

Never-ending tales of patients' plight at DMCH

SHARMIN MEHRIBAN

In an outdoor balcony of ward no-20 at Dhaka Medical College hospital (DMCH), ridden with mosquitoes and with lights and fans out of order, lies Abdur Rahim, a middle-aged man and a victim of a stab injury by a mugger.

In addition to this, he is suffering from a dysfunctional liver and kidney and is breathing profusely despite the oxygen mask placed on his mouth. The stab wound on his right hip is covered with a green layer that could either be an external infection or a side effect of an applied medicine.

It has been a few days since Rahim had been transferred to DMCH from Rangpur Medical College hospital as the latter lacked a kidney specialist. His relatives had heard of DMCH being a 'good' hospital but currently they are disillusioned.

"With the exception of saline, everything else, from the medicines to the cotton gauze used for dressing, are bought at our own expense. The nurses also ask us to do the dressing ourselves," said his brother. He also added that the doctors don't show up regularly despite knowing his critical state and a few minutes of a delay by a doctor could lead to a patient's death.

Rahim's case is just another serious outcome of the negligence, misappropriation of government provisions and inefficiency suffered by most of the patients and their guardians at DMCH, many of whom are the poor, the illiterate and from districts outside Dhaka.

To make it worse, the ward authorities have not transferred Rahim to an indoor cabin despite repeated suggestions by his relatives as they assume that he would 'die anyway' and are not providing any co-operation or guidance in having him transferred to a private

hospital. "All they ask of us is to sign on a bond that states that the hospital authorities would not be responsible for any negative consequences befalling him," said another of his relative.

"I once came for a blood test and a doctor asked me to do it at a private clinic where I had to spend Tk 1,000 for such a test," said a guardian who had an eclampsia patient at ward no-18. He suspects a link between the doctor and the private clinic. He also added some of the nurses could not read the doctors' prescriptions and ask the patient's guardians to read it for them.

Despite the fact that a government hospital is supposed to provide free services and medicines, many of the patients and their guardians have admitted buying most of the medicines from outside. "I had Tk 750 worth of medicines bought from outside the hospital including the injection syringes and the needles," said Ansar Ali, a patient suffering from an urinary infection.

He also added that the nurses and doctors just come and go. This was visualised beneath a nearby staircase where a man and a woman were desperately trying to adjust the intravenous saline inserted in the hand of their minor son while a nurse passed by with an air of "familiarity causes neglect". The couple hurriedly carried their son through the corridor for an X-ray.

"The only things that are free are the beds and the doctor's prescriptions," said another guardian, whose father was lying for the last four days in the same corridor after suffering from an accident. He had to spend Tk 1,600 worth of medicines and blood bought from outside.

Another guardian, whose wife was at ward no-17, referred to

the fourth-class employees, such as the sweepers, ward-boys and the maids whose services the higher authorities can't do without, as being the most 'abusive.' "I had to pay Tk 200 to a maid just to clean up the bed after my wife had a delivery," he added. Another guardian said that he has to pay Tk 10 to a ward-boy just to see his patient.

"We have to bring the bedding and clean it ourselves in case they are spoiled," said a woman whose husband was lying in a bed in a corridor outside ward no-30 for the last 17 days. The patient was transferred from Queen's Hospital at Jessore and suffered from an accident.

In contrast to the patients at the corridors and balconies, the patients inside the wards fare better. "We get some of the medicines from here but we have to buy the rest," said Kulsum, a patient at ward no-15 for the last four days and suffering from post-natal complications. She could not specify the exact amount she had to spend in buying medicines from outside but among them are calcium tablets that are easily available in most pharmacies.

The doctors and nurses write prescriptions for medicines required for patients at the wards. Using the prescriptions, the ward-boys bring the medicines back to the wards from the hospital's medicine store. Guardians of patients or patients themselves are not allowed to collect the medicines themselves.

"Very often, we give an order for 50 packets of saline but in return we get nine packets," said a head nurse at ward no-30. She also said that sources at the medicine store merely say that a such and such medicine are not available but does not say why.

The officer-in-charge at the medicine store refused to comment without permission from the director of DMCH.

Other authorities at the hospital gave the same response. The director could not be approached, as he was 'busy'.

Some of the guardians agreed with the possibility that the ward-boys, in connivance with the maids and other fourth-class employees, could be stealing some of the provisions from the hospital, such as blankets and medicines, for personal or commercial use.

"Evaluations on doctors and nurses are submitted to higher authorities but no such evaluations are required for the fourth-class employees. Consequently they do things and get away with it," said a guardian.

Ahsan Ullah, an elderly patient at ward no-22 for the last three days and suffering from a paralysis on the left portion of his body, summed up the basic problem at DMCH. "I was once admitted at this hospital during the Pakistan era. The provisions and services were far better then. There was also a sense of commitment and humanity among the hospital staff which is lacking at present."



A DMCH ward crammed with patients and attendants.

STAR PHOTO

4x2

6x3

10x3

8x2

6x3