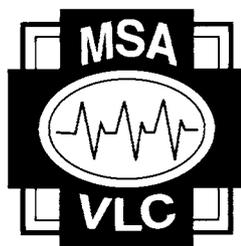


VIETNAM LAOS CAMBODIA



MEDICAL & SCIENTIFIC AID NEWS BULLETIN

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HOA BINH PEACE VILLAGE

For many years the charity has sought to provide aid to the two Peace Villages in Hanoi and Ho Chi Minh City. Last year the village at Thanh Xuan, Hanoi, received help with equipment for blood analysis and dentistry. This year, however, both Thanh Xuan and Hoa Binh have been sent funds to buy new equipment.

Thanks to various fundraising churches a sum of around £3,000 had been earmarked for Hoa Binh but communication difficulties had restricted our ability to pass on the money without specific projects or equipment being identified.

During their round of project visits Peter & Mary Lidgard were able to overcome these difficulties and establish effective lines of communication with the staff at the village.

Hoa Binh Peace Village was founded in 1990 and since then had been home to some 400 children. At present 55 children between the ages of 0 and 15 years, but with one resident who is 33. In most of the patients their disabilities could be traced back to contact with the defoliant Agent Orange, by a parent or grandparent. This is further evidence of the lasting effects of the dioxins in the defoliant getting into the genes and affecting innocent lives.



Dr Nguyen Thi Phuong Tan and Dr Le Thi Hien Nhi, the Chief and Deputy Chief of the Rehabilitation Department indicated that they required an Ultrasonic Therapy Machine and had been able to source one locally for £2,666. With the agreement of the Trustees Peter & Mary were



able to visit the manufacturers, BTL, in Ho Chi Minh City and arrange the purchase. It was also possible for them to revisit the Peace Village at the end of their stay in Vietnam and see the machine in operation. It was in regular use, particularly with the older children who found that it relieved the pain in their twisted limbs.

The purchase of the machine left a sum of £334 still available for use by the Peace Village and on

the second visit a “wish list” of further equipment had been prepared, identifying the items that were most urgently required: adapted chairs so that some of the children could sit at the table to eat with the others, a bathing trolley, a wheelchair for taking the children to the toilet, and some new tables, as the old ones were the wrong height and in disrepair. At their meeting in April the Trustees agreed to purchase all these items.

The Peace Village does an excellent job and gives a home, medical care, education and emotional support to all its residents. It is an outrage that children like these are still being born, due to an illegal act of war and the Trustees are proud to be able to assist them. We hope that with your help, we will be able to continue that help.

KIEN KLIENG LEPROSY REHABILITATION CENTRE

In February Peter and I accompanied Sin Tith Makara, an Audiologist and Primary Health Care Clinician from All Ears Cambodia, and Koy Bopha, an Audiology Trainee, to the Kien Klieng Leprosy Rehabilitation centre in Phnom Penh. We were shown around the centre by Bean Sithan, the Social, Economic and Rehabilitation Co-ordinator, and his colleague Mr Lang Sophea, who had himself suffered with leprosy. The centre was doing a marvellous job; by education and public awareness the number of new cases of leprosy in Cambodia had dropped from 3,000 in 1997 to 317 in 2012. The centre comprised of a hospital ward accommodating 50 patients, a treatment room, an activities room, a canteen, a physiotherapy room, a education room, a laundry and a kitchen.

As well as treating leprosy sufferers, the centre was aiming to educate the public about the myths and misconceptions which surround the disease. Although leprosy can now be successfully treated with multi-drug therapy, people with leprosy continue to face social discrimination even after they are cured. Whole families are marginalized, sometimes with devastating results.

Leprosy is an infectious disease caused by a bacterium called *Mycobacterium Leprae*. It is probably spread from tiny droplets in the nose. It usually affects the skin and nerves. Skin lesions have decreased sensation and nerve damage, which results in disability, painful nerves, and weakness of muscles. The loss of sensation means people cannot feel pain and can sustain injuries or burns, resulting in wounds and ul-

cers. The weakness of muscles can lead to clawing of the hands, drop foot and inability to close the eyes. However, leprosy can be cured with six to twelve months of Multiple Drug Therapy (MDT), and within 24-48 hours of starting the medicine, the patient is no longer contagious.

Patients can stay at the centre whilst their skin conditions are being treated, as their ulcers can be very severe. It is estimated that if a patient has lesions in up to five places this will take six months to heal, and more than five will take at least year. Patients also stay for physiotherapy, and pre-operative and post-operative care for reconstruction surgery. The centre has three support workers who are themselves leprosy victims.



All the patients are given vocational training, or retraining for work if their disabilities demand it. They are taught how to use false hands and to hold pens, toothbrushes and spoons with them. Sunglasses are supplied to protect the eyes from the sun and dust, if their eyelids do not close. Special soft shoes are supplied to protect the feet. Outreach care is given to patients when they leave the centre if required, and the

centre try to teach self-care, and encourage sufferers to set up businesses, or return to school. Leaflets were available for public education

One of the support workers, Mr Lang Sophea was a monk when he was diagnosed, and he told us a little of his story. It took ages for the condition to be recognised and he was treated wrongly with Khmer medicines during that time. He had also experienced a great deal of discrimination and made to feel 'unclean'. He felt that he now wanted to help other sufferers.

Due to the nerve damage and impaired immune systems, hearing can often be affected and All Ears hold a clinic at the centre once a month. We attended the clinic which was very efficiently run and 24 pa-

tients were seen, ear infections were treated, hearing tests done, and measurements taken for hearing aids if necessary. Treatment was free, as was all treatment at this centre.

A Spanish charity supports the centre at the moment, but due to the economic situation, they are expected to withdraw next year. The centre will then find it very difficult to continue, if more help is not found. It costs about \$120,000 USD a

year to run, and only a very small amount is given by the government.

We were privileged to be able to meet the patients, some of whom had severe disabilities, and were awaiting reconstruction surgery. We were very impressed with the clinic and the care and kindness that was given to the sufferers. It will be a disaster if it has to close!

Mary Lidgard
Assistant Hon Secretary

48 YEARS OF PRACTICAL HELP

The recent sad death of General Vo Nguyen Giap acted as a reminder of the early days of MSAVLC and the pioneering work of Joan McMichael.

Reproduced below is an article written for a Parish Magazine when they had chosen us as their charity of the month. It serves as a reminder of why we were formed and why we are still needed.

The Medical Aid Committee for Vietnam, the forerunner of Medical and Scientific Aid for Vietnam, Laos and Cambodia, resulted from the visit to Hanoi of a London doctor, Joan McMichael, in early 1965. In Hanoi Joan learned of the terrific suffering of the people of the south of the country as a consequence of shortage of medicines and surgical equipment. She contacted as many humanitarian doctors and other individuals as she could, and in June 1965, at a meeting in the House of Commons, MACV was established.

Within a few weeks, more than 100 persons prominent in Academia, Churches, Medicine, Politics, the Arts and the Trade Unions, became sponsors. Campaigns such as live artistic performances and art exhibitions throughout the 60's and 70's provided funding for many projects providing aid for the people of Vietnam. At one point, MACV ran a blood donation campaign, and by the end of 1971, 6,567 pints of blood had been flown to those who needed it.

MACV became a registered charity in 1967. In 1979, it was suggested that the constitution be

revised to reflect the fact that aid was being given to Laos and Kampuchea (as Cambodia was then known) and that a post-graduate scholarship for a medical scientist had been established at the North-East Wales Institute. This was agreed and, after some discussion with the Charity Commission, a new constitution was established, with the original organisational structure remaining.

Since 1980, the charity has been run exclusively by volunteers. It operates with an Executive Committee, which meets every six weeks, and a Management Committee which meets once a year for the AGM at the House of Commons.

Over the last forty-six years, MSAVLC has raised hundreds of thousands of pounds in aid (readjusted to today's monetary values, the total is over £5 million) and supported many different projects: the Jaipur Limb project, Mother and Child Campaign, cataract operations, repair of Hare lip and cleft palate, a programme to treat and prevent the eye infection Trachoma, early diagnosis and treatment of children with congenital abnormalities due to toxic chemicals such as Agent Orange, treatment of TB in the community in Cambodia and an audiology clinic in Laos. We also cooperate with All Ears Cambodia, a pioneering audiology programme.

Our current programme shows continued support for two Peace Villages (orphanages for child victims of Agent Orange), one in Ho Chi Minh City and one in Hanoi. We continue our

support of hospitals in Ha Tinh City and Ky Anh, both in Ha Tinh Province which is one of the poorest of Vietnam's provinces. We also help support the Elderly Association and the Blind Association in Ky Anh. Recently we have also provided equipment through the Vietnam Victims of Agent Orange organisation (VAVA) to victims in Ha Tinh, Hanoi and Ho Chi Minh City.

Through the Highland Education Development Organisation (HEDO) we provide funds for the training of traditional midwives in modern methods, a programme which is having a tremendously positive effect on infant and maternal mortality.

In Cambodia we continue our support of All Ears Cambodia, a project set up by British audiologist Glynn Vaughan, which provides free diagnosis and treatment for people who otherwise would not be able to access medical help.

Also in Cambodia is the Disability Development Services Project in Pursat, the New Hope Orphanage in Poipet, which provides a home for orphans and street children. DDSP provide services and support for paraplegics and quadriplegics throughout Pursat Province, a poor rural area of Cambodia.

In Laos we have recently funded a well at Suan Luang Orphanage and in the future we are hoping to provide more wells in Jumpet district

Forty Six years on from Joan McMichael's visit our help continues, the nature of the work may have changed but the needs are as great today as they always were.

Seasons Greetings



*Best Wishes
for
Christmas
and the
New Year
from
The Trustees
Of
MSAVLC*

FUNDRAISING

A BIG THANK YOU to everyone who sends us regular funds. MSAVLC would not be able to support the projects without your continued generosity. We know times are hard for everyone, but to keep the funds coming in, you can help by shopping online. With Christmas just around the corner, what better way to shop than in the comfort of your own home and benefiting MSAVLC in the process.

Through the Give as you Live™ website, stores will donate directly to us a percentage of what you spend with them. All you need do is sign up and select MSAVLC as your chosen charity. Shop directly at your favourite stores – the stores donate and it doesn't cost you a penny extra.

Go to <http://www.giveasyoulive.com> and follow the on-line instructions and select MSAVLC as your chosen charity.

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