



First Quarter Newsletter

January Medical Report

Highlights: This January 2023 the report highlights Peptic Ulcer Disease (PUD) and Epilepsy, a neurological disorder. PUD is primarily caused by *Helicobacter pylori* (*H. pylori*) Infection. This bacterium, a sore, mainly stays in the stomach lining or on the small intestine (duodenal ulcer) for survival. It is present in more than half of the people in the world. Epilepsy, a central nervous system disorder, where brain activity becomes abnormal causing seizures or moments of unusual behavior and sometimes loss of awareness. Epilepsy can be a result of genetic disorder, or a brain injury caused by trauma or a stroke.

Peptic Ulcer Disease can be spread from person-to-person through contact saliva. Vomit, or stools. PUD can also be spread through contaminated food and water. A strong risk factor can result in stomach cancer.

Signs/Symptoms include:

- Ache or burning in the stomach
- Nausea
- Burping frequently
- Bloating
- Abnormal Weight loss
- Bloody/black stools
- Bloody/black vomit or vomit like coffee grounds

Case Opportunity: The facility registered 13 clients with PUD, 5 males and 8 females. One client, 27-year-old Edith, had a severe case. Edith was brought in with excruciating pain and semi-conscious. The medical team sent a blood sample to the lab and ordered an Abdominal Ultrasound Scan. Her results indicated *H. pylori* infection. She was given an eradication kit and was stabilized.

The medical team was challenged because of the unavailability of the endoscopy machine so Edith was referred to the national referral hospital for the cause of her attacks.

Epilepsy is diagnosed when at least two seizures occur 24 hours apart.

Signs/Symptoms of Epilepsy:

- Temporary confusion
- A staring spell
- Stiff muscles
- Uncontrolled jerking of arms and legs
- Loss of consciousness/awareness
- Psychological symptoms like fear/anxiety



John H. and Marie Parrish Medical Clinic

Life-threatening complications of Epilepsy are Status Epileptics. This occurs in a state of continuous seizure activity of five or more minutes. There is an increased risk of permanent brain damage and death. Sudden Unexpected Death in Epilepsy (SUDEP) means they have a risk of sudden death. Most people with epilepsy can become seizure-free with proper medication.

Case Opportunity: Three new clients arrived with seizures. Nyinamaani, a 15-year-old girl, was brought in with both upper and lower limbs jerking, tongue-biting, drooling, and incontinence. Her history involved three years but in the last two years the seizures intensified. She was now having two-three attacks per day for two days. Nyinamaani had never been treated because the family practiced using herbs and African traditional intervention with no results. She was stabilized and referred to the national referral hospital for a CT Scan and EEG. Our facility lacks the use of these machines.

Needed Equipment

The Clinic needs the following equipment to effectively service clients:

- ❖ Endoscopy Machine
- ❖ Computerized Tomography (CT) Scan Imaging Machine
- ❖ Electroencephalogram (EEG) Machine

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



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February Medical Report

Highlights: This February 2023 reports on two medical conditions—**Tuberculosis (TB)** and **Malnutrition**. TB is caused by bacteria that spreads to others through microscopic droplets that are released in the air. This can be caused by an active form of TB coughs, speaking, sneezing, spitting, laughing, and singing. Mainly affecting the lungs, this disease can spread from the lungs to their parts of the body like the kidneys, spine, or brain through the blood stream (called Extra-Pulmonary TB). Malnutrition is a cellular imbalance between the supply of nutrients and energy and the body's demand for them to ensure growth, maintenance, and specific functions. It is a significant contributor to morbidity and mortality among Ugandan children under the age of five. Malnutrition threatens to destroy a generation of children and irreversibly stunts the growth of one-third of all young children in Uganda. The fetus and early aged children under two years are the most vulnerable.

Tuberculosis can be Latent (inactive) or Active. Latent TB causes no symptoms and is not contagious but can turn into Active TB so treatment is very important to deter the progression of this disease. Active TB is very symptomatic causing illness and the bacteria can become infectious in the first few weeks.

Signs/Symptoms of Active TB:

- Excessive coughing
- Coughing up blood
- Chest pain
- Severe weight loss
- Fatigue
- Fever/night sweats/chills
- Loss of appetite
- Spine TB-pain in back
- Kidney TB-blood in urine

Case Opportunity: Seven possible TB clients came to the Clinic but because of lack of the proper diagnostic services all were referred to the national hospital. An interesting case was John, a 38-year-old male just released from prison. He had severe chest pains and a dry cough for over two months along with night sweats and fever. Through CBC testing, his white blood count had increased. The national hospital tested with the **Gene-Xpert** and a chest **X-ray** revealed John had Pulmonary TB.

Malnutrition can involve under nutrition-not eating essential nutrients and over nutrition-eating too much of the wrong foods with no exercise and consuming too many vitamin or other supplements.

Consequences of Malnutrition:

- Impaired growth
- Physical/mental development impaired
- Impaired body resistance/immune system
- Increased risk of adult chronic diseases
- Increased risk of mortality

Clinical features of Malnutrition:

- **Marasmus**-severe wasting, old man's face, excess skin hanging, ribs/prominent bone, eyes sunken, apathetic or irritable, and liver/spleen enlargement.
- **Kwashiorkor**-pitting feet edema, skin peeling, hair changes, and moon face.
- **Marasmus Kwashiorkor**-features of both

Case Opportunity: Several children are received each month at the Clinic but 27 were registered. Joan, a 4-year-old girl, was brought to the Clinic with legs that were swollen for over a month. She was unable to walk by herself because her legs were hurting. She had lost her appetite for food. Of course, her grandmother had taken Joan to a traditional healer but no cure. They believed her sickness was related to witchcraft. Joan was delivered at home and had no immunization records. After the doctors accessed her weight –for-height and her signs of malnutrition her testing also revealed Joan was HIV positive and had severe bacterial septicemia. Joan was referred to the district hospital for nutrition and Antiretroviral Initiation (ARV).





First Quarter Newsletter



March Medical Report

March highlights two medical conditions found in pregnant mothers, **Malaria** and **Urinary Tract Infection (UTI)**. Malaria is caused by infection with Plasmodium parasites and is transmitted by female (anopheles) mosquitos. Although the government supplies free mosquito nets, the people have not used them properly or are not sleeping under the nets. UTI is an inflammation of the urinary tract and occurs commonly in pregnant mothers. This infection can appear in the urinary tract, the bladder, urethra, or kidneys.

Malaria can be Uncomplicated (high fever, loss of appetite, weakness, headache and joint/muscle pain) or Complicated (results in untreated symptoms).

Malaria during pregnancy can result in:

- Maternal anemia
- Fetal loss
- Premature delivery
- Intrauterine growth retardation
- Birth weights less than 2.5 kg/5.5 lbs.
- Death of pregnant mother

Case Opportunity: Namatove, a 25-year-old woman in her second trimester was brought to the Clinic convulsing and with a high fever. She had severe back pain, with muscle/joint pain. After medical intervention with the help of the CBC machine, the patient regained consciousness and the babies heart rate was normal.

Increased risk of **Urinary Tract Infection** can start at six weeks through week 24 because of changes in the urinary tract. Pregnancy cause many changes in the makeup of the urine and weakens the immune system.

Risk factors of UTI in pregnancy include:

- Untreated bacteria causes acute cystitis and pyelonephritis
- Pre-existing diabetes
- High blood pressure
- Premature rupture of membrane/low birth weight

Case Opportunity: Twenty-seven pregnant women visited the Clinic for antenatal care. Four women had Uncomplicated UTI. Ampire, a 26-year-old, complained of lower abdominal pain, backache, and painful urination. The Clinic's midwife ordered a urinalysis. Ampire had UTI and was given oral antibiotics and some analgesic for pain. After 5 days, Ampire was much better and had no complaints.

Specific Needs for the Clinic include:

1. **More rooms for male/female malaria patients.**
2. **More rooms for women's health department.**
3. **Equipment/supplies for women's health.**
4. **Ambulance to transport critical patients to referral hospitals for treatment.**





First Quarter Newsletter

Ugandan Children's Report

The **sponsored children** reported back to school the first week in February 2023. Third Term Reports for 2022 will be presented soon. Because the children are widely spread out in the community, it is difficult to obtain all school reports.

There continues to remain **poor living conditions**. Some children have no soap to bathe with and live among garbage. The parents/guardian were challenged to supply the children with soap and to dig holes to bury their garbage. Poor sanitation and hygiene are also areas that need improvement. The drought has impaired their farming leaving many homes with food scarcity.

Through a **generous donor**, HHCharities was able to **supply funds for children's bedding**: 10 bedframes, 10 mattresses, 10 sets of sheets, and 10 blankets. Some of our children will sleep well and perform better in their schools because of good rest.

HHCharities also provides the children with a **Food Pantry** for those who have scarcity in food supplies and therefore missing meals. Some food had to be distributed to ensure the children had at least one-two meals a day. A hungry child cannot concentrate in school to complete the work.

There are so many children who are **impoverished** in these communities. They are beginning to approach our children's manager to see if there is a sponsor who can give them an opportunity to get an education because they **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