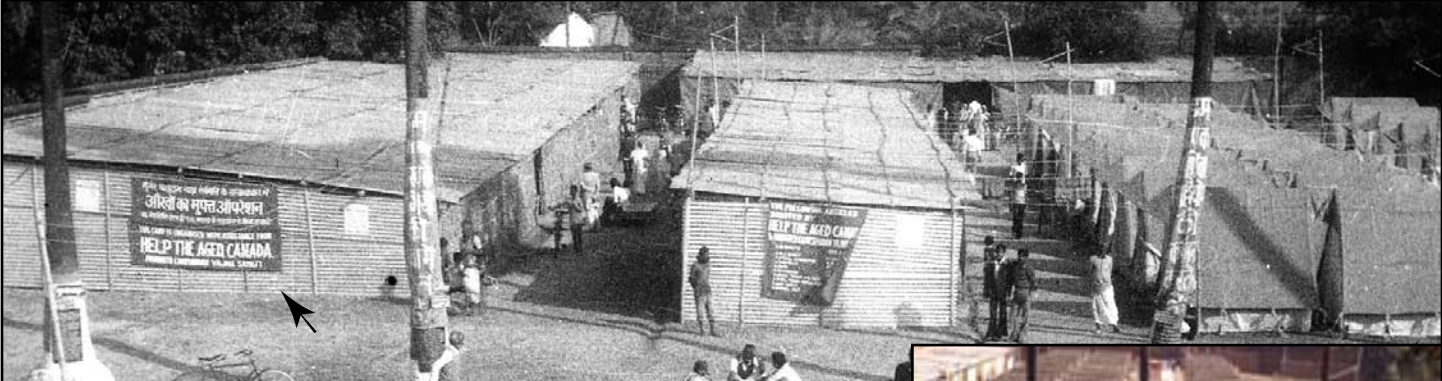


OUR \$37 SOLUTION FOR BLINDNESS



Twenty-five years ago, cataract surgeries were completed in army tents and barracks that were set up in rural areas. The eye camp in these two photos was organized by Help the Aged (Canada) (see sign on wall).



This is what one of the "recovery rooms" for cataract patients looked like twenty-five years ago.

Restoring sight to the elderly poor has been one of Help the Aged's important objectives since our creation in 1975. Cataract surgeries have come a long way since that time and we wanted to offer you a brief history of how our eye care program has evolved in India.

Twenty-Five Years Ago: Tents and Flashlights

by Pierre Barbeau, Executive Director

Twenty-five years ago, cataract surgeries in rural parts of India were done in large army tents and barracks which were temporarily set up outside villages where "eye camps" were organized by Help the Aged and other charitable organizations. Everyone in the village with eye problems was invited to be screened free of charge for cataracts. The diagnostic tool of choice at that time was the flashlight which was not only used to spot cataracts but also served as the only source of lighting for the physicians during surgeries inside the tents or barracks.

Although the idea of tents was cost efficient and could assist many people in rural areas who didn't have any form of transportation, there were numerous problems with infections. Specifically,

there was no sterile operating room and patients with dirty clothing sleeping on the ground in the tents or barracks were kept in close proximity following the surgeries. Also, the quality of the surgeries was a major problem due to the lack of proper equipment, no electricity and the poor training provided to local doctors and nurses.

Following the surgeries, patients were not allowed to return to their village for two days in an effort to reduce the number of infections. Patients were provided with food by their relatives during the recovery period inside the tents and barracks. Later on, eyeglasses would be provided free of charge.

Fifteen Years Ago: From Tents to Warehouses

Primarily because of difficulties associated with the numerous infections following surgeries in tents, a gradual shift began to happen in rural areas. Charitable organizations had limited funds and could not afford to take thousands of blind, destitute seniors from villages to city hospitals. There were also serious overcrowding problems at most of these hospitals.

With insufficient financial resources to build their own hospitals, many charitable organizations like Help the Aged rented empty warehouses or buildings



Patients were fed by family members who waited for them outside.



The recovery room wasn't much better during the "empty warehouse" period of cataract surgeries. However, patients were not sleeping on the ground and the amount of dust was greatly reduced.

on a temporary basis during the "eye camp season" (October to May). These buildings were far from ideal, but were more sanitary since they could be thoroughly cleaned before the patients arrived. There was however a problem with transportation since many patients had to walk very long distances to receive the surgery.



Following surgery, patients would sleep on the floor side by side in empty rooms or in the halls (see photo). The operating rooms were also quite primitive since there was no sterilization, no electricity in many cases and the operating table was sometimes as elementary as a wooden kitchen table covered by a piece of burlap (see photo).

Fifteen years ago, cataract surgeries moved from army tents and barracks to abandoned or empty warehouses and buildings. In many cases the operating table was really a kitchen table covered by a piece of burlap. Flashlights were frequently used due to the lack of electricity.

AIR CANADA



We are very grateful!

During the last 15 years, we have received \$150,000 in complimentary air tickets from Air Canada and over \$250,000 in grants from the Alberta Wild Rose Foundation to support our projects.



Ten Years Ago: From Warehouses to Hospitals

In terms of our eye care program in India, a great leap forward took place ten years ago when we started working in various hospitals, particularly with the MANJARI SANKURATHRI Memorial Foundation hospital in Kakinada, Andhra Pradesh. Dr. Chandra Sankurathri lived and worked in Canada most of his life until he lost his wife, Manjari and two children in the 1985 Air India explosion which killed 329 people near Cork, Ireland. At the age of 45, Chandra decided to resign from the Department of Health and Welfare, sold his house in Ottawa and returned to his birthplace in India. There he used his pension plan money and his other savings to build a three-room schoolhouse and eye hospital in memory of his wife and children.

We were introduced to Chandra by Sarma Vishnubhatla, volunteer director of MSMF, a small Canadian charitable organization raising awareness and support for the charitable work being done in Kakinada. For the first time, we started doing surgeries in the sterile operating room of an eye hospital with very competent staff and modern

During the last eight years, all of our cataract surgeries and glaucoma treatments have been completed at the Srikirana Hospital in Kakinada. Modern equipment, sterile operating rooms, antibiotic eye drops and skilled surgery are the norm. From left to right, Help the Aged Board member and volunteer MSMF Director Sarma Vishnubhatla, CIDA's Françoise Mailhot, Hospital Director Chandra Sankurathri (standing) and Dr. V.K. Raju, co-founder of Srikirana (sitting)



equipment. Patients were screened for cataracts and glaucoma in their villages, driven to the hospital in a donated bus, provided with antibiotic eye drops after the surgery and returned home a day later.

One of the biggest improvements was the introduction of permanent intra-ocular lenses to replace eyeglasses. Since most of our elderly patients were field workers, the eyeglasses they received after surgery were quickly damaged because of the nature of their work. As a result of manual labour under the hot sun day after day, their glasses would repeatedly slip off and land on rocks and stones. The scratches and chips would keep getting worse, making the glasses impractical to wear. Providing elastic eyeglass straps proved to be ineffective since they would be lost in a few months. The only permanent solution was the introduction of the tiny intra-ocular lenses which were implanted during surgery and which eliminated the need for glasses.

Our Most Recent Success Story

The following email and photo were received just a few days ago from Kakinada, India.

“Mr. Pentaiah Peddireddy is a seventy-year-old man living in a small village called Mangathurti near Pithapuram. He lives with his wife in a small hut. He used to work as a farm labourer in the nearby fields. Mr. Peddireddy has two sons, both working as farm labourers but living elsewhere.

Due to failing eyesight, he had to stop working and as a result was afraid to go for an eye exam because he did not have enough money for surgery.

Two months ago, one of his neighbours told him that a free eye camp was going to be conducted by Srikirana in Pithapuram. The neighbour also offered his help to take him there. Mr. Pentaiah attended the screening camp and was diagnosed with cataracts

in both eyes. He was advised to undergo free cataract surgery with intra-ocular implantations. He gave his consent and both his eyes were subsequently operated at Srikirana Institute of Ophthalmology on two separate days.

Today Pentaiah can see without any eyeglasses and he is able to resume his work.

When we spoke to him, he was very happy and said “I did not know that cataract surgery was so easy and the outcome of the surgery would be excellent. I am grateful to all the members at Srikirana for looking after me with compassion and care while I was at the hospital. I am also very grateful to Help the Aged for their help.”



For Your Information...

- Each cataract surgery costs us \$37 including antibiotic eye drops, intra-ocular lenses and bandages.
- With your support, 3,500 blind elderly people will receive cataract surgeries or glaucoma treatments this year.
- More than 15,000 seniors will be screened in different villages in Andhra Pradesh, India to identify these 3,500 patients.
- During the last fifteen years, more than 51,000 destitute people have had their cataracts removed.
- Cataract surgeries are completed in 15 minutes by qualified surgeons.
- Experienced surgeons complete 50 cataract surgeries a day.
- A local anaesthetic is used for two injections, one near the eye and one close to the ear.
- Patients are kept overnight at the hospital and provided with antibiotic eye drops. Drops are used every day for four weeks.
- All cataract patients receive permanent intra-ocular lenses.
- All Help the Aged patients are poor and there is absolutely no fee charged to them.

Many Patients Have Been Blind for Over 10 Years

Most destitute elderly people have very thick cataracts (almost half a centimetre). The cataracts are round and have a creamy colour. The removed cataract feels spongy and has the consistency of a pencil eraser. Because the cataracts are so thick, seniors are completely blind and cannot move around freely unless one of their children or grandchildren guides them, usually with a stick or a tree branch. The only advantage of such thick cataracts is that they can easily be spotted since their milky colour contrasts clearly with the brown eyes of most patients. Unfortunately, the seniors we help are so poor that they cannot afford the \$37 needed to have their cataracts removed. Many have been blind for more than ten years and have never seen their own grandchildren. **They are counting on you for the opportunity to see again.**



Children or grandchildren must serve as guides for their blind parents or grandparents.

All donations to Help the Aged will be tripled through matching grants from CIDA and the Alberta Wild Rose Foundation. For each \$37 gift that you give, four patients will have their cataracts removed.



We Have A Long Waiting List!

Please help them by generously donating to Help the Aged.

Thank You!