Risking it all to bring sight to Nepal

Jim Robb

Ignoring the threat of Maoist extremists who had been terrorizing area residents, Nepalese ophthalmologist Yanta Pradhan recently ventured into the village of Jajarkot, 400 km west of Kathmandu, to conduct a 5-day eye camp. A single operation made the dangerous visit worthwhile.

The patient, a young mother in her 20s, was blind because of cataracts in both eyes. When Pradhan successfully removed one of the cataracts, the young woman was able to see her 4-month-old son for the first time. She was one of 82 patients he operated on over 5 days.

Over the past 3 decades, Pradhan, his technicians and volunteer colleagues from Nepal, Canada and elsewhere have made countless daunting journeys into the remote regions of Nepal. Doing the near impossible and persuading others to do the same is all in a day’s work for Pradhan. This work calls for rugged treks on foot or horseback, bumpy flights in small planes into rough grass airstrips, and bone-rattling bus and truck journeys into the hills and mountains north, east and west of Kathmandu, or to the arid, scorchingly hot flatlands of the south.

But Pradhan is remarkably tenacious. Between 1990 and 1995 he held more than 90 free camps, during which some 60 000 patients were screened and about 6300 surgical procedures were performed in makeshift operating rooms that had uncertain lighting and minimal equipment. These days Pradhan holds about 20 eye camps annually, each lasting between 3 days and a week.

And when he isn’t in a remote village, he’s running the Lions Club Eye Care Centre in Kathmandu. This small surgical and outpatient hospital caters mainly to the poor and destitute. It is supported by Lions International, Calgary-based Operation Eyesight Universal and by Lions Clubs in Canada and elsewhere; Japanese ophthalmologists also provide support. In addition, Pradhan and his small team of technicians and nurses conduct up to 50 day-long medical clinics each year in the villages around Kathmandu, referring surgical cases to the centre.

Pradhan gets high praise from Western doctors who have seen him in action. “He’s an incredible human being,” says Dr. Garth Taylor, a Cornwall, Ont., ophthalmologist who has volunteered at several eye camps.

But Pradhan says his eye camps don’t receive whole-hearted approval from all his colleagues. Glasgow-trained ophthalmologist Jeevan Shrestha admits that he thought eye surgery belonged in the hospitals. “I felt eye camps couldn’t maintain full sterile conditions and there would be more risk of infection.” But his attitude changed in 1993 after he worked in a camp with Pradhan. There was 1 case of infection among 74 postoperative patients. Shrestha now believes strongly that “eye camps are the only way to help rural communities in the subcontinent.”

Nepal, with a population of more than 20 million people, has 150 000 blind people, for a blindness rate of 0.75%. Many of them will never leave their village to seek help.

“Eye camps are the only way to reach the hill people,” says Shrestha. “And Yanta Pradhan is the one ophthalmologist who has done pioneering work . . . in serving people in rural communities. We cannot wait to help them in hospitals and clinics — we have to go to them.”

Pradhan has devoted his career to that need. After earning his medical degree in India and completing training in London, he returned to Nepal in 1963 to work at the Bir Hospital in Kathmandu. He heard about eye camps being conducted in Kathmandu by visiting Indian doctors and decided to start his own. At his first camp in Nepal’s eastern mountains, he screened 600 patients and performed 153 operations.

Pradhan was 1 of 2 ophthalmologists in Nepal when he started his career. There are 70 ophthalmologists practising there today, but they all work in large centres. “Most of those who criticize eye camps have never gone to places like Jajarkot,” says Pradhan. “If I hadn’t gone . . . that young mother wouldn’t be able to see her child today.”

Jim Robb is an Ottawa journalist.