

Health Weekly Diary

Report on 11/11/08 by Tsering Lhamo In charge of health project, TC, India

Destitute Monk stricken with skin disease.

Kushok Lobsang Tsundue 60/m diagnosed Dermatitis Herpetiformis from Beas hospital a year ago. Again the problem has relapsed. His whole face and body look terrible with infection. Too poor! No money and do not even have another set of Rob to change. So, we bought for him a full set of Monk's rob and paid for him to go to Beas Hospital for proper check up and treatment with his nephew.



Report on 27/4/08 by Gunver Juul In charge of health project, TC, Denmark



Diabetes project still having effect.

It has been very encouraging to see, how last year's *information about Diabetes* has had and still has an impact on Tibetans choice of food and awareness of symptoms related to this disease.

When asked about their bread, they all state that they are using attar instead of maida, which they are avoiding excess of sugar, and many have changed from the dangerous white sugar to Jaggery or honey.

Before many Tibetans were not drinking enough water – this has also changed. Now they start with hot water in the morning, some are taking green tea instead of sweet chai.

High blood pressure is still found in many overweight patients, but now, they are more conscious about the risk of diabetes and therefore trying to control the blood pressure. Unfortunately, the statins are also invading this population through the Indian doctors, but many Tibetans still prefer the Tibetan or Ayurveda remedies. Patients coming to the clinic are aware of taking care of eyes and feet, in case of symptoms.

Old people.

We saw this time about 100 patients, many of whom are old people living alone in very poor conditions, not having any support or very little from Religious Department or Private Office. Part of their health problems are due to very hard life: working in the roads in the decades after the escape from Tibet or having too many child births. But other reasons are the very poor food that they can afford to buy: mostly bread and rice, no vegetable and absolutely no fruit.



So, our job in the clinic has not only been to test, diagnose and treat with natural remedies, vitamin and mineral supply – we have also functioned as a social welfare office, questioning and doing research into their conditions before sending them to the office of TC House with a request of making an application for sponsorship. It will most certainly improve their health to be able to buy better food, and maybe to move to a better place.

We have designated one of the home nurses, Mrs Phurbu Lhamo, to the Old People's Home, where the many sick residents need special care.

Most common health problems:

From **old people:** *pain in knee and back*

From **everybody:** *gastric upset stomach and liver/gallbladder dysfunctions*

From **children:** *diarrhea and chronic cough and colds*

From **women:** *womb infections and headache*



The economical issue

It is also a major part of the constant worries of all other Tibetans. Medicine and doctor's consultations, not to mention hospitalization, are all so expensive, that it means ruin of the economy, if only one member of the family falls ill. As an example: a woman who was pushed out of the window in Tibet, has broken arteries going to both kidneys and lungs, and is therefore in danger of not getting enough oxygen and food to these organs, plus having blood clots endangering her life.

Only examinations at the hospital has cost about 18.000 rupees, and since she is not working and her husband is a Thangka application worker with uncertain income, they have had to borrow money from friends and monks, which is giving them psychological stress. Of course, the hospital has suggested complicated surgery, which is completely out of reach for these people. In this case, we suggested to help financially and to take other measures than operations, which would be risky and not likely to help.

Home nurses in action.

In order to find the really needing and poor people, we conducted home visitations with the 6 home nurses, who are now functioning under the Educational clinic of TC House. We found old people, who cannot get out of their small huts, and who entirely depend on the good will of their neighbors who often live in similar poor conditions. Roofs are leaking and there are no toilets and bath facilities. We are receiving old people to take shower in the clinic, but the roads are steep and difficult to walk for these old people. More social reports to be made! We have now scheduled a plan for home visits by the home nurses to these old people, and this is giving a significant support in the daily life and also a comfort for them to know that somebody is taking care and keeping an eye on the situation.

Since newcomers from Tibet are also in need of support in their very poor shelters with small children, our home nurses are going to be very busy in the future.

This work is being done in collaboration with Welfare Office, an institute under Home Department.

Home nurses are also accompanying sick patients to hospitals, since helper is required when a person is hospitalized. Sometimes, it means that the patient is being transferred from Delek Hospital to a place further away, and the home nurse has to be ready to stay there overnight. Thus, the plans can be altered always and in last minute. We are happy to say, that our home nurses are ready to be in service whenever it is needed.

Collaboration with the Indian society, mainly the Rotary Club, will probably in the future allow our Indian male home nurse to work in the Indian society for the benefit of orphans.

Twice a week, we have met for further instructions and education on items necessary for conducting the daily work. Thus, the home nurses can bring about subjects which they have themselves felt useful for their treatments of the patients.

This time, we did a small course in the use of acute homeopathic remedies, and the home nurses have got homeopathic remedies to bring with them in home visits. This has proven most useful.

Concrete projects:

Health and Social projects, TC in Denmark, have decided a joint support for the clean water supply in Norbulingka . The increase of the population and the deterioration of the old water supply are a major reason for acute stomach problems, which were observed during out week-end stay in the clinic, where we treated 18 patients.

Health, TC Denmark, has also decided to pay for new wheelchairs for disabled children and young people in the Institute in Dehra Dun.

Psychological issues:

The major concerns of Tibetans seem to be

1. The education of their children, since all educations after class 10 or 12 are rather expensive. Besides, very few seats in Indian Colleges and Universities are dedicated to Tibetans and
2. As mentioned above: the expensive medical bills coming out of Indian hospitals.

But, for the time being, another issue is dominating the Tibetan mind: The present crisis in Tibet. The worries for the families still in Tibet, the re-awakening of old memories of those, who already experienced the atrocities of the occupation of their country, and especially the re-traumatizing of the ex-political prisoners and torture victims, all these concerns are very often brought to the clinic, and the Tibetans themselves see the political situation as the major reason for their headaches, upset stomachs and pain all over the body.

Never before have I seen so many patients crying in the clinic, old monks and young mothers, high officials and tough workers, all with tears in their eyes, telling about their fear for the future of Tibet. It is difficult to find other remedy against this suffering, except listening with compassion.

It has again been a very busy time in McLeod Ganj, and also a very fruitful one. It is a great pleasure to see the house bobbling of activities and so many people getting a chance of a new and better life. I thank all the staff of the house for making this possible and for providing so much personal help.