



Second Quarter Newsletter

April Clinic Pinnacles

Highlighted Case Opportunities-April's medical report focused on two conditions: **Brucellosis**-a bacterial caused by Brucella species that spreads from animals to people in pasteurized milk, cheese, and other dairy products. **Benign Prostatic Hyperplasia (BPH)** is a health issue that becomes more common with aging and produces an enlarged prostate.

One case involved a 29-year-old male named Kagaba who worked at the slaughterhouse. Kagaba began complaining of severe joint and back pain along with high fever for an extended period. HIV, Malaria, and Typhoid tests given were negative, but his Brucella Agglutination Test (BAT) was positive. His Complete Blood Count (CBC) test showed he had a severe bacterial infection. Kagaba was treated with antibiotics and returned to the Clinic for a follow up.

There are many treatments for an enlarged prostate that might include medicines, surgery, and procedures with small incisions. BPH treatments depends on the size of the enlarged prostate, your age, and overall health status. Three clients were diagnosed with BPH all men were above age 60. Amos, a 64-year-old male, was brought into the Clinic because he could not pass urine for two days. He had a distended abdomen and was in severe pain. His history involved several urinary tract infections, and he was not improving. A urinary catheter was inserted to relieve the pain. After a Urinary test and Transrectal ultrasound scan was performed the results were that Amos did have BPH. *The Clinic does not have the equipment to perform a Prostate Specific Antigen (PSA) test, so Amos was referred to the regional hospital for testing and a biopsy.*



John H. and Marie Parrish Medical Clinic

May Clinic Pinnacles

Highlighted Case Opportunities: The conditions highlighted in the May clinic report are **Peptic Ulcer Disease (PUD)**-infections with the bacterium Helicobacter Pylori (H. pylori) with long-term use of non-steroidal anti-inflammatory drugs (NSAID) like Ibuprofen. **Back Pain**-is a leading cause of disability worldwide. The pain can range from a muscle ache to a shooting, burning, and stabbing sensation. The pain can also radiate down the leg.

The Clinic serviced 17 clients with Peptic Ulcers. Six had the PUD infection. They were given further treatment and reported back to the Clinic for follow up. Out of the six, three clients reported back with PUD exacerbation and severe pain. One was Beatrice, who came with extreme pain and semi-conscious. She had a history of five episodes which she unsuccessfully treated with herbal medicines. Beatrice began vomiting blood-streaked vomit and had no appetite. *Without an Endoscopy machine the Clinic could not perform a test to find out the cause of constant PUD attacks.*

Back pain that lasts longer than a week should be presented to a clinic or hospital, especially if you are experiencing numbness or tingling in your legs. May brought in five clients with complaints of back pain. One challenge was with Dorothy, a 54-year-old woman who came to the Clinic with persistent pain that lasted over a month. Dorothy could not stand without assistance. After several tests, the doctor



Second Quarter Newsletter

suggested a referral to the regional hospital. *The Clinic did not have an Electromyography (EMG) Machine to see if Dorothy had a herniated disc or spinal stenosis.*

June Clinic Pinnacles

Highlighted Case Opportunities: Pneumonia and Influenza are highlighted for June's report. **Pneumonia**-an acute respiratory infection and inflammation of the lungs air sacs that may be filled with fluid or pus. This is a life-threatening condition for infants and people over 65 years old. We are all too familiar with **Influenza**. This viral infection also attacks the respiratory system and is commonly know as "the flu."

In June there were 11 cases with severe pneumonia and 29 with basis pneumonia. Valeria was one of the severe clients. She is a 17-month-old girl who was brought in unconscious with a respiratory rate of 50 breaths per minute. She had severe chest in-drawing and a high-grade fever of 104 degrees Fahrenheit. *The Clinic did not have a Vital Signs Monitor to keep track of her temperature, heart rate, blood pressure, oxygen saturation, and respiration.* Valeria later stabilized, regained consciousness, and was given oral medication for home use.

As in the states, Influenza viruses and strains are constantly changing. People at risk are young children, people over 65, pregnant mothers, and those with weak immune systems. Four clients came to the Clinic with mild Influenza. Among them was a 69-year-old male, Isaac, with myalgia, chills, and a temperature of 102.2 degrees Fahrenheit, nasal congestion, a dry cough, and chest pains. Isaac was a hypertensive patient on medication. He was analyzed and given symptomatic management, advised to rest, and drink plenty of fluids.



Needed Medical Equipment

The Clinic needs the following equipment to effectively service clients:

- ❖ Endoscopy Machine: \$1900-\$7000
- ❖ Prostate Specific Antigen Test (PSA):\$2800-\$6100
- ❖ Vital Signs Monitor Machine:\$500-\$1300
- ❖ Electromyography (EMG) Machine:\$1200-\$2600

Anyone with connections to non-government organizations, private companies, individuals, and institutions are encouraged to contact HHCharities at info@hhcharities.org.





Second Quarter Newsletter

Ugandan Children's Report

Unlike our children in the states, the Ugandan children who have completed their primary levels (Primary 1-6) must be tested to see if they will have a seat in Primary 7. They register and have all their requirements in place for the next session beginning May 29th.

But, like our American students, the children in Uganda are cautioned to be very careful and vigilant to avoid acts of homosexuality, which has greatly invaded the schools, especially those who are boarded children. The Children's Manager, Priscilla, visited the children in their school settings to make sure all the 7th level children have chosen their next school to attend. Priscilla also cautioned the children to avoid bad peer groups. These children must also watch out for bad peer groups because some move at night and rape or abuse the children who are out at night.

HHCharities continues to provide funds for the children's **Food Pantry and the girls sanitary napkins**. The headmasters at the schools commended our sponsors because these children are given meals daily at the school. The saving grace is that the Pantry can help to feed the children who have no food at home. Remember, a hungry child cannot concentrate in school to complete their work.

The number of impoverished children continues to grow, especially because of the shortage of job availability. And the children who cannot afford to attend school is steadily on the uprise. Education will take the children out of the circle of poverty and into a future with hope! These children **cannot attend school without financial support!**



Imagine Life Through a Child's Eyes...Sponsor a Child's Education! Ugandan Children's Tuition/Support for 2023 Fort Portal, Uganda

Three (3) Academic Terms/Semesters in the **Ugandan Public Schools:**

- **Term I – February 6th – May 5th (Funds due by Thursday, February 2, 2023)**
- **Term II – May 29th – August 25th (Funds due by Friday, May 19, 2023)**
- **Term III – September 18th – December 1st (Funds due by Friday, September 8, 2023)**

Funds are used for: Tuition, Uniform, Lunch Meals, School Supplies Additional Meals/Clothes

ANNUAL TOTAL-----\$396

Term Payments: \$132 per term

Monthly payments: \$33 per month (Auto Payments can be set up via PayPal auto system or Your Banking Institution)

Payments accepted: Checks (mailed to PO Box 742284, Dallas, TX 75374-2284) Credit Card Payments: via PayPal at www.hhcharities.org Zelle & CashApp: \$Humanitarianhands (info@hhcharities.org)

***Use your Match Program at your place of employment to maximize your giving. ***

95% of your tuition payments are wired to Uganda for the children

92% if paying via credit card payments 3% for charge fees 5% for administrative costs