



# BAIRO PITE CLINIC

Bairo Pite Clinic, Dili, East Timor  
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## *Clinic News*

March, 2005

We are very grateful for your kind attention and interest in our daily activities.

There are always many patients that we see everyday, even now on Saturdays, a day that used to be quieter. The staff is trying hard now to learn more things from the volunteers even though they cannot converse with each other due to the language differences and relying upon Timorese interpreters. The interpreters do a great job at minimizing misunderstandings.

Now we are trying also to establish a Timorese Management Committee. Dr. Daniel and the other foreigners will be advisers according to the meeting last month that was launched between Mrs. Christie Carberry, the permanent Donator, Nini (Timor Aid Financial Officer) and Celeste Soares (BPC Manager), Dr. Daniel, Virginia Dawson and Ana. We all agree that the establishment of the Management Committee to be a very important priority. It will be very good for us to have strong leadership to ensure that the clinic runs well, in good order. The Management Committee will operate with transparency being open to everyone.

One the first jobs for the Management Committee to address is to negotiate with the landowner to extend the use of the land for a further fifty years; Celeste has agreed to arrange this.

### **1. Operations Abroad**

After a very hard effort, we have finally sent Maria and her father to Australia to have an operation. The operation ran well and lasted 6 hours. Her father was nervous seeing his daughter with many tubes in her body. Everything went well. Cardiologist, Dr. Noel Bailey and the many other people in Australia have contributed to making this operation possible.

Dr. Sant-Rayn Pasricha, Luke and Chloe visited her in hospital, took her father home to have some rest, we thank you sincerely for all your kindness. We are also would like to express our great thank to Dr. Olivia Hum, Charlotte, Virginia and the UN Military Doctors for their hard work in helping arrange everything for Maria to get the operation as soon as possible. They will stay in Australia for two weeks, before returning to East – Timor.

### **2. Dengue Fever**

Dengue, a mosquito spread-viral infection causing fever, rash, ache, headaches and even bleeding is a problem we are seeing everyday at the moment. We have produced Dengue Information Guidelines to share with all the patients even those that get a negative dengue test result. In the guidelines, we wrote the main symptoms and signs to be vigilant for. They should come to see us anytime; whenever they think they need help.

According to the case numbers, everyday dengue is increases. The Ministry of Health (MoH) is trying hard now to solve this problem by working together with other government agencies as well as the International and National NGOs and church amongst others to reduce the mortality due to Dengue.

Written, radio and television are being used to educate people on how to prevent being exposed to mosquitoes and the Dengue virus

The clinic also aims to:

- a. Reduce the transmission of dengue by putting into place preventative measures such as new fly screens, mosquito coils, etc., on the wards.
- b. Increase detection of dengue by putting into place a new screening programme testing all children with fevers.
- c. Liaise with Dili National Hospital regarding shared care of dengue patients.

### **3. A Sad Situation**

A woman was admitted with a long history of being unable to walk because she could not move her right leg. She and her family suspected it was due to an abscess, but after a few months, they realized they were wrong and a large tumour in her leg was found.

Sadly, they came BPC too late and she had to be referred to Dili National Hospital for the leg to be amputated. Four surgeons at Dili National Hospital worked to do the amputation. We are waiting to see how well she will recover.

### **4. Fewer Volunteers**

After the glut of volunteers at Christmas times and in January, we now have fewer volunteers working at the clinic. Some have returned to their hometown to continue studies. We now have only a few volunteers, Dr. Olivia, Virginia (from New Zealand, international development student), and medical students, Anthony Larkin (Cornwall, UK), Charlotte, Eleanor (England), Izumi (Japan) and Lucy (Australia). Even with just a few, the clinic is still running well, and the mobile clinic still functioning normally.

*Volunteers play a very important role in assisting the work of BPC, especially for the nurses by share their knowledge and experience. We greatly appreciate them for their high contribution to the clinic and also for their kindness.*

### **5. Dili National Hospital Outpatient Department Closing**

The Dili National Hospital has decided to close their Outpatient Department. They just want to receive referrals from primary care clinics. In addition, the MoH has decided Dili will have four Health Center namely AMI Center, Becora, Comoro and BPC. This decision has caused an increase in patients seen at BPC. These clinics will now send the patients who have a serious illness. Aside from that, they need to send them according to a timetable instead of sending them according to the patient's need.

### **6. Fewer Beds for Inpatients**

Due to the new health regulations from the MoH, the number of inpatients treated at BPC have had to limited. For some patients have been asked to return the next day for admission

## 7. Less Medicine

The imbalance between medication supplied by Central Pharmacy and the demand from unwell patient continues to be a source of frustration. Some medicines are not available when we need them, so we forced to buy some medication from private pharmacies at greater expense to care for some patients.

Getting donated medicines through the Customs continues to be a major problem. Some of these medicines are not available in East Timor and can only come from overseas. This means that some patients cannot be adequately treated.

## 8. Patient Report

Month	General Consultation	Maternity	Post Partum	Family Planning	Immunization	Dental Care	Inpatient	Total
January	4475	438	22	123	220	391	n.d .	5669
February	4355	431	20	232	422	378	88	5926

## 9. New Programme

The Norwegian NGO Caritas had decided to provide food for patients who are TB positive who come to get their medicine at the BPC.

They will now also get lunch when they come to the clinic to take the medicine. Caritas will provide the food. The food will be prepared according to a menu devised by a dietitian working for Caritas.

The clinic is still running well, thanks to the support from inside the country also from abroad. We have good relationship with many groups and many individuals. These relationships are helping us as a new nation to develop. The relationships formed at the clinic are not only about health, but also will play an important role for cultural understanding and international relations.

## 10. Mobile Clinic

Volunteers do not just work at clinic, they also join the mobile clinic programme to do consultations in remote areas of Liquica, a District of East Timor. Towns visited include Leorema, Fahilebu, Metagou and Bazartete as well as smaller villages around the capital. An obstacle that they have had has been the road condition. In the raining season the road are often bad because there is a lot of mud on the road, and that makes it difficult to reach these places.

## 11. Finance

Ms. Christine Carberry from AFAP, our permanent donor, has just visited us. We had a great talk about the plans for BPC for the future. She bought a computer especially for finance. She has also written a report with recommendations for future development of the management of the clinic.

**We would like to thank for all your kind help to our clinic**