

Rotarys Läkarbank Kenya handbok för tandläkarverksamhet vid mobil klinik

Barntandvården, behandlingar och profylax, skall ha högsta prioritet. Vuxna ska inte avvisas, de erbjuds i mån av tid basal tandvård. Enkel samordnad statistik ska fyllas i på ett likartat sätt av utresta tandläkare och sammanställas av RDS

1. Utrustning i bilen:

- Fällbar patientstol samt operatörsstol
- Mobil utrustning i väska; lågvarvsmaskin, highspeed, sug
- Härdlampa för ljushärdande fyllnadsmaterial (laddbar o sladdlös)
- Operationsbelysning, ev. laddbar, annars batteridrivnen. Minst tre pannlampor och kanske även en operationsbelysning på stativ
- Bensindriven kompressor om sådan inte ingår i "mobila väskan"
- Litet bensindrivet elverk, typ Hondaaggregat, för att kunna ladda batterier om vanliga elnätet inte fungerar
- Bärbar röntgenapparat inklusive röntgenbilder med framkallning.
- Handinstrument, typ speglar, undersökningssonder, tänger och hävlar Borr av varierande typ och storlek för excaveringar och enklare lagningar samt även borr till eventuell rotseparation
- Hygienartiklar som engångshandskar, munskydd, kompresser, servetter, skyddsglasögon
- Käril med tättslutande lock att förvara smutsiga instrument och desinfektionsvätska i. Dessutom tryckkokare för sterilisering
- KaVo-spray för rengöring av vinkelstycken

2. Behandlingar som utförs med mobil enhet: (efter screening)

- Extraktioner
- Lagningar, i huvudsak med Glasjonomer. Compositfyllningar i fronten

- Depurationer
- Akuta endodontiska ingrepp , 13—23. Inlägg: Calasept, förslutning med Glasjonomer eller Composit
- Traumabehandlingar
- Enklare oral kirurgi

3. Material som finnas med:

- Glasjonomer, ljushärdande
- Composit
- Calasept
- Bedövningsmedel
- Spolning i form av Klorhexidin
- Självabsorberande suturer
- Spongostan

4. Läkemedel:

- PcV, finns tyvärr bara 250 mg tabletter. Använd som förstahandsval till barnen!
- Amoxicillin
- Flagyl
- Alvedon

5. Att tänka på efter extraktion:

- Låt patienten sitta kvar till blödningen stannat! Skicka aldrig iväg patienten med kompress i munnen! Risk att den blir smutsig eller inte tas bort. Informera patienten om hur en eventuell blödning hemma skall tas om hand.
- Suturera med självabsorberande sutur om det är svårt få blödningen att stoppa. Vid behov stoppa i Spongostan.

6. Hygienrutiner :

- Vid uteverksamhet skall tvätt sprit finnas med samt 2 förslutbara kärl. Ett med sprit (Propan) att rengöra speglar sonder med vid screening och ett med Klorhexidin att lägga blodiga instrument i
- Dentala vinkelstycken, turbiner och tandsaneringsinstrument - mellan varje patient :- en inre grovrengöring utförs genom att spola igenom det med vatten från utrustningen innan det kopplas bort - yttre smittrening görs genom att torka av instrumentet med ytdesinfektion

- Borr och endofilar kallsteriliserar; de förvaras i Propan-2-ol i 10 minuter (smittrening), borsta rent, därefter ytterligare 10 minuter i Propan.
- Endodontifilar: Under endodontibehandling sätts filarna i skumplastkudden som är indränkt med Dakins /klorhexidin/ lösning för att undvika intorkning och underlätta rengöringen. H-fil och K-fil upp till storlek 20 kasseras (räknas som engångs).

OBS! kassera ej övriga filar som använts under behandling. H-fil och K-fil steriliserar max 5ggr. K-fil Nitiflex filar byts en/gång i halvåret och vid behov - Lentulonål granskas och rengörs och byts vid behov.

Vid hemkomst:

- På eftermiddagen rengöres vinkelstyckena enligt instruktion som medföljer KaVo spray
- Mobil utrustning rengörs enligt fabrikantens instruktion
- Alla använda instrument kokas i Tryckkokaren.

7. Diverse sjukdomstillstånd/tillbud

- Burkits lymfom

En typ av odifferentierat, malignt lymfom, som förekommer framförallt i centrala [Afrika](#), men också i andra delar av världen. [det](#) visar sig oftast som en stor osteolytiskt svulst i käken eller i buken. B-cellsantigen uttrycks på de omogna [celler](#) som utgör tumörvävnaden i nästan alla fall av [burkitts lymfom](#). I [Afrika](#) har Epstein-Barrvirus isolerats från [Burkitts lymfom](#), men de flesta icke-afrikanska fall är EBV-negativa.





Symptom: Hårda uppdrivningar extraoralt (behöver inte vara så dramatiskt stora som på bilderna), ofta mobila molarer - (tänderna kan vara kariesfria och ej parodskadade).

Ganska vanligt i Kenya

Åtgärd: OBS! Extrahera inte den eller de mobila tänderna. Remittera till närmsta sjukhus för fortsatt behandling. Barn upp till 3 år behandlas enligt uppgift gratis (Statliga sjukhus)

- Läpp-käk-gomspalt

Det finns möjligheter att barn med läpp-gomspalter kan få hjälp med gratis behandling i Kenya. Det finns två organisationer som arbetar med detta. Kontakta dessa för eventuell hjälp.

Operation SMILE
Esperant Mulumba

esperant.mulumba@operationsmile.org

P.O. Box 72438 – 00200, Nairobi Kenya Symbion House,
Matumbato Road Next to Don Bosco Church (opposite
World Bank offices), Upper Hill.

+254 720 971 224

+254 729 087925

+254 735 788969

Smile Train Africa
Ngong Hills Business Center, 4th Floor
Ngong Road
PO Box 2512-00100
Nairobi
KENYA
Tel: +254 20 3001611
ggitahi@smiletrain.org



8. Trauma, käkfrakturer

1. Mandibel

Vanligaste lokalisation:

- Collum
- Angulus
- Corpus reg 43/33
- Medellinje

Etiologi trauma-> lokalisation:

- Knytnävsslag ger corpusfraktur plus collumfraktur på kontralateral sida.
- Fall ger ofta collumfrakturer.
- Spark eller tillhygge ger ofta angulusfrakturer

Symptom:

- Malokklusion
- Svullnad, trismus, värk, hematom i munbotten
- Sensibilitetsstörning i mentalis reg.
- I princip alla utom collumfrakturer skall betraktas som öppna vilket medför infektionsrisk.

Behandling: I princip alla kan fås att läka med IMF (intramaxillär fixation), ibland kan till och med ett enkelt cerklage i 4-6 veckor räcka. Målet är att återställa ocklusionen. Lösa tänder i fraktur område bör extraheras. Även vid en fraktur som inte är synligt öppen läcker bakterier ner via rotytorna på tänderna i frakturområdet. Antibiotika, pcV 1g x 3, bör förskrivas i 10 dagar på grund av infektionsrisk vid alla frakturer utom collumfraktur.

2. Maxilla

Lokalisation:

- Le Fort 1 - ofta partiella
- Lateral sinusvägg
- Zygomaticuskomplexet

Symptom:

- Malokklusion

- "Draglåda" (håll om näsrot samt rucka maxillan)
- Periorbitala hematom
- Svullen kind
- Sensibilitetsstörning i n. infraorbitalis utbredningsområde
- Näsblod
- Kolla om blod i svalget, om klar seg vätska : skallbas fraktur med liquor- läckage !
- Zygomaticus fraktur ger insjunket utseende efter att svullnad avklingat

Behandling:

- IMF med gummidrag för att återställa ocklusion, 1-2 v, därefter bara skonkost.
- Ofta läker alla frakturer utan beh men med malocklusion som följd.

Säkrast är att op !

- Om klar seg vätska i svalget är det en skallbas fraktur med liquorläckage. Sätt in antibiotika, Amoxicillin 1g x 3, och remittera till kirurg.
- Zygomaticus fraktur som regel ingen åtgärd.

9. Extern verksamhet

Infomaterial till skolor, BVC och utbildning av byhälsovolontärer finns!
Patientutbildning på vårdcentralerna och skolor genomföres med hjälp av Patric som tolk.

APPENDIX

Here you find some information about Mumias the small town where you will live, the house where you will stay and also about the Matungu jeepline that the dental mobile clinic cooperate with.

INFORMATION ABOUT THE MUMIAS AND MATUNGU AREA

The Matungu Dental Mobile Clinic is based in Mumias town in the Western Province together with the Matungu and Mumias jeeplines of Rotary Doctors. It is about 70 kilometers Northwest of Kisumu. The headquarter of the Western Province is Kakamega town which is about 32 kilometers from Mumias town. The former Mumias district was recently divided into two part, one being Matungu Sub county and the other one Mumias Sub county.

The area has a warm climate with temperatures between 23-28 degrees and with warm nights. Rainfall occurs mainly twice a year; longer rains between March and June and short rains in October-November. However due to the changing weather patterns this is now unpredictable.

The total population of the Mumias sub county was about 360 000 inhabitants and 80 000 households and Matungu district about 146 500 persons with 31 000 households in the 1999 census and the growth rate is 2.4 %. The total area of Mumias is 590 and Matungu is 275 sq.km. Western province has a population of 4,344,282 inhabitants (census 2009).

The **Luhya** tribe, also known as **Abaluhya, Baluhya, or Abaluyia**, are a bantu tribe living in the Western region of Kenya. They are neighbors to some of the nilotic tribes including Luo, Kalenjin, Maasai and Teso (Iteso). **Luhyas are Kenya's second largest ethnic tribe after the Kikuyu**, making up 14% of the Kenya population. Though considered as one tribe, the Abaluhya **consist of over 18 sub-tribes**, each speaking a different dialect of the **Luyia** language.

Agricultural activities in the district are cash crop and subsistence farming. The main cash crop is sugar cane while subsistence crops are maize, millet, cassava, sweet potatoes, beans and bananas. There is very little livestock, dairy cattle, in the area. This is because farms grow sugar cane, thus there is no grass to support livestock.

The sugar cane is milled at the nearby Mumias Sugar Company which provides some job opportunities. Most farms have been turned into small plantations of sugar cane. The sugar cane is harvested after 18-24 months; in the meantime farmers are left without a source of income. This type of farming has left many families with small pieces of land used for food crops sometimes resulting in malnutrition, especially among children - hence increased family expenditure on health.

According to the Kenya's economic survey of 2003, the per capita income in the area is Ksh. 50 per person per day, which is below the UN level of US \$ 1/day. 60 % of the population therefore lives below poverty line. Adult dependency which is characterized by communal way of living is very high as a result of high level of unemployment and poverty in the area.

The districts are served by only two all weather road connecting Kakamega and Mumias town as well as Kisumu and Mumias town. The rest of the roads are not tarmac but are passable even during the long rainy period. Transportation of sugar cane is done by large trucks and this makes driving a challenge.

In the Mumias market you will find vegetables, fruits, chicken, meat and dry fish for sale. There are two main Super Market “Mama Watoto” which can be loosely translated into “childrens’ mother” the other big one is Frank matt, you can buy freshly baked bread in frank matt. There you can buy most of your shopping needs even refrigerated foods.

The big supermarkets in Kisumu: NAKUMATT stocks everything from food including fresh meat and fish to blankets, shoes, rubber boots, towels, electric goods and wines. You can get fresh packeted milk in Siaya but it might be advisable to bring back some packets of long-life milk from Kisumu. Good bread (there are small deepfreeze compartments in the two fridges in the Doctors´ house) can be bought at MAYFAIR BAKERY in Kisumu opposite the main market. At the market, one of the biggest and nicest in the country, you can buy fruits and vegetables but also baskets, stools, tables, kanga cloths. Look outside in the back where you can see sandals made of tractor tyres, watering cans and all manner of containers hammered out of scrap metal. This is true recycling!

Kisumu is a sprawling lakeside town which offers three centrally situated hotels:

- SUNSET with a stunning view over Lake Victoria, especially at sunset, and a nice herd of impala antelopes grazing below the swimming pool area.
- IMPERIAL which is the meeting place for the ROTARY CLUB of Kisumu at lunchtime on Thursdays.
- NYANZA CLUB, close to Sunset, also with swimming pool. Daily membership fee in NYANZA CLUB is 150 KES (Kenyan Shilling). But if you stay overnight the membership fee is included in the cost accommodation.

There are also several fast-food eating places around the central part of town. The KISUMU MUSEUM, on the outskirts beyond the market is well worth a visit. It has an impressive collection of poisonous snakes!

THE MATUNGU JEEPLINE

The dental mobile clinic will work mainly towards the schools in the Matungu area, but will also cooperate with the Matungu jeepline. Here is some information about the jeepline:

Matungu jeepline

The jeepline team in place consists of:

No	Name	Postion	Duties
1.	Erick W. Wafula	Lab technologist.	<ol style="list-style-type: none"> 1. Blood Smear for malaria 2. Hiv testing and counseling. 3. Urinalysis 4. Random Blood sugar test 5. Pregnancy test 6. Helping the doctors in result interpration 7. Haemoglobin test

			8. Writing monthly laboratory reports.
2.	Meryline Echesa,	Pharmacist	<ol style="list-style-type: none"> 1. Maintaining drugs flow. 2. Maintaining the pharmacy 3. Dispensing drugs 4. Keeping the drugs registers 5. Compile drugs orders. 6. Advice the doctor on available drugs in stock
3.	Sarah Anyango	Nurse employed by RDS and Team leader	<ol style="list-style-type: none"> 1. Immunization 2. Antenatal care 3. Family Planning 4. Link to the DMOH 5. Writing monthly report of the above to the GOK. 6. Assist the doctor in case of many pts.

The Matungu clinics are five as all the other jeeplines:

CLINIC	DAY	TYPE OF HOUSE	DISTANCE	STATE OF ROAD
KHANDAYI	MON	CHURCH	54 km	GOOD
BUBAMBULA	TUE	CHURCH	30km	GOOD
NAMASANDA	WED	CHURCH	44 km	GOOD
ITETE	THUR	CDF DISPENSARY	43 km	GOOD
SUO	FRI	CHURC	42 km	GOOD
TOTAL DIST			213	

DOCTORS' HOUSE

The doctors' house is situated along the Mumias/Bungoma road. The house belongs to MOCO (Mumias Out Grower Company) The estate is commonly referred to as X-estate house A3.

A security company provides for the security during night hours, while the RDS arrange that during the days.

The story building stand on a large compound, the compound is fenced with a metallic gate. The house has a spacious living room and a dining hall downstairs. There is a spacious kitchen and a store and one bed room downstairs. There are three more bed rooms upstairs of which one is the master bed room. There are three bathrooms in the house one attached to the master bed room, however in case of lack of water there is a pit latrine in the compound. There is a spacious garage which serves as a pharmacy for drugs.

There is electricity in the house. However this does not mean that there will be no power cuts, since this happens frequently in Kenya. In case of power cuts there is a rechargeable lamp which must be fully charged all the time to enable it being used when needed.

There is running water in the house, however make sure that the extra external water tank is filled up since it serves as a reserve tank. Water from this tank can be pumped to the house by the staff.

There are two staff persons in the house during the day:

1. The house keeper – Nancy Lidya Mukeya

Her duties includes:

- Maintaining the cleanliness of the house.
- Cooking
- Shopping as may be requested by the doctors.
- Doing laundry work.

2. The Gardener. – FREDRICK OMONDI.

His work includes all other duties that does not require special skills such as:

- Taking care of the garden.
- Security during the day.
- Pumping water.
- Taking care of the dog.
- Any other duty as may be assigned by the doctor.

OTHER INFORMATION

Matungu has a small Sub county hospital, the hospital staff is composed of 1 medical officer, 3 clinical officer and nurses among others. They have limited space for patient admission and no surgical services or special clinics. Surgical cases can be referred to

1. St. Mary's Mumias Mission Hospital.

This is a mission hospital and is expensive as compared to government hospitals. It offers services including; out patient, in patients, special clinics such as dental, eye, surgical and others. Do visit the hospital at least once during your stay.

2. Other sites for referral include:

(a) Bungoma district hospital 27km away this is a district hospital with surgeon and medical officers.

(b) Kakamega provincial hospital which is 33 km away for general patients care. As a provincial hospital all service are given including all the special clinics.

3. Skin related conditions can be referred to Alupe Hospital in Busia.