

**Click above to read full Newsletter*

Donate today to help us save a life

Donate Today!



HAEFA

BEYOND BORDERS



HAEFA CLINIC EXTENSION

Introducing Ultrasound Facility for Pregnant Women at HAEFA Balukhali HP (Camp 09):

Since their mass influx in 2017, Health and Education for All (HAEFA) has been providing free essential medical care, follow-up treatment, and rapid referral services to Rohingya refugees (FDMN) at its two medical clinics in Kutupalong (Camp 1W) and Balukhali (Camp 9).

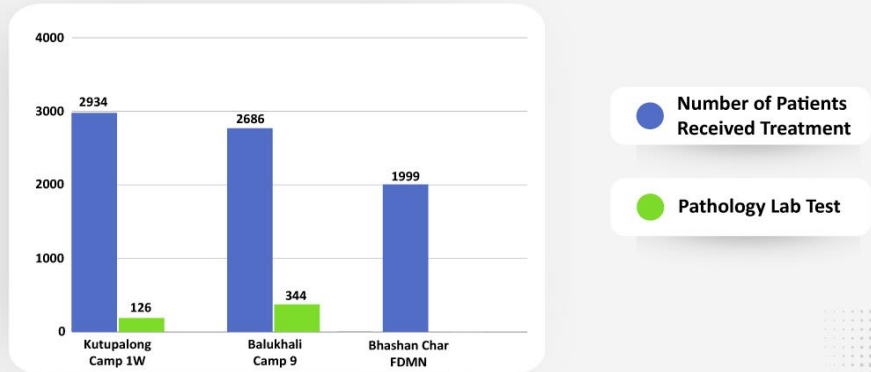
HAEFA is implementing new facilities at Balukhali HP (Camp 9). The ongoing construction includes Registration Corner, a gender-specific waiting area for patients, a gender-specific consultation room with examination space, a separate passive screening room, a sample collection booth, Centre for Ultrasonogram, Breastfeeding Corner, Female patient consultation room, Adolescent Corner, Mental Health Counselling Corner, Inventory Space, Dispensing Corner, and Flu Corner.

Since 2021, HAEFA's Pathological Diagnostic Laboratory has provided the FDMN community with essential diagnostic services that has significantly enhanced the accuracy of diagnosis and long-term management planning, thereby preventing a vast array of diseases complications.

With the installation of an ultrasound scanner, HAEFA is on the brink of achieving yet another significant milestone. This addition will enhance service delivery in both obstetric and non-obstetric disciplines. This can monitor foetal development, detect early pregnancy complications, thereby reducing maternal and foetal morbidity and mortality over time. In addition, it will improve the diagnosis and prognosis of numerous other diseases.

The unwavering passion and consistent action that HAEFA displays towards the Rohingya refugees demonstrates the organization's dedication to making a difference in the lives of marginalized people.

Health care delivery to FDMN population from HAEFA health camps in August



Visiting Patient at Camp 9 for Health Care Check-up

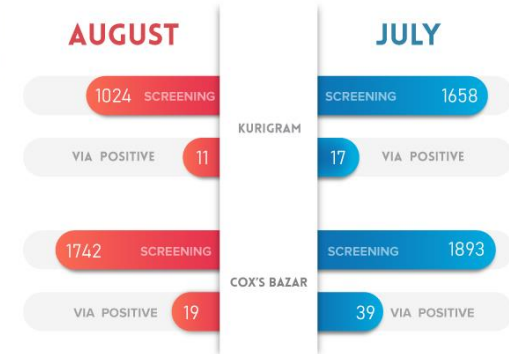
Family Planning Services

HAEFA's teams continue to conduct a monthly Family Planning session at FDMN Camp

August 2023

349 people were provided with different family planning care in the form of free condom, contraceptive and family planning counselling.

Cervical Cancer Screening Update : August 2023



HAEFA's New Endeavour: Mobile Health Clinics for Host Communities

In 2022, HAEFA introduced a weekly Mobile Health Clinic dedicated to improving the quality of life for neighbouring communities that provides free primary medical care services. The Mobile Medical team of HAEFA provided primary health care services for more than 286 host community members



HAEFA's Ongoing Projects

** Click on each to learn more*



Healthcare Services for Rohingya Refugees in Kutupalong, Balukhali and Bhashan Char



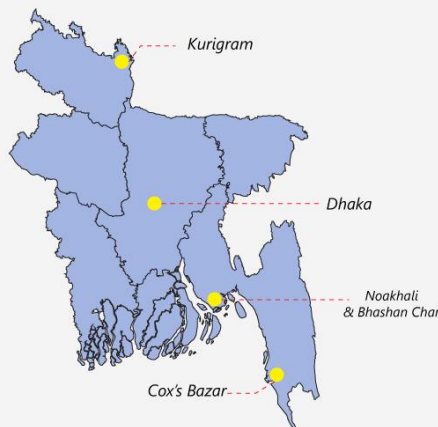
Cervical Cancer Screening in Kurigram and Cox's Bazar



Mobile Medical Health Clinics for Host Communities in Ukhiya



NIROG: Empowering NCD Care through Digitalization in Noakhali



ARTICLES

** Click to read full article*

- ➔ **What Should We Know About Cervical Cancer - The Only Preventable Cancer**
- ➔ **Member Spotlight: Introducing Dr. Chitralakha Kar Tonny**
- ➔ **A Successful Treatment Approach: Cor Pulmonale in a Refugee Patient**
- ➔ **Meet HAEFA's Editorial Staff!**

What Should We Know About Cervical Cancer

“The Only Preventable Cancer”

By **Ishan Abdullah**

Cervical cancer is a significant global health concern, including in Bangladesh, where it leads to the death of approximately 6,000 women each year. Early detection can prevent this disease, but a lack of public knowledge may contribute to its high prevalence in the country. HAEFA aims to improve cervical cancer awareness among the more than 50 million at-risk Bangladeshi women and introduce innovative healthcare solutions like the See-and Treat Program.

Cervical cancer is among the leading threats to women's health globally, and Bangladesh is no exception. The country faces alarming levels of risk, with cervical cancer ranking as the second most prevalent cancer among women. Despite being highly preventable when detected in early stages, cervical cancer is estimated to kill 6,000 Bangladeshi women annually. When assessing the factors that contribute to these alarming statistics, screening resource disparity and lack of awareness are pervasive contributors. However, recent research has revealed another key factor in the equation. A study conducted by Islam et al. (2018) suggests that the elevated rates of cervical cancer in Bangladesh may also partly be linked to a deficiency in public knowledge. From the key findings among urban professional Bangladeshi women, although all participants were aware of cervical cancer, only half possessed basic knowledge of its cause. As such, this highlights the importance of disseminating knowledge among Bangladeshi women.

Cervical cancer is a slow-growing cancer that develops in the lower part of the uterus that connects to the vagina. Although the disease can happen to a female of any age, it rarely presents in women under 20 and is most frequently diagnosed between 35-50. The most common cause of the cancer is persistent and untreated infection with high-risk types of the human papillomavirus (HPV), which is a sexually transmitted infection (STI) that frequently occurs in both men and women. HPV is an extremely common viral infection with hundreds of different types; it is believed that 80% of all women will be infected in their lifetime by any type and 50% will be infected by a high-risk type. In 90% of HPV cases, the body's immune system will naturally rid itself of the virus within two years, and before a persistent infection becomes cancerous. However, smoking and HIV are believed to amplify a woman's risk of developing cervical cancer as both weaken the natural immune defense against persistent high-risk HPV infection.

Following infection, the cancer normally proceeds with gradual precancerous cellular changes (dysplasia) that could present with common symptoms like vaginal bleeding and genital warts or without any symptoms at all. For women with healthy immune systems, identifiable cervical cancer may take 15-20 years to develop, while those with weakened immune systems still often experience at least five years before development. If the cancer is not detected and treated within that time frame, the precancerous cells become more invasive and grow uncontrollably. As the cancer becomes more advanced, women frequently experience symptoms such as pain during

intercourse, pelvic pain, urinary incontinence, abnormal periods and discharge, as well as blood in urine. During end-stages of untreated cervical cancer, the disease often becomes fatal as it metastasizes to vital organs such as the lungs, intestines, bladder and liver.

Fortunately, cervical cancer is one of the most preventable cancers, with the CDC estimating that up to 93% of cases can be prevented. Prophylactic HPV vaccines serve as the primary preventive method against cervical cancer and the CDC recommends it for children aged 11-12 before they become sexually active, but it is beneficial to all ages before infection occurs.

The COVID-19 pandemic severely delayed and disrupted HPV vaccines globally as UNICEF estimates that HPV vaccination coverage decreased by 15% since 2019. To reverse this backslide, UNICEF and Gavi, in collaboration with the Bangladesh government, has pledged to make free HPV vaccines available in September of 2023, with girls aged 10-15 receiving initial dosage. This effort is paramount towards protecting women in a country that is among the highest in disease burden, and addition to routine immunization programs will undoubtedly make a significant impact in preventative care.

Alongside HPV vaccines, adopting safe sex practices like using condoms helps safeguard against infection. Abstaining from smoking and refraining from other behaviors that can compromise the immune response further contribute to overall protection. However, the most proactive approach to prevent cervical cancer comes with routine screening at healthcare clinics.

As noted, the slow growing nature of cervical cancer provides ample opportunity for detection and timely intervention. The most common screening method for cervical cancer is a 10-20-minute Pap smear, in which a provider uses a swab to collect cells in and around the cervix, which are then examined for disease under a microscope. The CDC recommends that women begin receiving Pap smears at the age of 21, regardless of sexual activity, and repeat the screening every three years until the age of 65. If HPV infection is suspected after a Pap smear, the provider will confirm the test with a colposcopy and/or cervical biopsy. If follow-up testing confirms a positive result, the care team will recommend immediate treatment options to remove the cancerous or precancerous tissues such as surgery, chemotherapy, radiation and thermocoagulation. When detected and treated in the earliest stage of the disease, survival probability can be observed in 80-99% of women, as compared to 20% at end-stages.

HAEFA hopes to contribute to a greater level of cervical cancer knowledge among the over 50 million at-risk Bangladeshi women, while also providing innovative preventative/treatment methods. Through the single visit See-and-Treat Program, HAEFA's medical teams are readily able to diagnose and treat cervical cancer at its earliest stages. HAEFA has been able to screen almost 70,000 women since 2019. With the power of knowledge and proactiveness, HAEFA continuously supports the fight for the improvement of women's cervical health.

Introducing Dr. Chitrlekha Kar Tonny

Medical Officer At HAEFA



Introducing **Dr. Chitrlekha Kar Tonny**, the Medical Officer at HAEFA, a highly skilled and dedicated professional who plays a vital role in providing medical assistance and support to those in need.

In the small town of Bangladesh, Netrakona, she was born. However, due to her father's transferable job, Dr. Chitrlekha spent her childhood roaming and studying in various places across the country, including Cumilla, Chittagong, Jessore, Netrakona, and Dhaka.

Dr. Chitrlekha's educational journey began at the Netrokona Government Girls High School, where she laid the foundation for her future endeavors. Her passion for medicine led her to pursue her undergraduate studies at Shaheed Ziaur Rahman Medical College, where she honed her skills and

knowledge in the field of medicine. However, when she was admitted to Master's in Public Health (MPH) major in Epidemiology, that genuinely sparked her enthusiasm. Now, she is on the thesis part of MPH. She finds great satisfaction in her Master of Public Health degree because it helps to connect with numerous individuals and listen to their genuine life experiences.

She joined the field of research by taking on a research assistant position. In this role, she conducts scientific research and assists in various studies related to her field of interest. This allows her to gain valuable experience and deepen her knowledge in a specialized area. She also worked in the Telemedicine Platform during the corona pandemic. At this time she feels the importance of preventive medicine.

Throughout her journey, she continues to learn and adapt, gaining expertise in both medical and technological advancements. By combining her passion for medicine, telecommunication, and humanitarian work, she strives to make a significant impact in the healthcare sector and improve the lives of individuals in need. She always wants to learn new things and want to explore with curiosity.

Motivated by the potential to serve those in need, Dr. Chitrlekha joined HAEFA on September 15, 2022. Based on Kurigram, she worked in Ulipur Health Complex for a single visit "See & Treat, where she performed a myriad of essential tasks each day. From monitoring and supervising to tracking the data, support to ensuring the proper use of equipment and maintaining sterility, prescribing medication, and taking biopsy for precancer patients. Her responsibilities encompassed the holistic approach to healthcare.

As part of her role, Dr. Chitralkha also conducted gynecological tests for cervical cancer, a task that not only required technical expertise but also empathy and sensitivity. The reporting and attending meetings further added to her already demanding workload. Nevertheless, Chitralkha faced these challenges head-on, even in remote areas with limited connectivity and unpredictable weather conditions. Also taking biopsy in such a remote area was challenging for her.

One of Chitralkha's most cherished experiences at HAEFA was the opportunity to receive hands-on training from Dr Susan. Learning about cervical cancer through practical tests offered her valuable insights and a new perspective. She credits her mentor, Dr. Abid, for his guidance and cooperation during her journey. She feels fortunate to be part of a supportive team and thankful to the Kurigram team that nurtured her professional growth when she was new to the organization. She added that HAEFA is a field of self-exploration to herself.

Looking ahead, her future goals include pursuing higher degrees from prestigious institutions around the world. She aspires to acquire more degrees and certifications to enhance her expertise and contribute to the betterment of healthcare globally.

When she is actively engaged in her professional endeavors, she indulges in her artistic passions during her leisure time. From Singing, photography, and gardening she finds solace and inspiration in these activities.

Deeply committed to the welfare of all living beings, she dreams of rescuing animals and providing them with a safe haven. Additionally, she aspires to inspire and motivate the youth, helping them fulfill their dreams and aspirations.

The journey of Dr. Chitralkha as a medical officer in HAEFA embodies the true essence of dedication, compassion, and a relentless pursuit of creating positive change. Her unwavering commitment to empowering communities and making healthcare accessible to all will continue to fuel her aspirations and inspire others to follow in her footsteps. Also, she added her favorite quote and motto “Be Positive” and “Keep faith in yourself”

Cor Pulmonale in a Refugee Patient - A Successful Treatment Approach

In July 2023, Abdul Karim (name has been changed to maintain patient's secrecy), a 51-year-old farmer and refugee residing in Ukhiya, Bangladesh, approached the health post of HAEFA seeking help for shortness of breath along with fever which he has been suffering from a while. Having been a regular patient at HAEFA's health camp, his hypertension had been controlled, but he had never sought any treatment for breathlessness. Additionally, he had a history of smoking for more than twenty-five years.

During the physical examination, the duty doctor of HAEFA observed several concerning signs, including swelling around the ankles (bipedal oedema), low oxygen saturation levels, and blood pressure of 140/90 mmHg.

Subsequently, they performed a comprehensive set of tests, encompassing a complete blood count (CBC), urine routine and microscopic test, lipid profile, fasting and random blood sugar tests. The reports indicated several significant findings, including an elevated ESR of 25 mm/hg, dyslipidemia, and the presence of calcium oxalate (3+).

Recognizing the severity of his condition, HAEFA referred Abdul Karim to a higher medical center for further evaluation. His echocardiogram revealed right ventricular hypertrophy, confirming the diagnosis of Cor pulmonale—a condition in which the right side of the heart fails due to long-term high blood pressure in the arteries of the lungs and right ventricle.

Understanding the gravity of the situation, HAEFA's medical team promptly initiated a comprehensive treatment plan. They provided him with proper oxygen therapy, intensified antihypertensive drugs, intravenous furosemide, and montelukast. Furthermore, they strongly advised him to quit smoking, recognizing its adverse impact on his condition.

HAEFA's dedicated team of doctors vigilantly monitored him throughout his treatment journey. Their timely intervention and compassionate care played a pivotal role in his remarkable recovery. As the treatment progressed, his symptoms improved, and he expressed profound gratitude to HAEFA's doctors and staff for their timely recognition of the disease, proper medical advice, and compassionate care during his treatment.

The success story of Abdul Karim illustrates the critical importance of early detection and proper management in cases of Cor pulmonale. Through a multidisciplinary approach, HAEFA's medical team not only controlled the symptoms but also

addressed the underlying medical problems causing pulmonary hypertension. This diligent approach prevented life-threatening complications and provided him with the opportunity to regain his health and well-being.

HAEFA continues to be a beacon of hope in providing exceptional healthcare, empowering individuals like Abdul Karim to overcome challenging health conditions and achieve a renewed sense of life. Their commitment to excellence has made a lasting impact on the lives of countless patients, further establishing HAEFA as a leading healthcare provider in the region.

Meet HAEFA's Editorial Staff!



Dr. Samia Tasneem, *Mentor and Advisor* to the Newsletter Editorial Board. She joined HAEFA in 2020 and serves as the Honorary Chief NCD Consultant. Dr. Tasneem is a Heart Transplant Cardiologist at St. Vincent's Hospital, Sydney, Australia.



Sajia Haque is the *Editor-in-Chief*, as well as the Intern Coordinator for HAEFA. She joined in 2021. She lives in Dhaka, Bangladesh and is a fifth-year medical student at Holy Family Red Crescent Medical College.



Ishan Abdullah is an *Associate Editor*. He joined HAEFA in 2019. He lives in Washington, D.C. and is a first-year medical student at the George Washington University.

CONTRIBUTORS



Areeb Uzzaman

He is currently based in Maryland, U.S., pursuing his undergraduate degree in international business at the University of Maryland, College Park.



Somayea Sultana Mim

She is a 4th year medical student at International Medical College and Hospital, Gazipur, Dhaka, Bangladesh



Tanzina Toma

She graduated with a degree in English Language and literature in 2023 from Ananda Mohan College, Mymensingh, Bangladesh.