

# A Friend in Need ■■■■ Thank You for your support



### From Design to Reality!

Once the foundations were laid and the basement was built, the floors are rising rapidly!



A few years ago, the *Rotary Club of Hendon* became friends with surgeons at the Tarabai Desai Eye Hospital in Jodhpur, which treats thousands of the poorest people in India afflicted with cataracts. Recognising how much needed to be done for the hospital to carry on its invaluable work, Hendon Rotary created a special charity, *Friends of the Tarabai Desai Hospital* to support the fight against avoidable blindness.

Eye Camps are well known but many eye operations really are better performed in a hospital environment. Delicate surgical equipment does not lend itself well to being carried from village to village and the infection factor is also important. So the idea of 'In-Reach' Eye Camps was born. The hospital still holds 'Out-Reach' camps, but special cases are selected and taken to the hospital by bus. After treatment and a short stay patients are returned to their villages. This is now well tested and works well.

To improve and expand this service and to create much needed space and additional facilities in the hospital, plans had been drawn up some time ago but building permission eventually lapsed because of lack of funds. It was then that 'THE FRIENDS' set to work and, with the generous assistance of private individuals, Rotarians from these islands and round the world and in particular, a UK based Trust who listened to our plea, the task of amassing the funds to build a three storey annex to the hospital started in earnest.

We began to despair of finding this much money but the good news is that we have achieved it and the building work is in full swing! What seems like a miracle has been brought about by generosity from so many and in some cases, quite extraordinary sources. A massive THANK YOU is due to all our Friends.

Soon the building will be ready for occupation and with it new needs emerge for which we need funds to continue our fight against avoidable blindness.

So what next? We now require more help for new instruments and general equipment to make the new wing truly functional. Will you help? We need more slit lamps and surgical microscopes. See the list on page two. Our initial target is £50,000 for much needed equipment. Please help. Call me if I can answer any questions. Perhaps through a group initiative you can raise funds to buy one piece of the equipment needed.

**Gunter Heyden, Trustee & Chairman**

Email: [eyecamps@securitworld.com](mailto:eyecamps@securitworld.com)

tel: 020 8266 3334

## Counting up! 23 Eye Camps held since April 2007

Place	Examined Treated	Operations Performed	Place	Examined Treated	Operations Performed
Rohit	297	20	Nagorigate	95	11
Mathania	372	37	Pipar	431	13
Balesar	222	16	Veerni	280	17
Olvi	279	14	Bhatinda	210	21
Samdari	189	8	Kalyanpur	9	6
Kosana	106	4	Mahamandir	120	5
Bucheti	221	24	Soorsagar	55	7
Rotary Club	21	4	Barmer	102	31
Pali	534	53	Siryari	438	41
Udaimandir	323	15	Chandavla	107	12
Peelwa	174	35	Udaimandir	57	12
Degana	614	71	Popowas	414	32
Guljarpara	175	13			
			<b>TOTALS</b>	<b>5,955</b>	<b>494</b>

### And where do we go from here?

**11 more camps** are planned for November and December! in Harosolav, Sojat, Banar, Veerni, Khariya, Chandpole, Rohit, Salawas, Chainpura, Jodhpur and Khushalpara.

## Our new extension is ready to occupy in March/April 2008!

## New Essential Needs

**The Ideal Opportunity!  
Start a Group Project  
and donate one of the items!**

**A**n ideal opportunity for our friends to start a fund-raising project to donate a piece of the equipment we need so badly for the new extension of the hospital.

**YOUR NAME** will be on every piece you donate!

We are starting with bare walls and funds are needed for everything from beds to medical equipment. Here is a list of the equipment which is very essential to our needs. Please help. Perhaps you can set up a group to raise funds or make it a project of **your** Rotary Club.

**Items Needed - we list single items but the hospital requires a number of some of the units!**



### Slit Lamp - Biomicroscope

Estimated price £ 5,625 each (Need 2)

An instrument with a high intensity light source that can be focused to shine as a slit. It is used in conjunction with a microscope facilitating the examination of anterior segments of the eye. Combined with special lenses the examination of retinal structures is accomplished in detail.



### Indirect Ophthalmoscope

Estimated price £ 1,775 each (Need 2)

Providing multiple wavelengths it enhances the therapeutic effect. The instrument has coaxial optics and is fitted with high-visibility fixed physician filter to provide a clear view of the retina. It enables easier access to the far periphery of the retina.



### Corneal Topography Unit

Estimated price £ 18,400 each (Need 1)

A computer assisted device to establish the precise shape of the cornea. Needed for cataract and corneal surgery.



### Autokeratometer

Estimated price £ 1,500 each (Need 2)

This is to measure the curvature and reflection of the anterior surface of the cornea. It is required to calculate the intra-ocular lens power for cataract surgery.



### Retinoscope

Estimated price £ 275 each (Need 4)

An optical device used to illuminate a patient's retina during retinoscopy to obtain an objective measurement of the refractive condition of a patient's eyes.



### Lensometer

Estimated price £ 825 each (Need 4)

A lensometer is an instrument used to measure the power of an existing lens. An optician uses a lensometer to determine the prescription of a patient's eyeglasses.



### A set of lenses for Microscope

Estimated price £ 125 a set (Need 4)

This is a set of mandatory lenses needed for use with slit lamp biomicroscopes. They help to provide a view of the interior of the eye [retina and angle of anterior chamber].

**AND.....**

We also need to buy additional beds and replace old ones.  
**Sponsor a new bed in your club's name - for only £150**

## Medicines for Ghana



I came back from my volunteer assignment knowing that there was a serious lack of basic medicines at the Eye Clinic I served at. Even simple eye surgery was very difficult in such circumstance.

So our hospital decided to send some essential medical supplies to the Eye Clinic of the Tamale Teaching Hospital. This included pre and post operative drops good for about 300 cataract surgeries. Our local Jodhpur Rotary Club transported the medicines to The Ghana Embassy in Delhi who then arranged to transport the supplies free to Ghana.

I am happy to inform you that the doctor in charge at the Ghanaian eye clinic has confirmed that the supplies have reached Ghana safely and thanked us for our aid. I am very happy to share this news with you. Our picture shows Divisional Commissioner, Jodhpur, inspecting the trunk-full of medicines, surgical CDs and books before they were sent.

*Dr. Sanjiv Desai - Tarabai Desai Eye Hospital*

## Welcome to more Volunteers

We had the good fortune to host two volunteer eye specialists for a ten day period. Dr Samira Bhatti, a pediatric ophthalmologist from Leicester in the UK and Dr Sarit Lesnik, a Vitreo-retina specialist from Amsterdam in Holland. They participated in free cataract surgery at our eye camps at Siryari village and also at Chandosi village.

These were the first two super-specialty camps in the state of Rajasthan! One camp was organised for **Pediatric Ophthalmology** and the second camp for **Retina Diagnostics**. There was an overwhelming response from patients bringing small babies with childhood eye problems to the elderly people with retinal problems.

Our experts also presented lectures at the **Jodhpur Ophthalmic Society** and interacted with other local eye specialists.

Dr Sarit Lesnik - Amsterdam

Dr Samira Bhatti - Leicester



### Reflections on Humanitarian Aspects

It could be the story of an old lady, a baby or a worker, each one shows that without eyesight the poor are even more vulnerable. Often they cannot look after themselves, unable to work they are at the mercy of their family members. Your humanitarian considerations in sending funds to keep our hospital going is of prime importance to help these cases and every donation goes 100% to better the lives of these unfortunate people. Without your help they would just sit and await their fate instead of being returned to a worthwhile meaningful life. It is worth reflecting on some of the reports on this page to understand the full impact.



#### From Eye Camp Popawas

Our Ophthalmic assistant Mr. Babu Lal organised a refraction clinic at Popawas where 414 patients were examined. Thirty-two cases were sent for surgery to the base hospital.



Panchi Bai, a 70-year-old one-eyed woman, had lost her right eye about 10 years ago. Her left eye had become blind for the past 2 years. She would sit in the corner of her hut while her son went to work at the stone quarry and her daughter in law went to work in the field. Her small grandson would keep her company for part of the day, the rest of the time she sat quietly in the corner awaiting her fate.

She came to us at the camp and was operated in the LE with complete recovery of vision. Her vision with glasses in the eye was 6/6 on the 4th day after surgery.

**GRATEFUL TO YOU  
our donors and the  
wonderful staff at the  
Tarabai Desai Eye  
Hospital!**



#### Kavita - Our Happy Mother



Pregnant 22 year old Kavita was blind in both eyes. She had mature cataracts and could only count fingers close to her face.



Kavita comes from a poor family and could not afford an operation. She had become withdrawn and scared at the thought of delivering her baby whilst being blind and feared the survival of the child she was carrying.

She was afraid that her husband might throw her out of the house especially if her child would be a girl. When she came to us she was in a state of panic.

She was operated in the right eye in an out-reach camp. The left eye was operated six months later after she had given birth to a baby daughter. What made the surgery in both of Kavita's eyes complicated was that she had tissue missing in the iris [iris coloboma] and in the lens [lens coloboma]. A special technique was used to treat the eye in which Lensectomy-vitrectomy procedure was done and Epicapsular lens implant was inserted. Kavita regained a vision of 20/70 in both eyes.

Laser capsulotomy was scheduled for a later date to increase her vision even further because she has pre-existent calcified plaques in both eyes.

Kavita, delayed the Laser treatment as she had gained sufficient vision to go about the daily chores. She returned to us for YAG laser capsulotomy a short while ago. She had posterior plaque due to which she did not have full recovery of vision. The final treatment opened a window in the plaques in both eyes.

**She now has near perfect vision of 6/9 in BE. That's another success story in our battle against unnecessary blindness. Our picture shows Kavita, one happy mother!**

Visit our website: [www.eyecamps.org](http://www.eyecamps.org)

### Rotary Club Donors - We are grateful for your support A Big Thank You to our friends from the Rotary Clubs of:

Andover Rotary Club  
Anstruther Rotary Club  
Armagh Rotary Club  
Aylesbury Rotary Club  
Banbridge Rotary Club  
Bangor Co Down Rotary Club  
Bangor Gwynedd Rotary Club  
Barnet & East Barnet Rotary Club  
Belper Rotary Club  
Bingham & District Rotary Club  
Bolton Le Moors Rotary Club  
Bransgrove & District Rotary Club  
Brentwood Breakfast Rotary Club  
Builth Wells Rotary Club

Chingford Rotary Club  
Crickhowell Rotary Club  
De La Manche Rotary Club  
Doncaster St Leger Rotary Club  
Edenbridge Rotary Club  
Enfield Rotary Club  
Evesham Rotary Club  
Exmouth Rotary Club  
Friern Barnet Rotary Club  
Haywards Heath Rotary Club  
Hendon Rotary Club  
Hyde Rotary Club  
Ilfracombe Rotary Club  
Johnstone Rotary Club

Kenilworth Rotary Club  
Kennington Rotary Club  
London Rotary Club  
Louth Rotary Club  
Maesteg Rotary Club  
Maesteg Inner Wheel Rotary Club  
Maryport Rotary Club  
Mill Hill Rotary Club  
Monmouth Rotary Club  
Neath Rotary Club  
Nottingham Rotary Club  
Pinner Rotary Club  
Port Talbot Rotary Club  
Radlett Rotary Club

Redbridge Rotary Club  
Retford Rotary Club  
Rushden Chichele Rotary Club  
Ryde Rotary Club  
Saltash Rotary Club  
Sandbach Crosses Rotary Club  
The Channel Rotary Club

#### FROM OTHER COUNTRIES:

Bremen GERMANY  
Ferne-Voltaire SWITZERLAND  
Livingston USA  
Orleans FRANCE

### Helping Hands - More Service From Our Volunteers



**Dr. Miguel Pacheco Fuentes** honoured with a special turban.

**Ophthalmologist Dr. Miguel Pacheco Fuentes** from Santiago, Chile, was a visitor and volunteer eye surgeon at the hospital from 24 August to 5 September 2007. He is a young surgeon full of innovative ideas. He came to the hospital as a volunteer from 'Unite for Sight-USA'. During his visit seven Eye Camps were held. [see inset]. Two of the camps were quite close

to Jodhpur while the others were one to four hours drive away. All were In-reach camps where patients were screened on site but transported to the hospital at Jodhpur for surgery. The camp at Pali was an outreach camp where surgery was performed onsite.

#### Busy at Seven Camps

At these camps, 2,346 patients were examined and treated. In addition 211 patients were admitted and operated for cataract. All surgery patients received intra-ocular lenses in their eye during surgery. The onsite surgery at Pali was conventional microsurgery, whilst the majority, which was done at the base hospital, was done with the state-of-the-art Phacoemulsification technique.

Location	OPD Exams & Rx	Cataract Surgeries
Pali	534	53
Peelva	174	35
Udaimandir	323	15
Degana	614	71
Gulzarपुरa	175	13
Nagaurigate	95	11
Pipar	431	13
<b>Total</b>	<b>2346</b>	<b>211</b>

The greatest advantage of having volunteers at the hospital is that with extra hands more can be accomplished. We are very grateful to Dr. Pacheco for his services and to *Unite for Sight* for their partnership in our work.



Also see our website: [www.eyecamps.org](http://www.eyecamps.org)

**Kajal Karia from London** spent two weeks as a volunteer in Jodhpur. She travelled to six schools and examined 800 children. All the children had retinoscopy and some 150 sets of glasses were prescribed.



Practically all children came from underprivileged backgrounds. Kajal wrote that her work was very satisfying and also thanked *Prakash Bhai of the local Lions Club* for his help to organise the school visits. He had given the schools Snellen Charts in advance so that the teachers were able beforehand to test and make notes of the childrens' vision. Kajal then saw each child with a reduced vision.

Due to a shortage of equipment at the hospital, she was happy to have brought her own retinoscope and ophthalmoscope together with Snellen Charts in English and in Hindi from London. With the trial set of lenses which the hospital provided she made excellent progress and proved to be a very valuable volunteer.

Kajal in summing up about her visit said "The experience of the eye camp was one I will never forget. To see the children smile when they could see was a wonderful reward for everyone's hard work. I had always wondered what contributions an optometrist could make at an Eye Camp? The answers were given to me when the children smiled and when I knew I had contributed to giving the children the gift of sight."

Since her return to the UK Kajal and her friend Sunita signed up for a charity run at Windsor Park. They aimed at raising £1000 for much needed instrumentation at the hospital. But they raised well over £2,000! A wonderful achievement. Thanks again Kajal and Sunita.

You can still add! go to: [www.justgiving.com/kaj-sunita](http://www.justgiving.com/kaj-sunita)



**Pappu Bai**, the 35 year old mother of three, had been operated in the LE elsewhere about 6 years ago and had not recovered her vision at all. Her vision in this eye was only a perception of light. There was a dense after-cataract. The vision in her other eye was normal. With no binocularity she could not judge distances, or pass a thread through the eye of a needle while sewing and also had difficulty in drawing water from the village well. We performed a special type of surgery called vitrectomy-membranectomy. With the help of a vitrectomy cutter we made a window in the dense white membrane that was present in the pupil of her LE. Prior to this we implanted a lens in the eye. The patient came for her final follow-up and now has a best-corrected vision of 6/9 plus and faces no visual disability. She can now do all her household work confidently and purposefully. We are very happy to have helped her to regain her vision.