



Turkana

Eye Project



CAMPAIGN REPORT

Spring 2012
(4/21 - 5/6/2012)



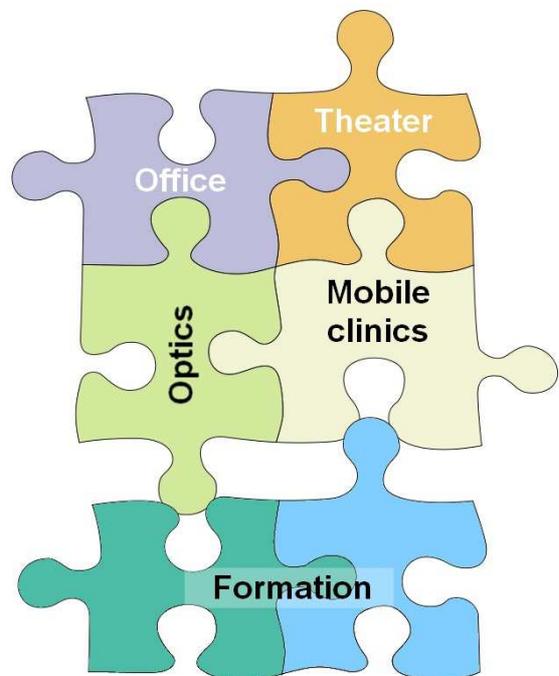
After 10 years, ophthalmological campaigns that started this project go forward. Thanks to them, we have made progress in understanding the health scenario in Turkana, and tried to fit their needs. Gradually, this has opened new fronts, ongoing throughout the year, and that current campaigns attempt to condense, refine and strengthen its development towards the ultimate goal: sustainability. In these pages, we would like to show some details of this work during the spring 2012 campaign.

April-May 2012 Campaign

Team

Unlike previous occasions, the team was composed entirely of health workers, mostly ophthalmic assistants trained and supported by the Project over previous years, coming from all over Turkana to assist in the campaign. The three ophthalmic nurses (Jonas, Alex and Moses), and clinical officers (Samson, William and Michael) participated too. Along with these professionals, there was a Spanish team comprising 14 people, consisting of 3 optometrists, 7 ophthalmologists, an anaesthetist, two nurses and a technician in electro medicine. This time the budget reduced the duration of the campaign up to two precious weeks, in which the daily work is distributed as follows:

Clinical session (all staff)		Training
Office	<ul style="list-style-type: none"> ▪ New patients ▪ Reviews medical / postsurgical ▪ Tests / laser 	
Theatre	<ul style="list-style-type: none"> ▪ 3 sites: surgeon + assistant ▪ Sterilization ▪ Circulating nurses 	
Mobile clinics	<ul style="list-style-type: none"> ▪ Consultation ▪ Patient's referral ▪ Schools <ul style="list-style-type: none"> ○ Screening ○ Talks 	
Optics	<ul style="list-style-type: none"> ▪ Refraction ▪ Training ▪ Workshop 	
Meetings (health workers, NGO's, etc)		





737 new
attended
patients



20 patients
received
YAG laser
treatment

Office

The two weeks of campaigning allowed the Eye Unit serve 737 new consultations, excluding medical and postoperative reviews. This means that about 75 new patients were recorded every day, coming from the four corners despite the lack of roads, and with an additional difficulty: the rain. Away for months, water was present during almost the entire duration of the campaign, flooding the roads, many of them dry riverbeds. However, such an influx of patients reflects the high need for eye care in this region, but also the confidence of the Turkana people in the Project.

It is worth mentioning how the donations received during the year have significantly improved the quality of the facilities of the office. Several height adjustable tables have replaced the previous wooden support, what is appreciated by the backs of staff and patients; a new optical biometer and a manual keratometer facilitate preoperative measures, and new slit lamps allow more detailed exploration.

Also, we could perform 20 capsulotomies with the Nd: YAG laser. It restores the transparency of the capsule behind the intraocular lens that is implanted in cataract surgery, which after a time becomes cloudy. Only 2 years ago, these 20 patients would have had to be reoperated in the theatre.



Rain cuts off the access to one of the Lodwar entrances



Modern, comfortable and efficient facilities in the office



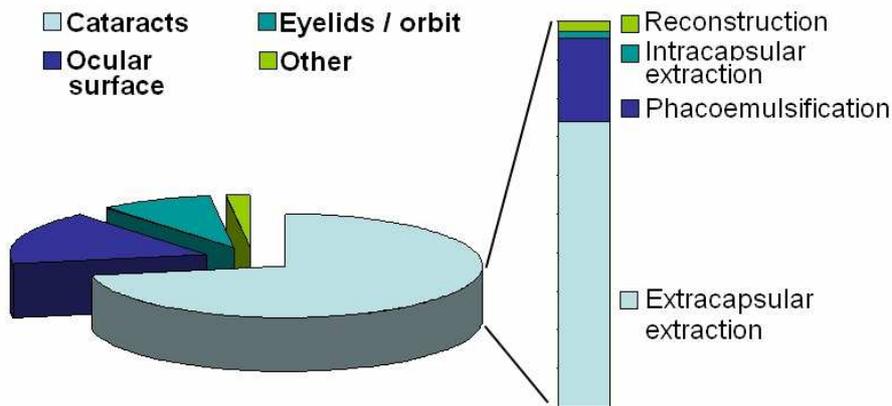
Operating room

Overcoming common pitfalls (especially electricity and water), the three operating tables worked full time. In each, an ophthalmic surgeon aided by a Kenyan assistant, along with sterilization and circulating nurses from both groups. This is how both teams share knowledge and ways of working.

161 surgeries

The main cause of treatable blindness worldwide was as usual the more frequent surgery: cataracts. Of the 161 surgeries (157 patients), over two thirds (113) were cataracts, followed by interventions over the ocular surface (pterygium, climatic keratopathy, tumours) and eyelids (trachoma, ptosis, tumours) especially. While most are performed under local anaesthesia, 9 required general anaesthesia (mainly children and perforated eyes), of which 3 had to be postponed due to lack of oxygen in the hospital.

113 cataracts





Learning objective measurement of refraction (retinoscopy)



The optometrists team with the optic current managers: Michael Samal and Moses Elimlim

Optics

Refractive errors account for the leading cause of correctable low vision. So far there was nowhere to get glasses across the Turkana region. Therefore, the main purpose of the 2012 campaign has been to train qualified staff, both in the field of optometry (refraction) and the optics (workshop). Everything with an eye on leaving an operational Optics at the Lodwar hospital. During this campaign two Kenyan health workers have learned subjective and objective refraction, as well as how to prescribe and assemble monofocal glasses.

All the required devices for refractive examination have remained installed in the office. And the workshop is equipped with everything needed for the glasses assembly (beveller, lensometer, etc), as well as enough material (glass, frames, preassembled glasses, sunglasses) so that they can set up and prescribe glasses during the next six months.

In addition to training (primary target), 266 optometric examinations have been made, and 184 glasses given, half of them for near vision. Having analysed the medical records we can highlight a large number of young presbyopes who demand near correction, and few myopic patients, but the myopia found is higher and more prevalent in young students.

The Lodwar hospital optic will operate throughout the year thanks to the newly trained staff



266 optometric examinations



Mobile clinics

444 patients
were attended
during the
outreaches

Thanks to the implementation of mobile clinics conducted by the Kenyan health workers throughout the year, in this campaign the required number of outreaches was limited to 7. Despite the difficulties caused by the rain, the vast majority of referred patients could reach the Lodwar Hospital, with the exception of patients from the north. This time, the ophthalmic assistants were part of each mobile clinic team, always accompanied at least by an ophthalmologist.

During the campaign outreaches 7 villages were visited (Lorugum, Nadoto, Lokichar, Namorouputh, Turkwell, Kalokol, Kokuselei) and 444 patients were attended, of which 45 were referred to the Lodwar Eye Unit because their need for surgery or inpatient treatment.

5 patients
were referred to
other centres

Patient referral. Five patients who came during the campaign had to be referred to other hospitals (Kikuyu, Eldoret) because they were exceedingly complex cases for the resources available in Lodwar. Three of them were children (two tumours and the other had a congenital cataract) and 2 adults. With the support of the Project they were able to access the services of better equipped referral centres.



Ophthalmic examinations in dispensaries during the mobile clinics



Meetings & Agreements

In autumn 2012 azithromycin will be distributed to 900,000 people

400 patients with trachoma will be operated

Eye Unit's pick-up truck



Trachoma meeting in Lodwar. With the purpose of eradicating trachoma in Turkana, this project has entered into a consortium with two other local NGO's, as well as the Diocese and Kenyan Government. The goal is to implement the SAFE strategy (Surgery, mass Antibiotic treatment, Facial cleanliness and Environmental improvements particularly in terms of water and latrines). Each NGO is committed to act on these factors in defined areas. Fred Hollows Foundation in the south, Sight Savers in the central and Turkana Eye Project in the north (for more information please visit <http://ojosturkana.wordpress.com/tracoma>).



New vehicle for the Eye Unit. Up till now, the car rental for the mobile clinics was an important economic burden. Henceforth the Eye unit will own a vehicle, donated by the hospital and repaired by this Project, which will serve to transport personnel, instruments and medications to remote villages in Turkana and from there, the patients who need hospital care.

Training

Technician. Henry Ekitela started his 2-year studies to acquire skills that will maintain the infrastructure, solving the technical problems of ophthalmological equipment of the eye unit.

Ophthalmic nurses. Two of our nurses wish to specialise in ophthalmology. These studies take place in Nairobi, and last one year.

Ophthalmic assistants. 2 nurses completed these 3- months studies in April, and 2 others will do so in September.



<http://fundacionemalaikat.es>



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