

SNAPSHOT 2 FROM KURON CLINIC

Text Liv Ditlefsen and Mette Waaler. Photo Mette Waaler

More than 2 weeks has gone since we arrived Kuron. Every day we experience new situations. We are overwhelmed and impressed by the way the staffs are handling the various situations. In today's snapshots we will give you some examples of some of the challenges the staff meet in this remote area.

Delivery

Last night a baby boy was delivered.

The women had walked for 4 days before she reached the clinic two days ago. She was approx 38 weeks pregnant. She came together with her co-wife. Usually women deliver at home. Her reason to come was abdominal pain and passing some blood and water. Probably this was amnion fluid. The risk of serious infection both for child and mother is very high in this situation. The woman was admitted and the co-wife had to go to the



After delivery mother and child stay in the same ward with 6 children with serious infections



Irene and Rose weighing the new born baby

nearest village to stay while waiting for the mother to deliver. After delivery mothers usually go home after 24 hours if everything is normal. Before leaving they clean their own bed sheets.

Even though there is no maternity ward in the clinic, the staff improvises. Usually deliveries take place in "procedure room". But at the moment the room has been invaded by bees, and the staff has not managed to clear this out.

So for the time being, deliveries has to be done in the consultation room and mother and child are transferred to the ward together with sick patients, many of them with serious infections. There is indeed an urgent need of a maternity ward! The clinic has two well qualified midwives

Burned baby

A two month old baby was admitted with superficial burns on approx 40 % of the body. The mother had dropped the child in the fire because she was shivering when she was listening to drums bringing evil spirits. After 3 days the baby was brought to the clinic. The wounds were infected. There is no proper place to treat the patients with burns. Again the staff made a creative solution: The wounds



Irene has made a safe corner for the baby

were first treated openly with cream and the child was lying naked under a mosquito net that was partly covered with blankets to keep the child warm. The following day the child was soaked in sterile normal saline, put on special ointment for burns and bandaged.

Obstacles with transport

Means of transport is not easy in this area. For the time being, the only transport we have in the clinic is a tractor. But the staff always tries to find a solution. We were planning a meeting in a village and since we were told to come after dark, we decided to go by the tractor starting from the clinic at 18.30. Arriving the village we were warmly welcomed by the community. We had a good meeting. The village people were informing us about their needs, and the staff explained the importance of bringing children for vaccination. The following day, we received almost 200 children and 50 women for vaccination.

For the vaccination on Saturday October 20, we also planned to go by the tractor.



Everything was packed on the tractor.....



Everything was made ready and packed on the tractor the day before. The plan was to start at 6 am, so we got up at 5. to find that the tractor had got a punctured tyre. Since the village we were going to was far away, there was no chance of reaching the village that day.