

**A COMPREHENSIVE REPORT  
ON  
THE MICHAEL & MAURITIA PATCHA FOUNDATION  
2015 MEDICAL MISSION  
EDEA AND KRIBI  
June 15 – 19**



**Compiled by  
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## *Our Goal*

To reduce the impact of cancer on African communities in diaspora and on the continent.

## *Our Mission*

Contribute effectively and efficiently to improvement of the community's health, focusing on increasing Cancer Awareness, Screening, Early detection and Care (CASEC).

## *Our Values*

We strive to promote healthy living, early and correct diagnosis, as well as access to and the efficient use of resources. We believe in confidentiality, value, integrity, excellence and dedication. We welcome the opportunity to earn your trust and deliver the best service we possibly can.

## *Our Vision is quite simply a world without cancer!*

## *Our Tool and What We Promote*



## *How We Do It*

Medical Missions, Walk to Fight and...WIN Events, Workshops, Health Fairs, Social Media, eNewsletter, Conferences, Follow Up Care.

**TOGETHER LET'S FIGHT CANCER AND...WIN!**

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# *Letter from the President*

July 2015

Dear friends,

As we celebrate the end of another successful medical mission I wanted to thank you all, our members, volunteers, donors, partners and supporters, for allowing me to lead such a great team of caring individuals.

During this mission, and all previous ones, I have been able to discern the passion that each of you has for the disadvantaged, the sick and poor, for giving back and embracing life and love!! You are the reason we have been able to embark on three successful missions that have so far impacted more than 12,000 lives!!

It is important for you to know that no other medical mission, in one week, provides the wide ranging services that we do: from cancer screening and treatment; to cardiac screening, ophthalmology and dental procedures; to surgery and pharmacy dispensing a minimum of 3 months of chronic medications. None! The comprehensive nature of our missions likens us to a mobile hospital. This is unique and we should all take exceptional pride in being a part of it.

Appreciation must also be extended to the Minister of Health, Mr. Andre Mama Fouda, for authorizing the mission and deploying the National Cancer Control Committee led by Prof Anderson Doh; the Ambassador of Cameroon to the USA His Excellency Foe Atangana, for the expeditious handling of travel formalities thus permitting American volunteers to enter, and serve the people of, Cameroon; and last but not least the thousands of people who attended the mission, patiently enduring hours of waiting, and bearing with us when we encourage them to wait a little bit longer so as to take advantage of all the services provided. We could not have a mission if people did not show up. So, thank you for welcoming us into your communities and for giving us the opportunity to serve you. We hope that we have been able to leave you with just a glimmer of hope, and allayed your health concerns enough for it to have been worth the effort.

The most rewarding part of the mission is witnessing people getting instant relief from a potentially life threatening condition as when pre-cancerous cervical lesions are instantly treated by our Cameroon Baptist Convention partners; or when we are able to impact quality of life as when a hernia is operated on by our friends from ASCOVIME or the Protestant Hospital Ndogbati, Cite Cic. It is also rewarding to witness true volunteering spirit, as can be seen through the HIAMS students who rise up to any tasks given; and all others who tackle each day's activities with joy, compassion, humility and selflessness.

Unfortunately now and again we are presented with challenging cases that require more expertise and resources than we are equipped for. This year, with the expansion of our collaboration with Shisong Cardiac Center to include EKGs/ECGs to the growing list of services, we were able to diagnose a few urgent cardiac cases including 14 year old Caroline whose condition can only be resolved with a heart transplant. In the coming weeks we will start a campaign in collaboration with Shisong and the Ministry of Health to get her that life-saving operation. I hope we can count on your assistance.

As we take a moment to evaluate this mission please do not hesitate to forward your concerns and suggestions to us. We are still in our infancy. We acknowledge that there is still much to be done and we are enthusiastic to learn how we can improve as we grow.

I look forward with gratitude and excitement to the next medical mission. With you all onboard 2016 should be another good year. Together we will fight cancer...and other chronic diseases...and WIN!

With Appreciation and Best Wishes,

*Stella-Maris*

## **1.1. INTRODUCTION**

The mission of the Michael & Mauritia Patcha Foundation is to contribute effectively and efficiently to improvement of the community's health, focusing on increasing Cancer Awareness, Screening, early detection and Care (CASEC). The foundation is committed to reducing the cancer burden in Cameroon.

The foundation organizes a yearly medical mission in Cameroon with a focus to reach out to the underserved, the poor, needy, and underprivileged in the society. In order to accomplish this, the Foundation pulls together resources locally and internationally, medical and non-medical volunteers, and financial and in kind donations from a pool of very generous partners.

This is a vital undertaking because cancer is devastating Cameroonian communities. The Patcha Foundation is cognizant of the numerous health challenges facing communities today. Most people who die of cancer in Cameroon are unaware that they have the disease; there are a high percentage of undiagnosed cases. Those who seek diagnosis or treatment often do so at a late stage of the disease, and have little or no access to resources. The public needs education to understand that early diagnosis and treatment are the keys to cancer survival.

Although the Foundation's main focus is CASEC (Cancer Awareness, Screening, Early Detection, and Care), through the medical mission initiative a comprehensive range of healthcare services are offered to promote access that participants would otherwise not have.

The 2015 Medical Mission to Cameroon is the third that the Foundation has organized. The total now served stands at over 12,000 people that have received free cancer screening, vital health care, surgery, cardiac, ophthalmology and dental services and medications.

## **1.2. 2015 MISSION GOALS**

The 2015 Medical Mission goals included the following:

- ◆ Free cancer screening of the breast, cervix and prostate
- ◆ Free treatment of precancerous lesions of the cervix and referrals for more advanced cases
- ◆ Free surgery
- ◆ Free dental services including oral cancer screening, cleaning, tooth extractions, fillings, and treatment of other oral conditions diagnosed
- ◆ Free screening for and management of diabetes and high blood pressure



- ◆ Free cardiac consultations and EKG/ECG screening and referrals for management of heart ailments
- ◆ Free eye exams and glasses
- ◆ Free medications
- ◆ Education of the public and promotion of awareness on critical health issues especially Cancer, HIV/AIDS, Diabetes and Hypertension.
- ◆ Other health services as determined appropriate by our medical providers

### 1.3. MISSION SITES



The 2015 Medical Mission took place in two regions of Cameroon; the Littoral and the South Regions.

In the Littoral Region, the mission was at the Edea Regional Hospital Annex, in Edea, Sanaga-Maritime Division.

In the South Region, the mission was at the Mpuma Mwet Medical Centre, Nziou, in Kribi, Ocean Division.

#### Site 1: Edea Regional Hospital Annex



People waiting for service

## Site 2: Mpuma Nwet Medical Centre, Nziou, Kribi



*It was Wednesday afternoon on June 17. We had gone to the Mpuma Mwet Clinic to set up in preparation for mission services due to start at 7am on Thursday. However, there were 250 people already waiting there so the team got right to work. While we offered services to all who were present, we could not offer eye care as the ophthalmologist was not scheduled to arrive until the next morning. At 9:15pm when we were finally shutting down for the night, a 78 year woman would not leave the centre, threatening to sleep there stating, "I must see the ophthalmologist...I have not eaten anything and I have been waiting since morning but I must stay here overnight so I can see the eye doctor..."*

While in developed countries people wait for hours in long lines to buy electronics and door buster deals at stores, in Cameroon the poor and underserved will wait for long hours for the once-in-a-lifetime chance to consult on a health issue. The Patcha Foundation is honored to bring free, comprehensive healthcare and a glimmer of hope to the people.

### 1.4. MISSION SERVICES

In the 2015 medical mission, services offered were:

- A. Cancer Screening:  
Breast and cervical cancer screening and care were performed by Cameroon's National Cancer Control Committee (NCCC).  
Prostate screening and care was performed by volunteer physicians.
- B. General and pediatric consultations were provided by volunteer physicians, Drs. Irene Wakam, Xavier Tchetrya, Ellis Morfaw, Walters Arrey, Judwin Ndzo, Mathilde Mbouck-Samnack and Vitalis Fabombi.
- C. Cardiology screening was performed by Dr. Cabral Tantchou of the St. Elizabeth Cardiac Center, Shisong.
- D. Surgeries were performed by Drs. Georges Bwelle, Tym, Bisay and Notue of ASCOVIME, and Dr. Baudelaire Njankou of Protestant Hospital, Ndogbati, Cite Cic, Douala.
- E. Dental services were provided by dentists from the Edea Regional Hospital Annex, Dr. Ishmael of ASCOVIME, Dr. Munge and dentists from the Kribi Central Hospital.

- F. Ophthalmology services were provided by ophthalmologists of Edea Regional Hospital Annex and Dr. Aime Bang of ASCOVIME.
- G. Pharmacy was led by volunteer pharmacists.
- H. HIV testing was done by ASCOVIME.
- I. Nutrition counseling was handled by Mme Temfack Fogang Therese of Clinic Koumassi, Douala.
- J. Breast and cervical cancer education was provided by NCCC.
- K. Prostate cancer education was performed by the General Practitioners (GPs).
- L. Diabetes and hypertension counseling was handled by the triage nurses and doctors.

### 1.5. MISSION STATISTICS

Health statistics remain an integral part of our medical missions. Following are data from the 2015 mission:

#### A. GENERAL REGISTRATION

S/N	ITEM	Edea	Kribi	Total
1.	Total Registration	<b>1657</b>	<b>2551</b>	<b>4208</b>
2.	Males	324	833	1157
3.	Women	873	1271	2144
4.	Pediatrics	460	447	907

#### B. VITAL SIGNS

S/N	ITEM	Edea	Kribi	Total
1.	Total Seen	<b>1354</b>	<b>1823</b>	<b>3177</b>
2.	Hypertensive	102	158	260
3.	Diabetic	17	78	95

#### Vital Signs Remark:

- Vital signs for children were generally not taken at the triage unit, and are not included in the Vital Signs data.

#### C. GENERAL CONSULTATIONS

S/N	ITEM	Edea	Kribi	Total
1.	General Practitioners	769	1523	<b>2292</b>
2.	Pediatrics	442	447	<b>889</b>



#### D. BREAST CANCER SCREENING

S/N	ITEM	Consulted	Abnormal	Treated	Referred
1.	Edea	214	7	5 surgeries	7
2.	Kribi	254	11	3 surgeries	11
3.	<b>Total</b>	<b>468</b>	<b>18</b>		<b>18</b>

#### E. CERVICAL CANCER SCREENING

S/N	ITEM	Consulted	Abnormal	Treated	Referred
1.	Edea	214	15	6	9
2.	Kribi	254	21	9	12
3.	<b>Total</b>	<b>468</b>	<b>36</b>	<b>15</b>	<b>21</b>

##### Cervical Screening Remarks:

- One case each in Edea and Kribi of suspected cervical cancer. Samples were sent for biopsies. Patient follow up was addressed and scheduled by NCCC.

#### F. PROSTATE CANCER SCREENING

S/N	ITEM	Consulted	Abnormal	Treated	Referred
1.	Edea	165	15	-	4
2.	Kribi	255	27	-	7
3.	<b>Total</b>	<b>420</b>	<b>42</b>	-	<b>11</b>

##### Prostate Screening Remarks:

- All pathological cases were referred for confirmation so that treatment could be started.

#### G. HIV

S/N	ITEM	Edea	Kribi	Total
1	Total Tested	<b>0</b>	<b>74</b>	<b>74</b>
2	Positive	-	3	3
3	Negative	-	71	71

##### HIV Remarks:

- HIV testing was performed on a voluntary basis only in Kribi by foundation partners ASCOVIME. Condoms were distributed.

## H. CARDIOLOGY

S/N	Item	June 15	June 16	June 18	June 19	Total
1.	No. of Patients Consulted	52	108	75	51	<b>286</b>
2.	No. of Males	18	29	23	21	91
3.	No. of Females	34	79	52	30	195
4.	No. of Children	3	6	0	3	12
5.	No. of Adults	49	102	75	48	274
6.	Age range of Patients	8-81	10-90	20-88	8-72	8-90
7.	No. of Electrocardiograms	37	21	31	34	123
8.	No. of Echocardiograms	5	11	18	20	54

**Cardiology Diagnosis:** Hypertension, Arrhythmias, Dilated Cardiomyopathy (DCM) and Congestive Heart Failure (CHF).

### Remarks from Cardiologist:

- A young girl, 14, Ngoyamb Caroline, was diagnosed with Dilated Cardiomyopathy. The patient will need a heart transplant. This is a condition that cannot be managed in Cameroon. There is need for more investigation and management abroad. The Patcha Foundation is working with the Cardiac Unit to solicit resources to assist Caroline with this treatment.
- A young sportsman was suspected to have a coronaropathy. He has been scheduled for further examinations like the treadmill at the St. Elizabeth Cardiac Center, Shisong.
- Many patients complained of eye and neck problems.

## I. DENTAL UNIT

S/N	Item	Edea	Kribi	Total
1.	No. of Patients Registered			<b>399</b>
2.	No. of Patients Consulted	<b>168</b>	<b>231</b>	<b>317</b>
3.	No. of Extractions	41	32	73
4.	No. of Fillings	18	0	18
5.	No. of Referred cases	0	55	55
6.	Full mouth observations (cleaning, scaling, restoration)	25	35	60

### Dental Remarks:

- Some patients underwent extractions, some had fillings, and others had both extractions and fillings.
- Patients in Kribi were referred to the Kribi District Hospital. Dr. Carole Nogha, Head Dentist at the District Hospital and Patcha Foundation 2015 Mission volunteer will follow up with referred cases.
- Dentists stated that the number of cases referred was a result of lack of appropriate equipment, including a dental chair.
- Some referred patients received prescribed medication to manage their cases.
- Each patient left with at least two tooth brushes, proactive care and dental hygiene and oral cancer counseling
- Referred cases were for one or more of these: Root canal treatment, crown restorations or prosthetic devices.

### J. OPHTHALMOLOGY

S/N	ITEM	Edea	Kribi	Total
1	Total Consulted	140	300	440
2	Males	38	105	143
3	Females	102	195	297
4	Ametrophie (Ametropia)	112	55	162
5	Presbytie (Far Sightedness)		122	122
6	Glaucoma	4	1	5
7	Cataract	3	4	7
8	Conjunctivitis		10	10
9	Mucolostropho	3		3
10	LCCT		6	6
11	Others	23	6	29

### Ophthalmology Remarks:

- Restoring Vision (National Vision) of USA donated 300 pairs of eyeglasses which were distributed free of charge. Those who received them were significantly and immediately impacted. The opportunity to restore and preserve the gift of sight to those individuals in dire need is appreciated!
- Also distributed were 100 pairs of sunglasses donated by Direct Relief.
- By far the single most common complaint in Kribi was 'problem with eye'. On the last day of the mission the ophthalmology team worked from 9AM until after 3AM the following morning to make certain that ALL patients were seen.

## K. SURGICAL UNIT

		Edea Reg. Hosp. Annex		Kribi Mpuma Mwet		Kribi Principal Prison		
S/N	Item		Breakdown		Breakdown		Breakdown	Mission Total
1	Total consulted	140		302		20		462
2.	Total cases	15		75		15		
3.	Total number of procedures	15	Children: 2 Men: 7 Women: 6	75	Children: 9 Men: 44 Women:	17	Man: 14 Woman: 1	107
3a.	Hernia (including umbilical, inguinal, bilateral, white line)	7	Children : 2 Men : 4 Woman: 1	55	Children: 9 Men: 39 (Indirect Hernia- 27; Direct Hernia - 12) Women: 7	15	Man: 14 Woman: 1	77
3b.	Lipoma	2	Men: 2	8	Men: 5 Women: 3			10
3c.	Facial cyst	1	Man: 1					1
3d.	Breast nodules	5	Women: 5	3	Women: 3			8
3e.	Foot ulcer					1	Man: 1	1
3f.	Myositis					1	Man: 1	1

### Surgery Remarks:

- The visit of the Michael & Mauritia Patcha Foundation to the Kribi Principal Prison where Dr. Njankou consulted and surgeons from the ASCOVIME team performed surgeries to male and female inmates demonstrates the egalitarian nature of the Patcha Foundation's activities.

## L. ADDITIONAL REGISTRATIONS

- Participant Overflow:** An estimated 300 people that were registered and received services in Edea, the first mission site, also attended the mission in Kribi. While some sought only additional services than they had received in Edea, most wanted to consult again with the GPs on ailments they had not previously disclosed.

- ii. **Unregistered Participants:** As is typical during the medical missions more people show up than can be seen due to time constraints. This year we estimate that 250 people who could not be screened received disease counseling and assorted over the counter medications, including cough and cold remedies and analgesics. The mission did not keep a record of this segment of participants.

## M. PHARMACY

All participants received medication.

Drugs dispensed included prescription medications, over the counter medications (OTC), hydration packs and vitamins. Those with chronic diseases received a minimum of 3 month's supply of medication. High demand items included medications for diabetes, hypertension and cardiac conditions, calcium supplements, vitamin supplements, topical and oral anti-infective, anthelmintics and analgesics. In all over **14000 prescription orders** were filled. Eye drops dispensed by ophthalmologists, pediatric medications dispensed by the pediatricians and OTC meds dispensed to unregistered participants are not included in pharmacy numbers.

## N. SUMMARY OF DATA

S/N	HEALTH CATEGORY SCREENED	TOTAL NO.	ABNORMAL	POSITIVE	TREATED	REFERRED
1	Registration (adults + children)	<b>4208</b>	-		-	
2	Pediatric consultation	<b>889</b>	-	-		
3	Vital Signs	<b>3177</b>	-	-	-	
4	Breast Cancer Screening (CBE)	<b>468</b>	18	0	0	18
5	Cervical Cancer Screening (VIA)	<b>468</b>	36	2*	15	21
6	Prostate Cancer Screening (DRE)	<b>420</b>	42	-	-	11
7	General consultation	<b>2292</b>	-	-	-	
8	Cardiology	<b>286</b>	-	-		
9	Dental	<b>399</b>	-	-	-	
10	Ophthalmology	<b>440</b>				
11	Surgeries	<b>462</b>	-	-	107	-
12	Non-registered Vitals	<b>300</b>	-	-	-	-
13	Pharmacy	<b>4208</b>	-	-	-	
<b>Total seen</b>		<b>4208</b>	<b>54</b>	<b>2*</b>	<b>122</b>	<b>39</b>

\* Suspected positive for cancer and referred



## 1.6. MISSION IMPACT ON THE COMMUNITY

### ✓ CASEC – Cancer Awareness Screening Early detection and Care

- ◆ This year the Patcha Foundation provided FREE comprehensive medical and surgical services to over 4208 people.
- ◆ CASEC was accessed by thousands who would otherwise not have access to comprehensive health checks in their life time.
- ◆ Free medications and particularly a minimum of 3 months' supply of hypertension, diabetes or heart medication when prescribed were dispensed.
- ◆ Consultation and surgery was provided to inmates at a principal prison.

### ✓ Partnerships:

The Patcha Foundation forged new alliances and broadened the services provided by current partners.

- ◆ Cameroon's Ministry of Health joined the medical mission for the first time through the National Cancer Control Committee (NCCC) which provided all GYN, breast and cervical services.
- ◆ The St. Elizabeth Cardiac Center, Shisong performed more thorough cardiac examinations through EKG and ECG testing.
- ◆ ASCOVIME covered surgical, ophthalmology and dental services as well as transportation for the volunteer pool.
- ◆ HIAMS students played a more active role in managing logistics and other services pre, during and post mission.
- ◆ Patients requiring specialized care e.g. cardiac cases were referred to partner institutions for follow up.

### ✓ Benefits to student participants:

- ◆ This year the medical mission was host to medical students from Howard University in Washington, DC; Drexel University in Philadelphia, PA; and nursing and allied health students from HIAMS, Buea.
- ◆ Participation in the medical mission gave the students the opportunity to provide healthcare services and practice their clinical and surgical knowledge in actual patient care settings under supervision, and to improve on skills. For some of the HIAMS students this was their third year with the medical mission.

✓ **Community health education:**

- ◆ The educational sessions held by nutritionist Mme Temfack Fogang Therese were well appreciated by participants at both sites. Mme Temfack would hold discussions with participants as they waited for their vital signs or cancer screening. The focus of the sessions was on eating right for a healthy living.
- ◆ The team from the NCCC educated women on cancer, the importance of screening and early detection.
- ◆ The GP's educated men on the importance of cancer awareness, prostate cancer screening and early detection.
- ◆ The triage nurses counseled participants on hypertension and diabetes prevention and management.
- ◆ Condoms were distributed and HIV prevention counseling given by members of ASCOVIME.

✓ **Expanding the spirit of volunteerism:**

- ◆ This year's mission saw a record number of volunteer registrations. The impact of past medical missions and the trust that the foundation has gained from both the community and medical professionals have spiked an increase in medical and non-medical people seeking to be part of the event, to donate their time and expertise to help their communities. This is a new phenomenon. The volunteerism bug seems to have come to stay in Cameroon.

✓ **CASEC ripple effect:**

- ◆ The volunteers that attended the mission came from every sphere of Cameroon, and have taken the Patcha Foundation CASEC message back to their respective home towns. This expands the reach of the CASEC message and promotes awareness about cancer and other chronic diseases in distant communities and rural areas.
- ◆ Medications, medical equipment and supplies left over from the mission were donated to clinics, hospitals, prison health centers and host institutions. They are intended to be dispensed at no charge to meet the health needs of the disadvantaged. These donations also serve to expand the impact of the medical mission and spread the CASEC message even wider.

## **1.7. MEDICAL MISSION 2014 AND 2015 MAIN STATISTICAL COMPARISON**

This year, the Patcha Foundation impacted 4208 lives, 473 more than last year's 3735. The number would have been higher had there not been an overflow from Edea resulting in 300 people consulting twice.

More surgeries were performed this year. In both Dschang and Bamenda in 2014, 13 surgeries were performed. This year 107 surgeries were performed, 94 more surgeries than last year. This increase can be credited to the collaboration of the dynamic surgical team.

This year there were 681 more pediatric consultations and 400 more vital signs screening than in 2014. This can also be attributed to the dynamic physicians as well as the triage nurses and the respective teams that worked these units.

This year 411 less breast screening, 475 less cervical screening and 169 less prostate screening were performed than in 2014. There were also 227 less dental consultations. The reason for less consultations and screenings in these units may be due to the fact that on the first day of the mission at each site, people are more apprehensive at getting screened for certain diseases than on day two. Also for this 2015 mission, people came with expectations to have their eyes checked first. This was the first CASEC medical mission that provided an Ophthalmology unit.

There were also 76 less cardiology consultations than in 2014, most likely due to the fact that more comprehensive testing (EKG and ECG) was being provided for the first time during the medical missions.

#### **1.8. MEDICATION AND MEDICAL SUPPLIES**

- ✓ This year, the Foundation received medication and supplies worth about 1,026,000,000 FCFA (1.8 million dollars). In addition to supplies and equipment shipped ahead, about 2750 pounds of medications and supplies were hand carried to Cameroon for the medical mission as stipulated by the donors. Ocean freight transportation was through Transit & Procurement Services, Inc, Baltimore, MD; and air transportation was through Brussels Airlines.
- ✓ The bulk of the donations came from Direct Relief, Americares, Brother and Brothers Foundation, Kingsway charities, Med Share, and Restoring Vision, with smaller but very much needed donations from Dr. Banyo Ndanga and Medicap Pharmacy; Dr. Marie Bibum and State Pharmacy; Dr. Dorine Takusi and Zonetak Pharmacy; Holy Cross Hospital, Silver Spring, MD; Dr. Cletus Fonmedig and Rosedale Smiles Family & Cosmetic Dentistry; Dr. Marc Baker, Dentist, East Norriton, PA; Dr. Anne Burnley Ekiti; Dr. Marianne Siewe; Dr. Georgette Bibum; Dr. Asek Makia; Ms. Patricia Green; Mrs. Joan Foretia; Ms. Gladys Njem; Mrs. Etame; and members of the Patcha Foundation.
- ✓ However, the foundation did not obtain enough cough/cold/pain medications for children, or vitamins supplements.

### 1.9. MEDICAL MISSION EXPENSES

	<u>US \$</u>	<u>**FCFA</u>
Medication and Supplies Purchased in USA	9,920	5,654,440
Shipping of Medication & Supplies from USA	13,344	7,605,795
Air Travel	18,513	10,552,410
Planning and Publicity	1,953	1,113,400
Lodging, Feeding, Security	10,535	6,005,000
Cardiology Expenses	4,314	2,459,000
Transportation in Cameroon	1,100	627,000
Imprinting, Miscellaneous Expenses and Medical Supplies in Cameroon	2,306	1,314,685
Photocopies, and Printing	715	407,647
Water and Beverage	554	316,000
Media, Video and Pictures	711	405,000
Estimated Value of Donated Medications and Medical Supplies from USA	1,800,000	1,026,000,000
<b>Total Expenses</b>	<b>1,863,966</b>	<b>1,062,460,377</b>

\*\* Exchange rate during the mission: 570 FCFA = 1\$

### 1.10. PARTNERS / VOLUNTEERS

The success of the 2015 Medical Mission is attributed to the efforts of our partners and volunteers. Our primary partners this year included the host institutions (the Edea Regional Hospital Annex and the Mpuma Nwet Medical Centre in Nziou, Kribi), the Association des Competences pour Une Vie Meilleure, (ASCOVIME), the National Cancer Control Committee (NCCC), the St. Elizabeth Cardiac Center, Shisong, the Protestant Hospital Ndogbati, Cite Sic Douala, and the Higher Institute of Applied Medical Sciences (HIAMS), Buea.

The foundation maintains a core group of medical and non-medical volunteers that are an integral part of its regular activities including the medical mission. One such group of volunteers has been fondly labeled "Our Young Doctors". Drs. Walters Arrey, Ellis Morfaw, Xavier Tchetrya, and Baudelaire Njankou, were joined this year by Drs. Judwin Ndzo, Vitalis Fambombi and Tiayah Munge, and Drs. Irene Wakam and Mathilde Mbouck-Samnick.

Other core members of the volunteer team this year include triage nurse Esther Chibayere, RN; Mme Therese Temfack, dietician; Bah Bonie Chungong; Rosemary Atanga; Melanie Foju; Mary Tomdio; Prudentia Essake; Joan Foretia; Brian Njotsa; Susan Mufor; Dr. Samuel Dongmo; Ivo Tasong; Gladys Njem; William Nkem; Linda Ngachie; Adeline Sede Kamga; Bernard Besong; Tiara Njamfa; Reina Tchami; Brice Tibab; Ettando Emmanuel; Teh Regan Bin and Kelly Blaise

Mumah, video and camera; as well as Patcha Foundation's management teams from the USA and Cameroon.

Within Cameroon, volunteers came from the Littoral, SW, NW, East, and Central Regions.

## VOLUNTEERS

<b>VOLUNTEERS FROM USA</b>	
Mrs. Stella Patcha Adamu Mrs. Esther Chibayere Mrs. Rosemary Atanga Mr. Ivo Tasong Mrs. Joan Foretia Ms. Gladys Njem Mrs. Marie Patcha Jones	Bah Bonnie Chungong Dr. Irene Wakam Dr. Samuel Dongmo Ms. Linda Eldora Ngachie (Howard University) Mr. Hong De Sa (Drexel University) Ms. Heidi Chen (Drexel University) Ms. Carlos Rohrbach (Drexel University) Ms. Diane Sun (Drexel University)
<b>VOLUNTEERS FROM UK</b>	
Dr. Mathilde Mbouck-Samnack	Ms. Melanie Foju
<b>VOLUNTEERS FROM CAMEROON</b>	
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## PARTNERS

<b>ASCOVIME</b>	
Dr. Bwelle Georges- Chirugien Dr. Nathalie Nyemb- Anesthesiste Dr. Lionel Doum- Interne En Chirurgie Dr. Ismael Tchoffo- Dentiste Dr. Tym- Interne En Chirurgie Dr. Bisay- Interne En Chirurgie Dr. Notue – Interne En Chirurgie Dr. Ngaleu- Medecin Dr. Koupie- Anesthesiste	Dr. Leonid Daya- Medecin Dr. Cyrille Tchopkeng- Medecin Etame Fifi- Infirmiere Irene Kamga - Infirmiere Christiane Edongo - Infirmiere Linda Takwi – Infirmiere Anesthesiste Rostelle Masso- Etudiante En Medecine Justin Eyong- Etudiant En Medecine Zeng Anicet – Charge Du Bloc Operatoire Meva'a Stephane – Chauffeur Ascovime
<b>ST. ELIZABETH CARDIAC CENTRE, SHISONG</b>	
Sr. Nkenglefac Jethro Sr. Delfine Dzekashu	Dr. Tantchou Tchoumi Jacques Cabral Mrs. Barah Nicoline Yinyuy Mr. Ngoran Peter Wongibe



<b>THE PROTESTANT HOSPITAL NDOGBATI, CITE SIC DOUALA</b>	
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### 1.11. MEDIA REPORTS

Cameroon Radio & Television (CRTV) provided pre-mission coverage through the popular programme Luncheon Date. Catholic Radio in Edea also provided pre-mission publicity. Canal 2 International covered the main event. A documentary of the mission was also produced by Alenne Menget while Cameroon Tribune newspaper published articles about the event.

### 1.12. MISSION CHALLENGES

The 2015 medical mission to Edea and Kribi was a success. However, this success was accompanied by some remarkable challenges. This was due in part to the following:

- **Volunteers:**
  - ◆ Even though this mission registered a record number of volunteers some of those confirmed cancelled last minute sighting schedule conflicts. This resulted in a

shortage of manpower in certain key areas which affected the work pace and overburdened the team.

- **Equipment:**

- ◆ Because of the unavailability of a microscope the team could not perform cataract surgery. Attempts to rent the only microscope we could find in a town more than 200 miles away were unsuccessful. This was extremely disappointing since the Kribi Mpuma Mwet Medical Center had pre-registered 259 cataract cases.
- ◆ The foundation needs a lightweight portable dental chair for the missions. Some procedures could not be performed due to the lack of a chair. These patients were referred back to dental units in hospital for a negotiated reduced fee. Last year the foundation invested in 2 dental chairs that turned out to be too heavy and cumbersome to transport and therefore could not be used during the mission. They have been donated to local health centers.

- **Limited budget:**

- ◆ CASEC 2015 suffered from severe budget constraints that made planning very difficult. The foundation relies on, and is grateful to, a narrow pool of donors. Attempts to generate sponsorship have been hindered by the false notion that all foundations are financially endowed and should be giving rather than requesting support.

- **The planning phase:**

- ◆ Planning for this year's medical mission was the most challenging so far. There were countless trips to Yaoundé to meet with the Minister of Health, Minister of Finance and the Chair of the NCCC for approval of the mission and secure exoneration for mission supplies brought into the country.
- ◆ There were also numerous trips to Edea and Kribi to scout and confirm the sites and other logistics (volunteer accommodation, transportation, feeding) and garner support of the respective communities and leaders. In some instances the team encountered some hostility but persevered.

### **1.13. RECOMMENDATIONS FOR FUTURE MISSIONS**

The selflessness of volunteers is an indication that the spirit of volunteerism is feasible within our local context. More volunteers are thus encouraged to sign up for future missions organized by the Patcha Foundation in order to continue assisting the ailing populations of Cameroon. Other recommendations include:

- ✓ Secure a dedicated dental team comprised of dentists, dental hygienists and dental students, and necessary dental equipment.
- ✓ Secure a dedicated ophthalmology team with the necessary equipment to perform cataract surgery.

- ✓ More sponsors and partners to join the Patcha Foundation in the fight against Cancer and other diseases in Cameroon. This would help reduce the financial burden on the Foundation and expand the services provided.

#### 1.14. APPRECIATION

The Patcha Foundation continues to honor the selfless spirit of members, partners, volunteers and donors. Without these resources put together the mission is at stake. **THANK YOU** for accepting to serve the people of Cameroon. Thank you for caring about the poor and underserved. Though it is difficult to mention everyone here, special gratitude goes to:

- ◆ Dr. Georges Bwelle, the Patcha Foundation Cameroon Vice Chair, and the entire ASCOVIME family.
- ◆ St. Elizabeth Cardiac Center Shisong, headed by Sr. Jethro Nkenglefac.
- ◆ National Cancer Control Committee, headed by Prof. Doh Anderson.
- ◆ Professor Njock Louis Richard, Director of the Edea Regional Hospital Annex for your hospitality and generosity.
- ◆ Mr. and Mrs. Nathan Simb of the Mpuma Mwet Medical Centre for your hospitality and generosity.
- ◆ MICOTEL Hotel in Edea is well appreciated for the wonderful service rendered to volunteers.
- ◆ Hotel Pre Carre, Kribi for wonderful services given in a beautiful seaside setting.
- ◆ Howard University medical student from the USA who continued the tradition of medical mission volunteers from the institution.
- ◆ The Drexel University medical students from the USA who worked tirelessly in the pharmacy and Eye Care unit.
- ◆ The HIAMS Allied Health students for continuing the tradition of being a core unit at the medical missions.
- ◆ The staff of the Edea Regional Hospital Annex, and the staff of the Mpuma Mwet Center in Kribi.
- ◆ All donors, including major donors listed here:  
**From Cameroon** - Manfred Tumban, Eko Roosevelt, Peter Ini, Emmanuel Patcha, Chief Charles Taku, Bibiana Taku Mbiaoh, the Fofungs, Henry Kiven, the Lifongos, Eric Ngwa, Mary Tomdio, Laura Kamguez, Collins Ajifack; Asheri Kilo Fofung, Rose Nyang, Mr. Tanjo, Richard Meliko, Augustine Ngongban, Perpertua Nche, Yennict Njinyah, PartyGig, Alenne Menget, Chanceline Ndankeu and Jacinta Satia.  
**From USA** - KWD, Dr. & Mrs. George Okang, Judith Nwana, The Gazelles, Ladies of Cameroon, John Foretia, Ernest Njaba, Henn Orjiako, Roger Hongla, Nicole Rabiou, Craig Jones, Dr. Georgette Bibum, Dr. Roselyn Itoe, Dr. Cletus Fonmedig, Dr. Solange Nono, Dr. & Mrs. Joseph Nkwanyuo, Dr. Marianne Siewe, Dr. Kalambayi Kabasela, Louis Dongmo-Zebaze & Agnes Mbouck, , MariAnne Nkamsi & Joel, Augustine Bibum, Olivia Nono, and Moiti Namata-Elangwe
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- ◆ Mission cameraman, Kelly Blaise and videographer, Teh Reagan.
- ◆ Mr. Manyo Besong for contribution and support of the newspaper articles.
- ◆ PartyGig Cameroon for wonderful imprinting and the mission T-Shirts.
- ◆ Mr. Chrys Atanga and Transit & Procurement Services, Inc, Baltimore, MD; Brussels Airlines for assistance with transportation of medication and supplies, and Edith Tengen, travel agent.
- ◆ Most of all, immeasurable gratitude to ALL VOLUNTEERS, medical and non-medical. Award certificates were presented to volunteers at the end of the mission.



## 1.15. 2015 MISSION PICTURES

See more on [www.patchafoundation.org/medical-mission-program/](http://www.patchafoundation.org/medical-mission-program/)











*Please support our work*

**Partner with us ~ Donate ~ Volunteer for a medical mission**

**Spread the word**

**[www.patchafoundation.org](http://www.patchafoundation.org)**

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**TOGETHER LET'S FIGHT CANCER AND...WIN!**