MEDICAL CAMP KEKRI - RAJASTHAN
OCTOBER / NOVEMBER 2015

THANKS TO OUR PARTNERS
Foreword

India accounts for the maximum number of maternal deaths in the world — 17 per cent or nearly 50,000 of the 2.89 lakh women who died as a result of complications due to pregnancy or childbearing in 2013. Nigeria is second with nearly 40,000, stated the UN report on maternal deaths released on Tuesday.

In contrast, China — with the largest population in the world — reported 5,900 maternal deaths in 2013 mainly due to its “one-child policy”, the report added.

According to the UN report, maternal deaths have witnessed 45 per cent drop globally since 1990 — from 5.2 lakh in 1990 to 2.89 lakh in 2013. Only Sub-Saharan Africa region poses a high risk with 1.79 lakh maternal deaths in 2013, followed by Chad and Somalia.

Despite India progressing noticeably in curbing the maternal mortality rate (MMR) — 65 per cent drop reported since 1990 — the country is lagging behind the UN-mandated Millennium Development Goal (MDG) of bringing a 75 per cent decline in the MMR till 2015.

The World Health Organization (WHO) reported that India’s MMR, which was 560 in 1990, reduced to 178 in 2010-2012. However, as per the MDG mandate, India needs to reduce its MMR further down to 103. Though India’s MMR is reducing at an average of 4.5 per cent annually, it has to bring down the MMR at the annual rate of 5.5% to meet the Millennium Development Goal.

“Literacy and social issues are major factors that have led to high maternal deaths. Girls are married at a young age and they have little knowledge about early pregnancy,” said eminent gynecologist Dr Nandita Palshetkar.

As per the report, there were 320 AIDS-related indirect maternal deaths in India in 2013. “I believe postpartum hemorrhage (loss of blood after delivery), malaria and dengue can lead to severe conditions. If diabetes is controlled, it cannot lead to maternal deaths. We have approached the government to fund us so that we can train para-medics about timely treatment,” said Dr Suchitra Pandit, president of Federation of Obstetrics and Gynecological Societies of India.
According to Pandit, the situation is worse in states like Bihar, Uttar Pradesh and certain belts of Rajasthan. “The overall MMR has declined, but due to few states, we are not able to achieve the two-digit figure in MMR,” she said.

http://indianexpress.com/article/india/india-others/india-has-highest-number-of-maternal-deaths/

http://apps.who.int/iris/bitstream/10665/112682/2/9789241507226_eng.pdf
Health Indicators of Rajasthan

The Total Fertility Rate of the State is 3.1. The Infant Mortality Rate is 55 and Maternal Mortality Ratio is 318 (SRS 2007 - 2009) which are higher than the National average. The Sex Ratio in the State is 926 (as compared to 940 for the country). Comparative figures of major health and demographic indicators are as follows:

<table>
<thead>
<tr>
<th>Item</th>
<th>Rajasthan</th>
<th>India</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population (Census 2011) (In Crore)</td>
<td>6.86</td>
<td>121.01</td>
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<tr>
<td>Decadal Growth (%) (Census 2011)</td>
<td>21.44</td>
<td>17.64</td>
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<tr>
<td>Crude Birth Rate (SRS 2013)</td>
<td>25.6</td>
<td>21.4</td>
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<tr>
<td>Crude Death Rate (SRS 2013)</td>
<td>6.5</td>
<td>7</td>
</tr>
<tr>
<td>Natural Growth Rate (SRS 2013)</td>
<td>19.1</td>
<td>14.4</td>
</tr>
<tr>
<td>Infant Mortality Rate (SRS 2013)</td>
<td>47</td>
<td>40</td>
</tr>
<tr>
<td>Maternal Mortality Rate (SRS 2010-12)</td>
<td>255</td>
<td>178</td>
</tr>
</tbody>
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http://nrhm.gov.in/nrhm-in-state/state-wise-information/rajasthan.html#health_profile
Methodology and execution

Medical Camp in Kekri – Rajasthan

Inspired by initiatives already realized by the GMP foundation in Nepal and India a group of companies combined resources, talent, and passion as well as European physicians, in order to realize something unique and wonderful: A surgery and ultrasound camp for women in and around the large rural areas of Kekri

- Philips provided the ultrasound equipment
- Storz provided the surgery equipment
- Local charity BHARAT VIKAS PARISHAD supported the whole team of 10 people for all local logistics
- Sawai Man Trust deputed one serving and two retired Colonels as active participants and full time escorts during the entire duration of the medical camp.
- Trice Imaging Inc., a world leader in mobile imaging solutions, managed the project together with the Michael Gregor Praetorius Foundation
- “Philips” was the main project funder together with “Apotheker helfen “

Our mission in during the camp was to

- Offer Gynecology related surgeries during the camp
- Offer ultrasound examinations for gynecology
- Offer ultrasound examinations for pregnant women
  - Determination/verification of gestational age
  - Verification of number of fetus
  - Verification of fetal wellbeing
  - Verification of delivery requirements
  - Verification of fetal malformation
  - Verification of placenta position (reason N1 for maternal death)
- Offer ultrasound examinations for newborns and children
- Diagnostic of all kind of diseases
Ultrasound examinations, diagnostics and surgery has been a common experience and exchange of knowledge and methodology in between the European and Indian team was part of your mission. Transfer complex cases to dedicated centers and transfer images through the WEB for professional healthcare was important so that the women could get adequate treatment in time to prevent maternal death.

**Our goal in this project and for the future was to**

- Increase medical coverage due to sustainable exams by providing ultrasound in different faculties
- Provide CME - Continuous Medical Education
- Connect underserved areas through wireless network and the Trice technology to specialist for second opinion to get professional diagnostics
- Regular camps in cooperation with our partners
  - Apotheker Helfen e.V.
    [http://www.apotheker-helfen.de](http://www.apotheker-helfen.de)
  - GMP-Foundation
    [http://gmp-foundation.de](http://gmp-foundation.de)
  - Interplast
    [http://www.interplast-germany.de/english/](http://www.interplast-germany.de/english/)
  - Philips Global
- Decrease maternal and fetal mortality rate
- Initiating and provide healthcare in rural areas

**HELP PEOPLE TO GET NECESSARY TREATMENT IN TIME**

*Last but not least*

**EMPHASIZE ON GOOD HEALTH OF MOTHERS – AS HEALTHY MOTHERS SIGNIFY HEALTHY FAMILIES**
Why Kekri?

- Kekri is a very rural area 74%
- The mortality rate is much higher than the Indian average for foetal and maternal rate
- The government hospital of Kekri is offering their location and their staff during two weeks to cooperate with us
- They will screen patients to establish the most urgent cases
- They are interested in long term cooperation
- Dr. Rathore (ex-Chief of the government hospital in KOTA) is actively trying to establish a standard in medical care and is politically connected
Results

Number of exams more than 400 in 10 Days

Most frequent indications
Abdominal pain 121
Irregular bleeding 40
Primary infertility 15
Breast pain 9
Uterine Infection 41
White discharge 60

Relevant diagnostics
Uterus bicorn 1
Uterus septation 1
Prolapse 12
Polyps/Myoma/Fibroid adenoma 10
Cervical Carcinoma 2
Ovarian cancer 3
Breast tumor 2
Cesarean 1

One case of fetal death could be defined in time and the mothers live could be saved due to immediate surgery

17 surgeries have been realized during the camp and another 23 surgeries have been planned. 30% of the surgeries can be realized in Kekri, all the other surgeries need to be realized in dedicated centers in Kota and Jaipur due to a lack of a local anesthetist and surgery material

For a couple of young women we could submit the nice message of a normal not attended pregnancy.
साइकिलों पाकर खिले चहेरे

राजस्थान में साइकिलों के चलते लोगों के चेहरे खिले गए हैं। दिनांक 1 सांस्कृतिक सैकड़ों लोगों के चलते साइकिलों पर खिले चहेरे दिखाई दिए। लोगों ने साइकिलों की दौड़ कर एक अन्य तरीके से खुशी जतायी।

चित्रित रेगिस्तान के ऑपरेशन आज से

अंतरराष्ट्रीय महिला रोग विकिस्मा शिक्षा

अंतरराष्ट्रीय महिला रोग विकिस्मा शिक्षा अभियान के अंतर्गत अंतरराष्ट्रीय महिला रोग विकिस्मा शिक्षा अभियान में एक अद्वितीय अभियान आज से शुरू हो गया। अभियान के अंतर्गत अनेक महिलाओं को रोग विकिस्मा शिक्षा प्राप्त करने का मौका मिला। अभियान के उद्देश्य को पूरा करने के लिए महिलाओं को रोग विकिस्मा शिक्षा के लिए समय प्रदान किया गया।
THANKS TO THE PARTNERS WHO HELPED US TO MAKE THIS HAPPEN

GMP Foundation - Germany
The Foundation was established in 2012 by Dr. Shashi Praetorius together with Dr. Dietrich Hueck, Princess Dr. Michaela Wolkonsky, and Michelle Woodbridge.” We are a charity foundation helping people in the mountain villages and rural areas in northern India. Clean drinking water, Hygiene, medical care, sports & health - these are the four pillars of our commitment.

Trice Imaging - San Diego
The simplicity of medical imaging, everywhere
A company on a mission
We are here to provide a faster, affordable and more efficient way for physicians to collaborate and communicate medical images from even the remotest areas.
Private Company - Founded in Stockholm Sweden, Spring 2009 - HQ in Del Mar, CA Offices in Stockholm, Sweden and Munich, Germany

Philips – Global
At Philips, we strive to make the world healthier and more sustainable through innovation. Our goal is to improve the lives of 3 billion people a year by 2025. We will be the best place to work for people who share our passion. Together we will deliver superior value for our customers and shareholders.
Building upon a rich heritage of innovation
Philips foundation and their commitment:
Seeing the world through the eyes of those most in need. So we can change it.

BHARAT VIKAS PARISHAD – India
Established in 1963, Bharat Vikas Parishad is a service-cum-sanskar oriented, non-political, socio-cultural voluntary organisation. It is dedicated to the development and growth of our country in all fields of human endeavour - cultural, social, academic, moral, national and spiritual - by promoting a sense of patriotism, national unity and integrity.
Our Mission is to organise the elite, intellectuals and the well-to-do citizens and to motivate them to serve our poor, disabled, illiterate and ignorant brethren not as an act of charity but in the true spirit of our cultural tradition of service as duty.
**Sawai Man Trust**

Sawai Man was an elite corps of Jaipur. This unit was the personal bodyguards of the Maharajas of Jaipur well over 500 years, since the inception of the Jaipur State dating back to 1527 A.D. It has a proud history & holds about 75 battle honors. The has been the ancestral bodyguards of the Maharajas of Jaipur for over 500 years until 1951, when the unit was integrated into the Indian army on behest of Maharja Sawai Jai Singh. The Sawai Man Guards under the Indian Army then became The 17 Raj Rif (Sawai Man) of the Rajputana Rifles, the senior most Rifle Regiment of the Indian army.

Sawai Man Trust is run by the ex-servicemen of the 17 Raj Rif (Sawai Man) for the welfare & well being of its men & their families.

The Sawai Man Trust has been initiated to serve the greater good on a broader base including also the local not-ex-army population where veterans and their families settled especially in the rural areas of Rajasthan.

Lt.Col. Durga Lal Regar/Retd. and Lt.Col. Vijay Singh Thapa/Retd. were active participants and also providing constant vigilance through the entire duration of the Kekri medical camp.
Participants during the camp

**GMP Foundation**
Dr. Shashi Praetorius  
*Founder and President*

**Trice Imaging**
Dagmar Nuber  
*Business Development Manager*

**Government Hospital KOTA**
Dr. Shivratan Singh Rathore  
*Chief medical Director*

**Doctor**
Dr. Fattah Charai  
*Surgeon Gynaecologist Obstetrician  
Givors Hospital Center (Lyon –France)*

Dr. Pascale Sonigo  
*Radiologist Specialized in Foetal and Pediatric Imaging  
Private Practice (Paris – France)*

Christoph Langenstein  
*University Hospital (Frankfurt Germany)*
Some impressions
The medical camp began and ended with a prayer to the Hindu deities to bless our mission and ensure the success of our medical camp in Kekri.