Christmas wishes from Benin

ANDREW POTTER

I doubt that Santa Claus will be visiting us in our bush hospital in West Africa this Christmas. As usual, he will be over-subscribed in the First World, busy fulfilling the incessant demands of children brought up to expect bulging stockings full of plastic toys and electronic computer games. We are not envious. There is a burden associated with possessions. It is already an embarrassment to live among a people who, as individuals, could carry all they possess in the equivalent of one suitcase. Probably some of our African colleagues are jealous of what we foreigners wear and carry, but most are content with their lot. As one told me, "As long as I have a roof over my head and enough to feed my family, I am happy." Perhaps we ought to covet his attitude.

That, aside, it does not stop us from letting our imaginations catch fire and dream. What would we like to find on Christmas morning waiting gift wrapped at our bedside or in the hospital? Each person here would make a different choice. Without hesitation our matron from Switzerland would ask for more nursing staff and midwives. The hospital has approximately 60 beds divided among wards for men, women and children, and isolation. Recently we have had only enough nurses to allow one to be on duty at once. We ask of that nurse an impossible task—namely, to supervise national staff aides in their work, to attend to ward paperwork (which even at a bare minimum is time consuming), to accompany the doctor on formal ward rounds, to check on all laboratory investigations, to answer the persistent demands of patients' relatives (who stay in the hospital with the patient), to check on intravenous infusions, and so on. Hence, when we get really sick people who require intensive nursing care the strain can be overwhelming. One example was the young girl with Burkitt's lymphoma of the neck and tonsils who had to have a tracheostomy to relieve the obstructed airway. If our matron could receive three more nurses, she would be very pleased. The midwives' position is desperate, too. We are a referral centre for all difficult obstetric cases. So we receive patients needing Caesarean sections, induction of labour, those having twins or retained placentae, etc. We have only two midwives, one of whom runs the outpatient clinic, the other of whom is matron. Both, therefore, have to leave demanding jobs elsewhere to attend women in labour.

Secretarial help needed

Our administrator, who doubles as our laboratory chief, is an expansive Frenchwoman. She is presently overjoyed that the hospital debt, so burdensome at the start of the year, is now repaid. That does not hinder her wanting to write to Santa. She would like to have a secretary to do the typing, filing, and day-to-day correspondence. That would free her to be personnel officer, troubleshooter, and planner. With administrative offices in six home countries and seven African nations liaison and communication can be a problem. Our administrator would also like a telephone.

The Canadian theatre sister has put in a request for a second autoclave. The first has been here for over 10 years. Many of the valves are past their best and in order to achieve sterility the machine has to be on for longer periods. This is not economical.

As the work of the hospital increases, the burden on the old boiler (the autoclave not the theatre sister) also grows. A second and efficient steriliser would be a godsend. There is a further request from her. We need better overhead theatre lighting. It is an understatement to say that it is frustrating trying to operate in an emergency for an ectopic pregnancy when you can scarcely see into the pelvis. It would be a luxury to have sutures that did not snap when tied, an anaesthetic machine that worked, and a trained surgeon. We must not be greedy.

The nurse in charge of the outpatient clinic desires a scale for weighing babies. The one we have at present only weighs up to four kilograms and can therefore only be used for neonates. What she would like is one weighing up to 20 kilograms with a canvas attachment for suspending the young infants. She also asks for some paediatric intravenous giving sets. Adult-giving sets used for children can be extremely dangerous as there is no control to stop fluid overloading the child. It has happened here. We see many malnourished protein deficient toddlers often arriving grossly dehydrated from diarrhoea.

Our French maintenance man, a veritable jack of all trades, would like an electrician to come and teach him the basics of electricity. Then I can have the ceiling fan for my office that will make it more comfortable when I see patients in temperatures upwards of 85°F. The Kent-born dentist, who in the past 18 months has established a dental clinic at the hospital, would like some patients. Apart from local ex-patriates and missionaries he sees few people. The Africans, who often have appalling dentition, do not yet wish to go to the dentist. So he remains underemployed and we are in danger of losing him without more clients to fill his empty chair.

Apples, chocolate, and a husband

We have three housewives here, English, French, and Swiss-Canadian, with five children and a further two expected any day. Their Christmas lists are pretty long, mostly filled with things for the children. But English apples, Swiss chocolate, and enough fondue to feed the station would be a seasonal treat. It would make a change from yams, rice, and macaroni. We have several single ladies working here, one of whom was honest enough to declare her wish: a husband.

And that just leaves me. What is on my list? Well, if all the others were to receive their wishes I'd be very content. I would be more so if I had a few good English novels, some music cassettes (a catholic taste ranging from church organ music to John Denver), some humorous tapes—for example, the earthy humour of the Two Ronnies or the ridiculous improbability of Monty Python—and enough spare time to enjoy them. Many days I work from eight in the morning until six in the evening, have a meal, and then return to the operating theatre for some emergency. This is a round-the-clock responsibility as, at present, I am alone medically. A second young doctor from Australia is expected in January.

We will be having a happy time over the festive season though rather low key by home standards. One blessing out here is that there are no drinks parties. These have got quite out of hand in England, being almost daily for three or four weeks at the close of the year. We will find time for a hospital show, mutual entertaining for meals, and, of course, the Christmas Day church service. There will be letters and parcels from home. For, despite the demands of our work and its often accompanying frustrations, it is deeply satisfying to provide a caring healing service for people in need. Perhaps you too can have a part in it.

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