#### **April 2000**

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## **Message from the President**

This special mini-edition of **The Camel Express** is being sent your way in recognition of both the realities and the potential of modern, electronic communication. In the past, since the debut of the **FON** website in January of 1999, we posted the electronic version of the newsletter on the site at the same time as we mailed out the hardcopy to those who do not have access to the internet - in other words, on a quarterly basis.

One of the things that this has meant is that it appears to many people, perhaps yourself included, as if the website sits there unchanged for three or four months at a time - even though changes and additions are often made to the material available via the site's many internal links. So, we will try to post at least a mini-version of **The Camel** every month or six weeks, with the usual full newsletter continuing to be released on a quarterly basis. The next full edition will be out in late May/early June. We'll try to get another mini-edition out to you in mid-summer, followed by a full edition in early September, etc.

The material in this edition also speaks to the potential inherent in the site for timely communications - that is, of its potential to keep you informed on recent developments in Niger (see Meningitis Outbreak in Niger: Help FON & UNICEF Niger Respond to Vaccine Shortage) and to elicit your support in times of crisis as well as for on-going projects (see BU/FON - Chewable Vitamins Project - Update III: April 2000).

You will be touched by the excerpt from Chris Zoolkowsky's journal and, we hope, both informed and excited by the other updates and additions to the site. We've kept Jane Bonin's letter on the front panel, for those of you who will be seeing it for the first time. There will be a new PC Niger piece along with the late spring edition.

Enjoy the newsletter. Stay in contact. And please, please join Friends of Niger.

Jim Schneider

President

# - Project Update/April 2000 -

At the end of this month, Sue Rosenfeld - Boston U's staff person in Niamey and the person whose initiative led to the creation of this project - will be heading back to Niger carrying the second shipment of children's chewable multivitamins purchased with donations to this project.

Final figures are not in, but this shipment will likely be a bit larger than the 13,520 tablet shipment carried by Chris Zoolkowsky last December. As with the December shipment, the tablets will be divided between the Pediatrics Ward of the National Hospital in Niamey and the SIM Hospital in Galmi, near Madaoua.

The next shipment is scheduled for June of this year - when Sue again makes the round trip between Niamey and the States. Financial contributions, in checks or money orders, should be made out to **Friends of Niger** and sent to:

Vitamins c/o Friends of Niger P.O. Box 33164 Washington, D.C. 20033-0164

As always, all contributions will be earmarked for the bulk purchase of chewables.

Chris Zoolkowsky and his spouse Helene Warkentin, both Niger RPCV's 1988-'91, recently returned to Niger - along with their young daughter. Chris was going back to serve his medical iinternship at the SIM hospital at Galmi, near Madaoua. You may recall that when they went to Niger in December, they carried along a suitcase full of children's chewable multivitamins purchased with the donations of people like yourself. (See Chewable Vitamins - Update III for recent developments in this project which supplies vitamins to hospitals in both Niamey and Galmi).

Recently Chris sent me the following excerpt from the journal he is keeping during his stay in Galmi. I asked if he would permit me to publish the excerpt in **The Camel Express**. He agreed. As I explained to him when I asked for permission, I wouldn't normally ask but for me his experience served as a poignant reminder of the reality of much of life in Niger. It seemed to me that it was the kind of reminder that we all need from time to time - even those of us who love Niger and its people. Over time it becomes quite easy to mostly recall the good things from our time in Niger and to relegate the painful memoies to the often more comfortable depths of the subconscious.

# Joy, Despair, Hope, Defeat an excerpt from Chris Zoolkowsky's Galmi Journal

This business can really put one's emotions on a roller coaster ride. Yesterday, it felt like they were on one of those rides at Disneyland that they won't let you go on if you're pregnant or have heart trouble.

The joy of hearing Aboubacar respond to my questions after admitting him 2 days earlier in convulsions and a near coma. He is a highly respected funtionaire who tested positive for HIV 5 years ago. We thought this might be the end for him. It looks like a CNS infection. Probably fungal. The Valium slowed down his convulsions, but the lumbar puncture was still difficult. Neither I nor Hyon, the Canadian doctor, could get a useful specimen of spinal fluid. Had we succeeded, we likely wouldhave seen streptococci or meningococci because he looks well on the road to going back to his teaching job since being on empiric IV chloramphenicol.

Then going to clinic and feeling my heart get heavy while seeing a young woman with several months of diarrhea, fever, and weight loss. I sent her to the lab and she came back with her card marked positive next to the HIV test. I asked where her husband is. She doesn't know and hasn't seen him in two years. I try to explain to her the meaning of her test result. The translator interrupts me and says I shouldn't tell her. She would just get upset. It'sbetter if they don't know. But this is one time when I don't see any sense in conforming to cultural norms. "Wouldn't you want to know?" I ask my colleague. Turning back to the patient, I try to explain how the disease is transmitted. "You shouldn't sleep with men anymore," says the translator, who rarely translates what I say literally. The once attractive 22 year old asks how anyone would want to sleep with her when she is always sick like this. I tell her that we can try to help her feel better temporarily, but that we have no medicine to make her better. There are no anti-retroviral drugs or protease inhibitors here, but I don't tell her that because those words are not translatable. I send her away with Bactrim, aspirin, and the standard wish, "Allah shi ba ki sa'a."

I go back to the hospital to see Abdou. There's no medical reason for me to see him, I just want to see him and his son smile at me again as they do every time I walk by his bed. It works. Their grateful words and expressions lift my heart from the pain of that last episode. Abdou came in just 36 hours ago with 2 weeks of fever, cough, & dyspnea. I ushered him and his son into the exam room and took his card from him to read. The person who screens the patients before they see the doctor had written on it, "Abdou from Iskitta; 30 years old." I took a second look at him. "How many years do you have?" I asked. "Thirty," he said, as his adult son nodded. "During which year did your mother give birth to you?" I pressed him further. "Doctor, have patience," he said in a slow, tired–sounding voice. "In the days when my mother gave birth, nobody gave you a card to help you remember the year." "I have more than thirty years," I said, pointing to my robust youthfulness. "Do you think you are more of a youth than me?" They both laughed at that suggestion. "I think you probably have about 60 years. Could that be true?" "Yes," they nodded, looking at each other. "You're the doctor. If you say I have 60 years, then I must have 60 years." But that chuckle was strained.

Abdou was not comfortable. He was tachypneic, tachycardic, febrile, and had rales and increased voice transmission in his right upper lobe. TB was certainly a close second in the differential, but inconsistent with only two weeks of illness. He also didn't have that wasted TB look. I thought a right upper lobe pneumonia was more likely, but still unsure enough to justify taxing them with the burden of having to pay 10 dollars for a chest x-ray. That's about a week's salary for the average person. Understandably, some people complain when you order one. Ironically, some people protest when you tell them they don't need one, like the woman who insisted on an x-ray of her head because she'd been hearing voices in there. Neither Abdou nor his son complained. An hour later, feeling the satisfaction of seeing mydiagnosis confirmed radiographically, I studied his film showing a complete white-out of the entire right upper lobe. The lab tech handed me a slip of paper with the results of the tests I had ordered. Malaria smear: negative. WBC 42,600. 95% neutrophils, 5% lymphocytes. Bad infection. They didn't complain, as some do, when I told them he should stay at least one night in the hospital. Yesterday morning, which was only 12 hours and two injections later of 2,000,000 units of penicillin G, he was comfortable, afebrile, and smiling at me like I was the smartest doctor in the world. Today I sent him home with a week's worth of penicillin and some iron tablets. Victory.

But a few beds over is Ibrahim, the 18 month old with kwashiorkor and possible nephrotic syndrome. He had been getting more and more edematous all week and none of our attempts to reverse the process were working. His weight had gone from 8 kilograms to 10 kilograms in 2 weeks. Yesterday it had gotten to the point where his skin was starting to break open in places due to the fluid pressure behind it. This morning I came in to find his bed empty and his death certificate waiting for me to sign. Where is his trusting mother? I'm sad she's not here for me to express my condolences. I'm glad she's not here so I don't have to face her.

Joy, despair, hope, defeat ... all within so short a time ... all in the same building ... all to the same person.

Like a roller coaster.

Christopher Zoolkoski Hopital de Galmi Galmi, NIGER

# Meningitis Outbreak in Niger -Help FON & UNICEF Niger Respond to Vaccine Shortage -

Recent reports of a meningitis outbreak in Niger have been confirmed by data released earlier this month by Niger's Ministry of Public Health and forwarded to Friends of Niger by UNICEF Niger. These reports suggest that the outbreak has reached national epidemic proportions, with the capital city of Niamey and nine neighboring health districts being the hardest hit.

The situation is worse in Niamey were the number of new cases in the first week of April (682) showed a dramatic increase from those reported during the last week of March (112). Nationally the increase from 1195 to 3097 new cases over the same period brought Niger to the epidemic threshold - 19 cases per 100,000 population.

The mortality rate is 8.6%.

UNICEF Niger is working with the Ministry of Public Health, WHO, French Cooperation, Belgian Cooperation, GTZ and the Muslim Association of West Africa to define needs and to respond. The original estimates - which called for one million doses of meningitis vaccine as well as syringes and chloramphenicol - now appear to be short and additional funds will be needed for the purchase of these supplies and to cover the cost of the social mobilsation necessary in order to successfully carry out the immunization program.

FON has been working with Mary Roodkowsky, Director of UNICEF Niger, and Julie Burke, former PCV and current UNICEF staff person in Niger, in an effort to set up a facility at the New York office of UNICEF which would receive contributions intended to go specifically to the purchase of vaccine and related supplies.

In the meantime, financial contributions, in checks or money orders, should be made out to **Friends of Niger** and sent to:

Vaccine c/o Friends of Niger P.O. Box 33164 Washington, D.C. 20033-0164

**Friends of Niger** will ensure that donations for this purpose are passed along to UNICEF as lump sums and that the money goes toward this specific campaign.

## Free Donations & Other Website Changes and Additions

1. Click on the button at the top of the left-hand column on the FON home page, or click on the **On Line Donations** link which can be found further down the left-hand column under **Other Great Links**. Either action will take you to a page with information on how you can contribute - free - every day - to a number of

humanitarian causes related to world hunger, refugees, the ecology, the homeless, etc.

- 2. Click on the little goldfish near the top of the right-hand column, and the content of the page will be translated more or less accurately into French. Our webmaster, Jai Evans, is working on an even better service. This one is passable and at least allows French-speaking people to get a better idea of what we are trying to say.
- 3. Patrick Thomas' site, with its focus on recyclable African tools, has been added to **RPCV Pages**, which can also be found along the left-hand column.
- 4. Further yet down the left-hand column under **fOn-Line** check out the latest messages on the <u>FON</u> <u>Bulletin Board</u>. Post a message yourself.

### **Credits and Other Information**

This edition of **The Camel Express** was prepared, produced and distributed via hardcopy, e-mail and website posting with the contributions of Jane Bonin, Jai Evans, Sue Rosenfeld, Mary Roodkowsky, Julie Burke and Chris Zoolkowsky. Please send address changes and corrections, as well as any queries to **The Camel Express** at any of the addresses below,

The Camel Express is the periodical newsletter of Friends of Niger (FON). FON can be contacted via the post at P.O. Box 33164, Washington, D.C., 20033-0164; by e-mail at <a href="lorenz3@magi.com">lorenz3@magi.com</a>; and you will find FON on the web at the following Internet address:

www.friendsofniger.org.

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