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Sumanahalli: Fighting for the dignity of the dead

"Don't throw me to dogs", "Please do not trouble me after death"-these and several other slogans brought home the point that the desecration of the grave of 80 year old Sadappa, a person afflicted with leprosy did without go protest.

The body of Sadappa of Belamaranahalli in Kolar district had been removed and thrown into the open in October. This was owing to the superstitious belief of the villagers that there would be no rains in the village, if he was buried in the village.

Over 300 persons, majority of them persons affected by leprosy gathered on November 6th at MG Road, Bangalore for the protest with the theme 'Help us rest in peace after death'.

AMICI trustee Dr N Prasad, Sumanahalli director Fr George Kannathanam and a few patients spoke on the occasion while Sr Mary Mascarenhas of Sumanahalli project conducted a touching session.

The group then met chief minister Mr Dharam Singh and later Governor Mr T N Chaturvedi and submitted a memorandum.

Sumanahalli project plans to pursue the matter at the village level and will also approach the government for further course of action.

Congratulations!

The month of October has seen important changes in the operative structure at AIFO, Italy, with the approval of the AIFO Board of Directors. Accordingly, "Italy Division" improve created to management of the action promoted by the Association on the Italian territory. The new division will be directed by Mr Antonio Landolfi. Dr Giovanni Gazzoli has been appointed as the director. "Project Division". AMICI congratulates both of them.

Warm Welcome!

AMICI welcomes Dr Sunil Deepak, director, medical and scientific department, AIFO-Italy and president of ILEP, Dr Giovanni Gazzoli, director, Project division and Mr Sergio Zovvini, board member, AIFO Italy on a visit to India. Apart from visiting some of our projects in India, they will be attending the ILEP End of Year Meeting at Hyderabad.

AMICI News wishes all its readers a Merry Christmas and a Нарру Леж Year!!!



AMICI DI RAOUL FOLLEREAU

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Readers views.....

Last issue, Dr N Manimozhi had presented two interesting case studies, opening them up for readers reactions. Here is the gist of the 2 cases-

Twenty four year old James who had been prescribed six doses for PB wanted more doses, since he felt it would improve his condition further. However, his request for further medication was declined by the medical officer. On one side we have the protocol which is important to the programme, and on another the social aspect related to the patient. The question was, Now what would Mr James do? And what could the Medical officer have done in such a situation?

The second situation was like this- A 35 year old male patient diagnosed as having multi bacillary leprosy had treatment for six months. He moved out of town and meanwhile completed the blister pack. When approached further treatment, he was advised to return to his native place by the MO for further treatment. Both the MO and the pharmacist

were convinced that they should not register the case...Now, what could have been a better alternative?

Ms Baby, NMS (Intl. Med. Association, Cochin)

Case #1: The Medical Officer can reassure him and tell him that he can approach the doctor at any time in case any problem arises.

Case #2: The patient is very conscious about his disease. In this case it is better to give him medicine completely. To avoid duplication the information may be sent to the Health centre in Orissa. Also inform the patient that the medicine is available in all PHCs.

Mr. John Aruldoss (NMS, DTST- Chitoor)

Case #1: Since he is not regular, continuation of the medication is good and he may either go to a private doctor or continue the medication by purchasing it for some more months.

Dr. Anjali Pal (DTST Coordinator, Karnataka)

Case #1: Since there is a possibility that James may go to another PHC and get registered there, the MO could have made James a RFT on the register but recorded him as an old case and given him MDT. That would have satisfied James.

Case #2: Better alternative would have been for the MO and the pharmacist give him treatment for next six months, record the patient but not register him.

Better still; the MO could have explained that extra MDT would be harmful.

Mr. Sayyed Jaffer (NMS)

Case #1: James must obey to the medical officer while the MO should explain about the disease clearly to James once and again give him treatment.

Case #2: No matter where the patient comes from, the MO should provide the treatment if he asks for it

Dr. G.Ramana Rao

Case #1: James may go to another PHC while the MO could have convinced Mr James that his disease has been cured but in some cases, the patches do not disappear completely.

Case #2: The MO could record the case, but not

include it as a new case and advise the patient that since he has been cured, he does not require continuing

treatment.

Mr. K. Ravikumar (NMS, DTST-Bellary and Koppal)

Case #1: James should have obeyed the MO. Since the PB treatment is only

for six months, a health worker could have visited the patient regularly and motivated him to continue treatment.

Case #2: The patient should be motivated and given health education

Mr. B.H. Marihal (DTST- Gulbarga)

Case #1: If he has taken regular dose of MDT PB, he need not take more doses. The medical officer in his turn could have educated him on regular treatment.

Mr. Mahadeva Shetty (NMS, DTST-Chamarajanagara)

Case #1: In this case, the doctor should have advised him that the patches would not disappear completely, before beginning the treatment.

Case #2: MDT should be given even if the patient goes away from the original area where the case was registered.

Mr.S. Masthan Saheb (NMS, DTST-Karnataka State):

Case 1:Mr James has to accept that he has been cured of leprosy, he should not take further treatment, while the MO has to educate him and tell him that taking extra drugs is not good for health.

Case 2: MDT should be given to the patient and he should be aksed to report after six months to the PHC.



ADOR: Meeting rural needs



Located in Raichur, in the northern part of Karnataka, the Assisi Leprosy Centre has been working for national leprosy eradication programme since August 2001.

Seeing the need for rehabilitation of the persons with disabilities, the centre started CBR project called ADOR in Raichur in April 2002.

Aimed at providing comprehensive rehabilitation to the persons with disability, the project covers 160 villages in Raichur taluk. Not an easy task this, considering sixty per cent of the population in this place is under poverty line while there is a very low literacy level.

Scarcity of drinking water, poor sanitation, lack of transportation, poor health care and some of the basic problems in the target area. In addition a problem peculiar to this area is the large number of women who have drinking habit, child marriage and marriage between close relatives.

The project staff has so far surveyed 150 villages and has identified nearly 2000 persons with deformities including persons affected by leprosy.

ADOR has also formed a taluk level action committee which includes government officials and NGOs in Raichur to support their work. ADOR also runs a 25 bed hospital in

Vidyanagar, Raichur which provides primary heath care services and is planning for further development with other heath care facilities.

Hussein Bi: Moving beyond...

Life for 31 year old Ms. Hussein Bi had been a pointless existence confined in her little hut. Born into a large but economically poor family, Hussein Bi's world never moved beyond her hut, thanks to her visual impairment since birth. She remained an unproductive member of the family, as her brother struggled to shoulder the burden that his late father had borne till his death

four years ago. He had to fend for five sisters, of whom two had visual impairment and his elderly mother.

Hussein Bi did not have any one at home to encourage her either. Her elder sister also born with visual impairment eked out a living by begging in a nearby village.

All that changed when the ADOR CBR staff identified her in the year 2002. Motivated by them, she finally stepped out of the confines of her small hut and started doing kitchen work at the project. Today, Bi can cut vegetables, wash vessels and even cook.

She is also an active member of the Self Help Group formed in her village by the CBR staff. Bi has even secured loan from the bank and has utilised it promoting agricultural activity and has already started repaying her loan.

And now that her area of movement has enlarged, Bi has availed of the government benefits like railway concession, free bus pass with the help of the CBR staff. After all, her life is no longer within the confines of her little hut.

Words of Wisdom

Happiness is that state of consciousness which proceeds from the achievement of one's values.

Ayn Rand (1905 - 1982)

ADOR observes International Day for the Aged

Raichur based Assisi Deepthi Organisation for Rehabilitation observed the International Day for the Aged this October. On the occasion, a health camp was conducted in which 75 people including PWDs attended. Sixty were given physical check-up, while 25 received walking sticks and other aids.

Reader Speak

♦ The event that happened in Kolar is really shocking. This underlines the need for awareness about human rights and communicable diseases like leprosy etc. Congratulations to Rev. Fr. Kannathanam for leading such a movement against this shameful event. We offer our full support to take forward the cause

Dr Alice Joseph, Intl. Med. Association, Cochin

♦ Thanks for the new issue of Amici News. As usual the newsletter is informative and provocative. Please convey my thanks to all the persons who work on it

Dr Sunil Deepak, Director, Med. & Sci Dept., AIFO, Italy, President, ILEP

Meetings/Events

Nov 4th to 6th: Mr M V Jose and Dr N Manimozhi at debriefing of DTST UP evaluation and planning workshop of ILEP members at Lucknow

Nov 17th and 18th: Mr M V Jose and Dr N Manimozhi attended the ILEP meeting at Delhi.

Nov 16th to 24th: Mr Jayanth Kumar conducted training workshop for staff of Raichur project

Nov 23rd: Dr S Anjali Pal attended ninth quarterly review meeting of state/zonal co ordinators and consultants (NLEP) and DTST at Delhi.

Nov 25th: Mr Jayanth Kumar conducted training for staff of TRDC, Kanakapura

Nov 29th: Dr Sunil Deepak, Dr.Daisy and Mr Jose at a meeting of the staff of Malavalli and MOB at Mandya

Nov 30th: Dr Sunil Deepak, Dr.Daisy and Mr Jose at the World Health Day programme at MOB, Mandya

Obituary

AMICI news expresses its deep condolence at the sudden demise of Rt Rev Michael Minj S J, the Bishop of Gumla on November 16th . May his soul rest in peace.

MOB: Free health assessment camp

Over 1000 physically challenged persons converged at the Mandya General Hospital on 29th Oct 2004 for a free health assessment camp conducted by MOB in co-ordination with ALIMCO and Red Cross. The people from Pandavapura, Srirangapatna and Mandya put forward their needs for aids to cope with their disabilities. The objective of the camp is to identify and assess the disability.



MOB also hosted the sports meet for disabled children of Pandavapura and Srirangapatna taluk on 28th and 29th October, respectively. MOB director, Sr. Leela felt the meet would give the disabled persons a sense of social acceptance and being wanted. MOB also observed the World Disabled Day on October 30th.Dr. Sunil Deepak was the chief guest on the occasion.

Upcoming events

Dec 2^{nd to} 4th: Dr Sunil visits Bhalki project Dec 4th to 6th: Mr. Sergio Zovini, Dr. Giovanni, Dr. Manimozhi and Mr. Jose visit Warangal project

Dec 7th to 11th: Dr Sunil Deepak, Mr. Jose, Dr Giovanni, Mr. Sergio and Dr Manimozhi attend International ILEP End of Year Meeting at Hyderabad.

Dec 14th to 18th: Mr. Sergio and Mr. Jose visit Chandpur and Nayee Asha projects.

To,			