

HEALTH CARE THANARBABD CENTER

BANGLADESH Thanarbaid Health Care Center Newsnotes EASTER 1998

Easter greetings from Dr. Edric Baker at the Thanarbaid Health Care Center. This correspondent has not been able to visit much since Christmas and was happy to find the doctor as enthusiastic as always. In fact he shared with me his visions and dreams. Scripture says somewhere that young men see visions and old men dream dreams. Lets put Dr. Baker somewhere in the middle. He is not deceived by his visions. He sloses daily through reality. Yet he can still dream when he is wide awake. One of the positive points he sees is the great amount of responsibility that his staff has taken on, even though their education level is rudimentary though filled with village common sense. He feels he has done the preparatory work for this endeavor to carry on. In the Health Center there are at all times 23 to 25 in-patients. The staff bears the major part of care for them. These patients reside in the various houses and buildings around the compound. A year or so ago you received a schema of the land. It is Dr. Edric's desire to see this work carried on.

"How will this come about?", he questions himself. Certainly the present staff can do the nitty gritty, day by day and night by night. The catch is, that they need supervision, motivation, and help in the difficult circumstances that occur. A chief medical officer (CMO) which is Edric at this time, is necessary. That one must not only be trained in the medical healing arts. More important would be this person's own inspiration and desires. Concern for the total person is the ideal, indeed concern for the lower or lowest levels of humanity, as labeled by the world's 'estimation.' This CMO could be a foreigner or better, a local Bengali with compassion for the poor. Necessary too would be the use of simple, inexpensive medicines and instruments. To use the more expensive, exotic remedies and facilities would only drive up the costs. Only the class of patients who could afford this, would come. The result would be a gradual squeezing out of the really needy ones. Dr. Edric does take fees from those who can afford it. Since the local staff knows the economic condition of many who come, proper charges can be set. The fees don't amount to much. The clinic is established for the community, in the presence of and in union with them, and helped by them toward full human development. The Church is the main agent. In this case it is the Church of Bangladesh. Through its own personal sacrifices and donations from others, the Church strives to bring about the reign of God, the values taught by Jesus. Don't we pray each day, "Thy Kingdom come," for those cared for, regardless of what religion is held? The doctor has passed these visions and dreams on to me so they could be 'broad cast.' If you know of any medical person(s) aspiring to serve in such a manner, even for a few short years, please pass on to them the dreams and visions raised up here.

What steps have been taken to realize such a vision? Trial and error, success and failures, this latter being perhaps more frequent than we like to admit, are the usual methods. At times the dream is a night mare.

Nazma, 14, was pretty girl but has serious diabetes. Though a Muslim she was the only one in her family, a poor one, who could read. They were proud of her. Dr. Baker intervened to get her free eye cataract operations. In March she went to get her supply of insulin at Kailakuri, the Health Center's diabetic sub-Center. In the following days she experienced some kind of abdominal pain and discontinued her insulin treatment. When Dr. Edric got the news she had already been in a coma for 5 days at the Sherpur District Hospital but had been sent home as helpless. The doctor was extremely busy at the moment so he sent a good staff member, Awnin ahead to guard her. The village was 15 rough miles away. By the time the work at the center was finished it was dark. The Health Center had a remaining two bicycles, both in bad

Baker, feeling a bit sorry for the man with the lousy bike, switched with him. That did not work. So after some exhausting miles he reversed his decision feeling it was better for him to conserve his strength. He was the principle agent. Gradually he became more and more angry at the attitude of his companion. Worse, the fellow spoke a kind of a local dialect which was very difficult to understand.

Then they came to a big river. Fortunately there was a wooden ferry boat at hand in which they poled across to the other side. Dr. Edric was so happy to be resting a bit and the water so smooth and dark that they were half way across before he realized they had left the shore. One small wonderful respite.

However, there was more of the other to come. The river beach was pure sand. No one could ride in it and to push the bike in it was strenuous even when not exhausted. About this time the doctor wished his dream was a 'night mare' on which he was riding. The night seemed to get blacker. Edric could not go a step farther. He laid down in the sand to rest and he told his companion to go ahead, tell the rest he could not make it. After lying there for some minutes he thought he saw some figure ahead in the dark. His companion had gone only 20 meters and was just standing there. Up got the doctor to have another try. He thought he was going to have a heart attack. Just about that time the fellow said his uncle's house was near by. Edric spoke with the uncle and could understand less than he did with his companion. So they pushed on. A half mile farther they ran into Awnin, who had been sent ahead to guard Nazma. He had actually only arrived a little while before the doctor. The girl, however, had died and was already buried. "What fools these mortals be."

Edric was determined that they were going to get some food from the locals and a place to rest. He was taken to big compound but there was no room for them. The next place was home of a big businessman and here they received a welcome. Edric just wanted to sleep but they insisted that he eat. The time was 1 A.M. before the meal came. The doctor found the food delicious and devoured it. Before he dropped off to sleep he told faithful Awnin that they had to leave before dawn. If they did not, they would be coerced all morning into treating patients in the village and there was too much to do at the Center. They sneaked out about 5 AM, crossed that wonder smooth river again and back home. Whew! I am exhausted just from telling about the incident. Let's let it be.

Nazma was just one of a number of deaths this month. Three died, one of cholera, one of hypertension, and one of eclampsia. Another serious illness is black fever; kala azar is the local name. It is borne by the sand fly and is fatal if not treated. The treatment is made up of 20 injections of antimony, a metal. It not a pleasant cure. At the Health Center at any one time about 6 patients are taking the treatment. They can be cured but they also can become resistant to the injections. Dr. Baker commented that like Fr. Damien in Molakai who caught leprosy, black fever will probably find its way to him.

Let us not end this exhausting period with Dr. Baker on the above notes. There is joy in the Easter air. He told me that their sub-Center in Kailakuri now has a 100 some out-patients. The present staff carries on almost all the work. It seems that in the foreseeable future they could take over the whole operation. Just as vision and dreams jump around where they may, so does reality. And the one reality for which the doctor is thankful is for all you friends who keep this dream, this vision going. I want to pass his gratitude along to you all. Peace and all good things.

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