

# Mountaintop Medicine

OKHALDUNGA HOSPITAL IN NEPAL



by NILE SPRAGUE

"I would have died if not for the treatment I received at the Okhaldunga Hospital," whispered 12-year-old Pema Renji Sherpa.

Pema suffered a head injury when he fell from a high cliff. He was carried unconscious four hours walk to the hospital. After X-ray and examination, it was determined that he had a fractured skull with

---

Nile Sprague is a freelance photojournalist from California who has lived and traveled widely in the developing world. His father, Sean Sprague, is an award-winning photojournalist who as also been featured in *Response*.

some depressed fragments, which should ideally be treated in a specialized neurosurgical center. However, Okhaldunga is very remote, with no roads and four hours walk to the nearest airport, which has only irregular flights. Thus, Pema could not be referred to another center.

The patient's condition was rapidly deteriorating, and the doctors wished to do anything they could to save him. Neither had experience with cranial operations, but they had to operate, or the patient would die. They carefully removed bone fragments some brain tissue, and made two burr holes to

remove intracranial clots. The procedure took nearly five hours.

There was little change immediately after the operation, but after many prayers and the hard work of dedicated Norwegian physiotherapist Ashild Bøhler, six days after the operation, Pema opened his eyes. By the 10th day he was able to stand, and finally after 29 days of care at the hospital he was able to walk and returned home with a new lease on life.

Today, Pema is a normal, healthy 12-year-old boy. He goes to school, does household chores and plays with his older brothers. He has mild brain damage, but Pema



is still able to keep up in school and functions at full physical capacity. The daring ingenuity of the doctors saved his life.

"If I get the opportunity, I would like to go abroad for my education and return to Nepal to serve my community, possibly as a doctor," Pema said. "I'm very thankful to the hospital and doctors who gave me a second life."

#### **Remote health care**

United Methodist Women-supported Okhaldunga Hospital, founded in 1962 by British medical practitioner Dr. James Dick, is located atop a mountain in an iso-



*Opposite page, left, Pema Renji Sherpa, left, a patient at the Okhaldunga Hospital in Nepal, and his older brother. Above, the landscape of Okhaldunga, a remote hilltop town in Nepal. Left, a patient is carried to the hospital in a human ambulance. Photos by Nile Sprague.*



Nile Sprague

lated part of eastern Nepal, at an elevation of about 5,300 feet. Okhaldunga is two and a half days by bus from Kathmandu and an additional four-hour walk to the top of the mountain where the town is located. The hospital serves a population of more than 160,000 and treats around 20,000 patients each year. Services include surgery; pre- and postnatal care; community outreach and support to local clinics; nutrition, birth spacing and hygiene education; and financial assistance for medical treatment.

The remote Okhaldunga Hospital is making an immense difference in the lives of thousands of people living in this underprivileged region, improving their quality of life, health and happiness. It has a reputation as one of the best hospitals in Nepal.

“Living in Okhaldungha, one is very isolated and must sacrifice many normal amenities and comforts,” Dr. Arbin Joshi said. “Transportation and communication are difficult, electricity is scarce, and

one is far from their family and friends. However, living in such a beautiful place, enjoying the sunshine, nature and clean air, and more importantly, providing vital life-saving services to this poor, remote, underprivileged community is immensely satisfying to my heart and nourishing for my soul.”

The hospital serves five neighboring districts, with patients walking for up to two days specifically for treatment at the Okhaldunga Hospital. When a patient is unable to walk, they are carried by their friends and family on the treacherous mountain trails, either on a stretcher or in a human ambulance — the patient is carried in a basket on a man’s back.

The hospital does not have the storage facilities necessary to keep blood, but it has a very innovative solution. Members of the Okhaldunga Youth Club are available 24 hours a day to provide blood, voluntarily and unpaid — a “living blood bank.” Night or day, they can be called upon to donate blood,

providing vital infusions that save countless lives.

“I was born in the country, and I have spent my whole life walking up and down these mountains,” said Ram Budhathaki, team leader of the hospital’s public health unit. “I’m genuinely happy to be working here, and deeply satisfied to be serving my community.”

### **Treating the community**

One day, while Mankhumari B.K., 60, was working in the field collecting grass for her buffalo and cattle, she had a sudden intense pain in her abdomen. Despite the severe pain, she continued working for another two days. However, she was soon unable to walk, was persistently vomiting and had a fever.

Ms. Mankhumari was carried to the Okhaldunga Hospital on a stretcher. Her condition was identified as peritonitis — a perforated appendix — and treatment immediately rendered. The procedure was not complicated, but if she had not received treatment immedi-

*Opposite page, Mankhumari BK, a patient at Okhaldunga Hospital in Nepal who received life-saving care at the United Methodist Women's Mission Giving-supported facility.*

ately, she would have died.

Ms. Mankhumari's procedure, medicine and hospital stay cost 31,000 rupees or approximately \$450. She paid about half of this, and the hospital's social services department provided 15,000 rupees to cover the rest. The amount of the subsidy was calculated based on an assessment of her land holdings and income level.

"I am very poor and living a difficult life," Ms. Mankhumari said. "My husband cannot work much and my sons have left home. Without treatment for my condition, I surely would have died, and if not for the financial assistance from the hospital, I would have had to sell my land to pay for the treatment. My life and livelihood have been saved by the kind people at the Okhaldunga Hospital and by the grace of God."

"When I was a child, my life was miserable because of my disabled legs," 21-year-old Shukre Mangranti said. Mr. Mangranti was born with severe clubfoot and for the first 17 years of his life he was unable to walk. He crawled on his knees and elbows, which were perpetually covered with sores.

Other children treated him terribly, teasing and sometimes beating him. His father died when Mr. Mangranti was 1, and his mother was unable to adequately provide for him and his two siblings with her menial income as a laborer.

Mr. Mangranti would beg or steal to survive, and had an extremely difficult existence. In 2000 he was referred to a specialty hospital in Kathmandu for surgery at the advice of the doctors at the Okhaldunga Hospital. The doctors



Nile Sprague

assisted with the entire process, arranging the procedure, personally providing the necessary finances for transport and surgery, and providing rehabilitation and physiotherapy following the surgery.

"I was very afraid to have the surgery," Mr. Mangranti said. "I thought I might die. But the doctors counseled me and soothed my fears. I trust the doctors, so I followed their advice."

Mr. Mangranti had two operations a year apart. Following the final procedure and ensuing physiotherapy, he was able to walk fully upright. He is now employed at the hospital as a tailor, mending garments and sheets. After receiving basic literacy training, Mr. Mangranti can now write his name and the Nepali alphabet.

"Now I am working in the hospital, I support myself, I am independent, people treat me well and I get more respect," Mr. Mangranti said. "I am eternally grateful to those who helped me. Now every day is a joy to live."



Nile Sprague

*Top, a doctor performs minor surgery at Mission Giving-supported Okhaldunga Hospital in Nepal. Bottom, Shukre Mangranti, a hospital patient who now works there.*