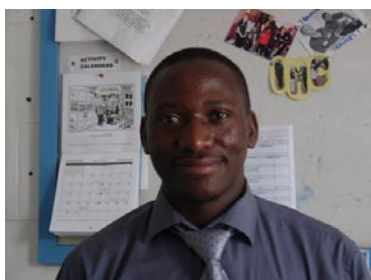


PADER HEALTH CLINIC - UGANDA

Update August 2009

*Since opening to patients in October of 2008, a total of **2,396** people have been treated at the clinic.*

Dr. Hillary Irimaso, our new doctor at the Pader Clinic is 30 years old and eager to work in our upcountry setting. He is very self motivated and despite the many challenges of working in Pader, he is keen to take on this key role and leave behind the traffic chaos of Kampala.



His previous experience includes medical placement at Barnsley District Hospital in Yorkshire. He worked with Dr. Maura Lynch at the Kitovu Hospital in Masaka, Uganda for his elective and they reported him to be very hardworking and committed.

Dr. Hillary also spent some time at Cranfield University in the UK on a research project, so he is very familiar with life in the UK and the comparisons between the NHS and health services in Uganda. He even likes cricket!

We wish him the very best in his new role and we're confident that he can make a difference over the next few months.



These photos show the *new health centre facilities*, which have a health centre 4 status (HC4, mini hospital), although currently it is still operating just as an outpatient facility (HC3) until we, working in conjunction with the local Government Health Services, gain approval and funding for the development of the theatre and related services.



This is feedback received from the team in Pader about some of the positive outcomes from patient interactions with IMF services. The spelling is not so good, but we thought we would leave it as is to illustrate the effort made. The IMF Fund referred to is part of our budget allocation for the clinic from monies given by our UK supporters.

SenarioNo. 1 Opiyo joseph 2years old,with severe malaria and anaemia was brought in from a village about five km ,the mother walk on foot and came to Pader H/C III when she did not have any money only to hear the news that her baby was reffered to the main hospital for blood transfusion, she gave up and was looking at the baby granting and almost in cardiac failure and about to die,all posible ways tried had failed because the ambulance had no fuel and the mother had no money to travel using the public means,until the admministrator IMF got money from the IMF Fund and bought fuel ,then this baby was transported to the hospital safely and trasfused

(many other children have been saved from this simmlar circumstances using the IMFfund,but have just sellected one) The tyres of the ambulance was also bought using the IMF Fund ,hence great contribution towards transportation.

Senario NO.4 The healthcentre where IMF operate has no electricity,and you can imergine conducting a delivery and putting up an intravenous infusion at night without power source ,but i tell you IMF has brought life in us by putting up the solar pannell that is providing us with power to do the night duties and water supply to the unit.

All from the IMF staffs Pader:

Anena lucy Obatre	The clinical officer incharge of IMF.
Challote Awino	The Admministrator IMF.
walter Ojok	The lab technician IMF.
Atim Judith	The nurse IMF.

With this, i would like to send our sincere heart felt on behalf of the patients who are benefiting from the IMF Fund, may God bless you as you continue to support from the IMF Fund.

Thanks regards to all, from Lucy Anena Obatre Pader IMF.

Senario NO.2 Children with chronic tropical leg ulcers of about 4cm by 4cm and could not afford buying the drugs for their treatment they were treated under the IMF fund and these has avoided them from getting osteomyelitis,these would need a camera such that a photograph would be attached.

Senario NO.3 In the month of june there was a mother who was brought in with profused bleeding at night (threatenning abortion) and she had an elderly lady who could not attend to her well,they had no transport money ,no money for communication to call for her husband until money for communication and transport was provided from the IMF Fund and she was escorted to the hospital by an IMF Nurse Judith.

Number Of Patients Treated By Category

Month	May	June	July	August	Total (since Oct '08)
Respiratory tract infection	24	16	74	35	455
Malaria	53	15	24	35	324
Urinary tract infection	6	11	11	14	203
Fungal infection	16	12	27	20	199
Gastroenteritis	17	5	12	24	187
Other	109	63	163	96	1,028
Total	225	122	311	224	2,396

Note: 'Other' includes helminth infestation (worms), cold and flu, conjunctivitis, tonsillitis, pregnancy, wounds and burns.



The ambulance with its 4 functioning tyres, thanks to funds from IMF, has been a great benefit in the transfer of patients.

Sunflowers growing in abundance. Such a lovely sight while travelling through the whole of the North, it's so good to see the land being farmed once again.



The recruitment of Dr. Hillary will have a huge impact on the ground in terms of accelerating this programme. The original health centre building which we had been involved in refurbishing is now being used for maternity/delivery services and HIV/AIDS treatments – staff and patients now have more room and there's so much less clutter than previously.

There are still many needs on the ground, as the new centre is really just a structure, we will assist where possible to add some equipment, and connection of vital services such as power and water. The great news is that there will soon be mains electricity in the area, the poles are already up in town. Pader town is growing steadily which is a good sign of post conflict confidence.



The District staff are looking forward to Dr. Hillary arriving and we hope it will strengthen our partnership. It seems from the feedback from the clinic that there is a new vitality in staff on the ground, which we hope will continue to grow.

The Pader IMF team left to right:

Irene Curley, IMF Administrator based at IHK, Kampala
Rose, Assistant Nurse
Lucy, Clinical Officer
Milton, Clinical Officer in Charge
Walter, Lab Technician
Judith, Nurse.



Thank you so much for your financial commitment without which this simply would not be happening and literally makes the difference between life and death for the poorest of people in Pader.