr Joseph Chung

We modern doctors work in big hospitals with advanced equipment, good laboratory support, and a multidisciplinary team to back us up. We see patients in an air-conditioned clinic, and when the air-conditioner breaks down, we think our world is about to end! What if I challenge you to leave your comfort zone to care for the sick, in a place without air-conditioning or laboratory facilities? What about somewhere without other specialties, and you need to deal with everything on your own? What about a place where patients don't whine about waiting too long, but think you are never too late, because your presence means treatment for them?

I am a psychiatrist from Hong Kong and I work in a state-of-the-art hospital with modern facilities. In June this year, I left my comfort zone and went to Yushu, a county in China. I was part of a group of eight attached to a local charity organisation called LOVEQTRA (<http://www.loveqtra.org>), a non-profit, non-governmental charity organisation in Yushu County, registered with the Yushu government. It provides rescue and aid services, manages stationary and mobile medical clinics, operates a girls' home and administers other forms of assistance to the people in Yushu County and beyond!

Yushu County is a county of Yushu Tibetan

Autonomous Prefecture in the province of Qinghai in China, and 97% of the population is Tibetan. In April 2010, the prefecture was devastated after being struck by an earthquake of magnitude 7.1. Although massive government aid has poured in, more help is still needed. Today, most people in Yushu still live in tents, and the population remains in dire need of medical aid.

Yushu County has an elevation of around 3,800 m and surrounding areas like Batang have an elevation of 4,200 m. Before arriving, we needed to take acetazolamide for prophylaxis against mountain sickness. The base camp we stayed in was not the most comfortable place

you could expect. There was only enough water for us to take a bath weekly and we slept in rooms made of wooden boards. In June, when we visited the place, the temperature fell below 0°C at night. From September to March, the temperature commonly falls to as low as -30°C at night, and blankets are the only means of keeping people warm!

We worked in a mobile clinic and visited the local inhabitants in different villages. Typically we saw 10 to 20 patients each morning and sometimes we would travel to a very rural place to visit a single family. The local people were very hospitable and very thankful for any kind of help!

There are several common illnesses in that area: hypertension, osteoarthritis and rheumatoid arthritis. We postulate that this is related to their lifestyle and culture. The Tibetans love to drink tea with a lot of salt added to it, and have been doing so since they were children, and that may have contributed to the prevalence of hypertension. It is not uncommon to see elderly with systolic blood pressure of over 200 mmHg! And due to the prevalence of hypertension, ischaemic heart disease also seems to be rather widespread. Another interesting aspect of their culture is that the men do not need to work. Young women are required to go to the snowcapped mountains to collect cordyceps to support their families from May to June. For the rest of the year, they work either indoors or outdoors doing menial tasks. As a result, many elderly women suffer from osteoarthritis of the knee whereas men are relatively unaffected. Because of the prevalence of osteoarthritis and rheumatoid arthritis, pain relief is important.

There is no laboratory facility in the base camp but there is a pharmacy which stocks common medications like oral and topical analgesics, antibiotics, antihypertensives, diabetes medications, antifungal creams, and antibiotic eye drops. It also has dextrose and normal saline for fluid replacement. The mobile clinic is furnished with first aid equipment, an electrocardiogram machine and a Doppler ultrasound machine, but for more complicated cases, medical teams need to send the patients to hospitals in the city of Xining.

A case in point: we visited an elderly woman living ten miles away from the hospital in Yushu County. She lived with her son-in-law who was her only carer. She told us she suffered from hypertension and ischaemic heart disease for 20 years, and took an unknown antihypertensive sparingly. She presented with five days of poor oral intake, fatigue, and shortness of breath. On examination, she was weak and needed to lie at a 45° position for comfort. She was afebrile, had a weak pulse, but did not have oedema or lung crepitations. She asked us for medications. We told her to go to the hospital but her son-in-law said they did not have the money. What would you do? Finally, a charity sponsored her trip to the hospital, and she was found to have arrhythmia and lung shadows. Subsequently, she needed to take a long distance bus to a bigger hospital in Xining for further treatment.

At the time we went, there was only one local doctor from Hangzhou serving voluntarily in the base camp. He planned to stay for a year or more, and was the only one treating patients when there were no foreign doctors visiting. LOVEQTRA plans to train some local workers to make simple diagnoses and provide pain relief treatment. In this aspect, not only can volunteer doctors provide medical services, but also medical education as well.

The trip actually benefited me more than what I contributed to the locals. When we start pursuing a career in Medicine, most of us envision helping the sick and caring for the poor. But when we stay within our comfort zone, it may numb our senses, and we may become blind to a world full of needs. When we step out and go among those less fortunate than us, even for a period as short as a week, we will be able to see how our medical knowledge and our heart to serve can bring many blessings to others! **SMA**



Dr Joseph Chung is a psychiatrist working at Pamela Youde Nethersole Eastern Hospital in Hong Kong.



Local Tibetan children



The pharmacy in the base camp



Physical examination of an infant aged four months



Elderly folks with cataracts and osteoarthritis