



First Quarter Newsletter



January Clinic Pinnacles

Highlighted Case Opportunities: Pneumonia and Caesarean Section are highlighted in the January report. **Pneumonia** is a form of acute respiratory infection that affects the lungs. When a person has pneumonia, the alveoli fill up with pus and fluid which makes breathing painful and limits oxygen intake. This infection is caused by several infectious agents: viruses, bacteria, and fungi. The most common are Streptococcus Pneumoniae, Haemophilus Influenza Type B (HIB), and Respiratory Syncytial Virus, the most common form of Viral Pneumonia.

The Clinic serviced 57 children. Thirty-six had mild pneumonia and 21 were severe cases. Latif, a 9-month-old male was brought into the Clinic unconscious and with severe wheezing. His coughing began three days prior with difficulty in breathing. Latif was sick looking febrile on touch and a temperature of 100.2 degrees Fahrenheit. One hour after use of oxygen, intravenous antibiotics and antipyretics, Latif regained consciousness. **Use of an effective Nebulizer and a Vein Finder would have greatly aided in his treatment.**

The **Caesarean delivery (C-section)** is used to deliver a baby because of various pregnancy complications: labor difficulties, baby in distress, baby in unusual position, prolapsed umbilical cord, multiple births, birth canal blockage, placenta problems, mother's health, and the mother's history of C-section. At the Clinic, three out of ten women are referred to a regional hospital for C-section. In the month of October 2023, out of the 47 women who were ready for birthing, 14 were referred to a regional hospital for C-sections. **There is no delivery theatre or equipment at the Clinic.**

February Clinic Pinnacles

Highlighted Case Opportunities: February highlighted medical conditions: **Benign Prostatic Hyperplasia (BPH) and Mycosis.** **BPH**, also called an enlarged prostate, is a health issue that becomes more common the older the man becomes. It can cause symptoms like blocking the flow of urination, urinary infection, or kidney infections. Contributors to this condition can be aging, family history, diabetes, or obesity. Severe cases will include frequent or urgent need to urinate, trouble starting to urinate, weak urine flow, dribbling at the end of urination, inability to empty the bladder, urinary tract infection, bladder damage, bladder gall stones, and kidney damage.

Nine clients over the age of 60 visited the Clinic with a diagnosis of BPH. One of the men, named Friday, was 61-years-old with failure to pass urine for the past two days. Friday had a history of several urinary tract infections. He had a distended abdomen with severe pain. The ultrasound scan results showed BPH. Friday was referred to the regional hospital for Prostate Specific Antigen (PSA) and prostate biopsy to rule out prostate cancer. He returned to the Clinic after testing with a diagnosis of BPH and was given medication to relieve the hyperplasia. **The Clinic lacks a PSA testing machine to holistically treat patients.**

Mycosis-fungal Infection is a disease caused by a fungus and are most common on your skin and nails but can also be in your mouth, throat, lungs, urinary tract, and many other parts of the body. Fungi that invades the tissue can also spread into the bones and organs affecting the whole body. Higher risks patients have poor circulation, diabetes, or weakened immune systems, HIV/AIDS, cancer, cancer treatments, and immunosuppressant medications. This infection can be superficial/subcutaneous. It can be in the lungs, brain, intestine, or the sinuses.



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February cont'd

This Clinic can only treat superficial fungal infections because we lack the culture machine to diagnose the samples of subcutaneous fungal infections.

The Clinic received 47 clients with fungal infections; 21 were children, eight adult men, and 18 adult females. Martha, a four-year-old girl, came to the Clinic with itching between her toes, burning and stinging sensation, blisters, and discolored thick toenails. Because of the pain, pus, and swollen feet, Martha was unable to walk on her own. The doctor treated her with pain medicine, anti-fungal cream, and oral anti-fungal medicine. She returned to the Clinic with notable improvement.

March Clinic Pinnacles

The March report focuses on **Anemia and Tuberculosis (TB)**. Anemia is a condition where the hemoglobin is lower than normal. The anemia can be short or long term and range from mild to severe. It can also be a warning sign of a serious illness. Anemia is more common in women and children but can affect anyone. It can be mild with no symptoms and get worse with symptoms of tiredness, weakness, shortness of breath, pale-yellow skin, irregular heartbeat, dizziness, chest pain, headaches, and cold hands or feet.

Forty-seven patients were diagnosed with anemia; 27 children, 15 women, and five men. Eight of the women were pregnant and eight of the children had sickle cell anemia. Those patients with severe anemia (13 total) were referred for blood transfusions. Peter, a 2-year-old orphan boy living with his 72-year-old grandmother, came into the Clinic with a temperature of 102.2 degrees Fahrenheit, stunted growth, weak, pale-yellow skin, rapid heartbeat, shortness of breath, and cold hands and feet. Peter was given anti-pyretic and first aid but was referred to the district hospital for a blood transfusion. **The Clinic does not have a blood bank for transfusions because it lacks a blood bank refrigerator.**



Tuberculosis (TB) is a contagious disease which can be Latent (Inactive) or Active TB. The patient in the Inactive stage has no cause symptoms and is not contagious, however, it can become active, so treatment is important to help in the progression of the disease. In the active state the person is symptomatic, becomes sick and can spread the infection to others. The affects can be seen in the first few weeks after infection with the TB bacteria, or it may be evident years later. Symptoms include persistent coughing, coughing up blood, chest pain, severe weight loss, fatigue, fever, night sweats, chills and evening fever, and loss of appetite. Signs may vary according to the organs involved.

The Clinic sees several TB patients, but lacks standard diagnostic tools, so patients are referred.





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March cont'd

March brought in 11 possible TB clients who the Clinic referred but an interesting case was Joshua, a 43-year-old male who had just been released from prison and was complaining of severe chest pains along with dry coughing that lasted over two months. He also had a history of fever and night sweats. The doctor ordered various lab tests for Joshua including a GeneXpert and chest X-ray to rule out pulmonary TB. The Clinic lacks a GeneXpert machine which would greatly improve the care given to questionable TB patients.



Vein Finder



GeneXpert Machine

Essential Medical Equipment

For the Clinic to operate more efficiently, we have listed equipment needs with **Uganda's approximate costs**. Please join us in working to send the Clinic funds for equipment. Equipment and cost range is:

- ❖ Vein Finder Device-\$100-\$300
- ❖ Blood bank refrigerator-\$6,000-\$9,000
- ❖ Nebulizer-\$200-\$700
- ❖ Gene Xpert Machine-\$700-\$2,200

Of course, it is more advantageous and less costly to send funds so the Clinic can purchase the equipment in Kampala, Uganda. Anyone with access to non-government organizations, private companies, individuals, and institutions that can assist, please contact HHCharities at info@hhcharities.org.

Blood Bank Refrigeration



Nebulizer



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Ugandan Children’s Manager’s Report January-March

In January, the children were reminded to focus on the end goal of an education that will change their future lives. They were also encouraged to improve their personal hygiene. Most of the progress reports have been collected from the children for Term 3. The sponsors will receive a copy of the reports to keep them abreast of each student’s progress. One of our students, Juliet, was diagnosed with acute Typhoid and was referred to the Regional Hospital.

February is the month that starts Term 1 for the children. Tuitions were paid and the children began their education for 2024. The blessing is that our sponsored children can attend school each year without interruptions because their school fees are paid. Sanitary napkins were distributed to the girls which is a great comfort to them. Now they will not be shameful about their situation, and they will not miss classes because they lack napkins. The children also received rice, beans and corn meal. But they are still faced with the challenge of a heavy rainy season that soaks them and their books. Backpacks and raincoats are needed for this season.

The Carrier Guidance Program was in force at the schools for the Senior One students in March. The children are given various alternatives for their studies with the assistance of the children’s manager, Priscilla. The manager also discussed the issues of HIV/AIDS and other transmitted diseases like Gonorrhoea Syphilis, which is currently rampant in the Fort Portal communities. She also discussed rape and other defilements with the children. For their safety, the children were encouraged to not travel alone and cautioned about visiting other homes by themselves.

Many of the children are hoping and praying for a sponsor so they can attend school in 2024. **Will you be the answer to their prayers!** All the information you need to support a child in 2024 is listed below. *Thank you for stepping up and helping another child realize his/her dream!*



Imagine Life Through a Child’s Eyes...Sponsor a Child’s Education!

***Ugandan Children’s Tuition/Support for 2024
 Fort Portal, Uganda***

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

**Term I – February 5th – May 3rd
 (Funds due by January 30, 2024)**

**Term II – May 27th – August 23rd
 (Funds due by May 21, 2024)**

**Term III – September 16th – December 6th
 (Funds due by September 9, 2024)**

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

ANNUAL TOTAL-----\$396/\$450

Term Payments: \$132/\$150 per term (according to grade level)

Monthly payments: \$33/\$38 per month (Auto Payments set up via PayPal (Donate) or via Your Bank)

***Payments accepted: Checks (mailed to address below)
 Credit Card Payments: via PayPal (Donate) at www.hhcharities.org
 Zelle (Business): (info@hhcharities.org)/CashApp (Business): \$Humanitarianhands***

**** 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****

