



**NEWS BULLETIN 272**  
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## **Health Camp Keeps Prolapse at Bay in the Mountains of Nepal**

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**The Jitpur health camp attracted 1,005 villagers**

**JITPUR, EASTERN NEPAL:** Over a thousand Nepali villagers, mainly women, recently made the long slow climb to a mist-covered health camp here in Dhankuta District, seeking relief from ailments that included uterine prolapse (fallen womb).

The journey began for Ujeli, 58, in the village where she has lived with prolapse for 38 years. As she explained with a grimace, her husband "forces her to work hard," which makes her prolapse worse.

Ujeli has long known that a ring pessary might offer relief, but was put off by the cost (50 cents) and the fact that the pessary would have to be fitted at a health post, two

hours from where she lives.

Eventually the pain proved too much. Ujeli worked a full day in the fields. She then used the 50 rupees she earned to buy a bus ticket to Jitpur and register for the health camp along with 1,004 other villagers. Photos of the camp can be [viewed here](#).



**After screening: good news for Mandira and Gita**

The Jitpur camp was the fifth to be organized by [Care Women Nepal \(CWN\)](#), a Nepali community association and partner of The Advocacy Project (AP). The costs were covered by an [AP appeal for Nepal](#) that has raised almost \$11,500.

Indira Thapa, the founder of CWN, expressed satisfaction at the large turnout: "Many people were able to receive medicine and services that would not otherwise have been available in such a remote area," she said. "I am happy."

Activity was particularly intense in the gynecology room, where three specialists worked non-stop to screen 285 women. Mandira, 20, received good news. She had recently detected the first worrying signs of prolapse and decided to take the 4-hour bus ride to the health camp with her baby daughter, Gita. Dr Prezma Shrestha found pelvic inflammation and gastroenteritis, but no prolapse. Mandira was given antibiotics and emerged relieved. (Photo above)

Ujeli's consultation was less reassuring. Dr Ramesh Shrestha found that Ujeli has severe prolapse and an ulcer on her uterus, and recommended a hysterectomy. Ujeli was given a pessary and wait-listed for surgery. (Photo)

Many women came to the health camp in serious condition. Dimar, 57, has lived with a huge hernia for 7 years and can barely walk. Her house was destroyed in the recent earthquake and she now lives in a tent. Dimar's condition is so severe that the



**Disappointment for Ujeli (right): Dr Ramesh Shrestha recommends surgery for Ujeli's 3rd degree prolapse**



CWN team recommended immediate surgery. Peace Fellow Maya Washington, who is volunteering at CWN, will help cover the cost through [her crowd-funding page](#).

But if the camp illustrated the pressures on village women like Dimar, it also provided an inspiring example of community service. Over thirty CWN volunteers visited 7 villages in advance to promote the camp and explain the value of screening. They then set up the camp and organized an opening ceremony that attracted the chief district administrator and members of parliament.

Staff from the health center volunteered to work through the weekend, and in return received valuable on-the-job training. Several medical students received academic credit for dispensing medicine at the camp pharmacy.



**Indira Thapa, second from left, at the Jitpur health camp**

The camp also allowed health workers to reach far beyond their normal area of operation. Gita Achariya, from the Dhankuta hospital, was able to conduct an ultrasound on 89 women. Dr Sanjok Shakya and his team from the Dhankuta Eye Hospital screened over 300 villagers during the 2-day camp - many times the number that visit his hospital each day. "We are reaching the unreached," he said, with enthusiasm.

Prolapse was just one of the conditions screened at the camp, but it carries a special significance for Care Women Nepal and AP, which has supported the work of prolapse advocates in Nepal since 2010. The UN Population Fund (UNFPA) estimated in 2007 that 600,000 Nepali women suffer from prolapse.

The extent of prolapse in Dhankuta was hard to gauge from last week's camp. Of the 285 women seen by the gynecologists, 34 had prolapse and 22 cases were deemed to need surgery. In two days, the doctors gave out 34 pessaries, which compared to the 200 pessaries dispensed by the Dhankuta district hospital over the entire past year.



Women, work and prolapse as depicted by one Nepali woman for the [Women's Health Quilts](#)

Surgery is the ultimate treatment, but it involves tough choices for village women. One woman was diagnosed with severe prolapse 9 years ago but decided against surgery because she wanted children. Nine years and 5 children later, she is still unsure. Narbada, 72, has used a pessary for three years, but wants surgery. She even asked for an ultrasound to conquer her fear of hospitals.

The 2-day camp accounted for \$2,490 of the AP appeal, leaving around \$1,000 for surgeries. CWN hopes to support up to ten surgeries by the end of the year and is waiting for confirmation that they can be performed at the Dhankuta government hospital. CWN will transport the women to the hospital and accompany them home.

While health camps fill a gap in services, they cannot address the many deep-rooted causes of prolapse, particularly discrimination against women like Ujeli. This was the message of [a 2010 AP video about the work of the Women's Reproductive Rights Program](#) in eastern Nepal. It was [echoed by Amnesty International](#) in 2014.

- Help CWN support more surgeries by [donating to our appeal!](#)
- View photos of the Jitpur health camp by [Iain Guest](#) and [Maya Washington](#)
- Read about the health camp in the blogs of [Maya Washington](#)
- See how Nepali women see prolapse through the [Women's Health Quilts](#)
- Read more about [Care Women Nepal](#)
- Donate to [Maya's crowd-funding page](#)
- Watch AP's [2 part video](#) on prolapse in eastern Nepal.

Read past AP news bulletins about Nepal and uterine prolapse [here!](#)

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