When Barbara Koffman first got involved with Christian Relief Uganda (CRU), her dental hygienist experience and education training allowed her to recognise the need to promote and facilitate the development of dental services in Uganda. Since that time, she has worked tirelessly to raise funds for dental projects. Several rural health clinics have been equipped with Dentaid dental surgeries and since 2005, Barbara has been taking dental teams out twice a year to educate and provide essential treatment.

Setting off
In September 2008, she led a team of three dentists, two therapists, a dental nurse, a hygienist and two non-dental members on a three-week trip, taking with them the first two Dentaid portable dental chairs that the oral health charity has produced. These have been designed to provide an easily transportable, safe and sturdy piece of essential equipment at a low, affordable price.

One of the first stops was to visit Mango Tree Educational Enterprises which has been working with Barbara for some time, producing culturally appropriate oral hygiene posters and visual aids. Barbara has also been responsible for overseeing the design of a booklet and poster to educate the Ugandans about the widespread traditional practice of Infant Oral Mutilation (IOM), locally known as Ebiino. This is a project instigated by Dentaid’s Action Group on IOM and the team have the opportunity to input their thoughts and ideas to the Mango Tree staff and the final drafts are agreed. These new educational materials will be available before the team return home.

Clinics in action
The first clinics are held in the village of Bulega. CRU has worked in this area for two years so local people are used to seeing the dental team arrive. For many of the team, it is their first time in Uganda and to arrive and be greeted by large crowds can be somewhat daunting! But they quickly offload the equipment and set up the clinic into triage, treatment and post-op sections. Moses Joseph, a Ugandan dentist, arrives – he is from a contact charity in the UK, which has asked if he can work with them for a few days to gain experience. The team has the clinical expertise and equipment which he lacks. It soon becomes obvious that he is unfamiliar with the equipment, but he is very receptive and dentists Mark and Nick are good communicators so Moses Joseph soon learns the necessary skills.

The two Dentaid chairs are tried out and found to be very successful. Being adjustable, especially with so many patients to treat, they prevent the operators from developing aching backs. The dentists have several ideas for minor modifications to improve them which have been followed up by the Dentaid engineers. Each chair is portable and comes with an optional carrying case. CRU is very grateful to Romsey Rotary Club who funded one of the chairs and CRU has ordered four more for the March 2009 trip.
Over the two days the team treats over 200 patients; in addition each has received oral hygiene instruction, toothpaste and a toothbrush. UK dentist Mukund is very sad to have to extract permanent teeth from young children. In the UK it is rare these days because of fluoridation and education. One of CRU’s aims here is to train local people to reinforce the oral hygiene message.

A request had been received for a dental team to visit the Jinja Maximum Security Prison to treat amongst others the men on the condemned wing. Barbara asks her team if they are willing to undertake this and they all agree. The medical room has one table and chair – no equipment or drugs, so the decision is to set up the dental equipment on a shady veranda in full view of everyone. Several of the prisoners offer to help, so Barbara show them how to lay out the instruments and wash and sterilise them; another is trained to give oral hygiene instruction and two become the team’s interpreters. About 60 prisoners receive treatment and each receives toothpaste, a toothbrush and a bar of soap. This is the first time a dental team has ever gone into Jinja prison.

Bavuma Island is the next destination for a 3-day clinic. All the equipment has to go by an hour and a half’s boat trip. Over the three days the team runs three clinics in different parts of the island, despite having to replace an outboard motor on the 5 hour sailing to a government health centre! The team is so well organised now that they set up in record time. In addition to the three dentists, Dr Mwanga, the dentist from Jinja Hospital, has joined them and 80 patients are treated in the two hours before the boat must leave to get back before nightfall.

One clinic is held in a small dark church at Kilongo. As usual the queues are long, but dental therapist Sonia is now the designated triage specialist and is very good at pinpointing those in greatest need. Everyone works very hard for three hours and all are tired after endless extractions.

But a treat is in store!

The next day a one-day visit is made to Mto Moyoni, a retreat centre on the Nile. Beautiful peaceful gardens and the opportunity to swim in the Nile soon recharge the batteries!

An early start sees the team off on a very bad and bumpy road to Kamuli. The charity has been four years in the building and preparation for the opening of the new CRU clinic at Kyeeya. Before the ceremony a general medical and a dental clinic are arranged – this is the first time that the people of Kyeeya have had treatment available in the village. The team examine a little boy, Geoffrey, with a large swelling in his mouth – possibly...
Burkett’s Lymphoma. His father is asked if he is willing to take his son to Kampala for treatment; this will take several months and the prognosis is good, but it will take a lot of effort for them to travel so far, but fortunately CRU is able to help with the expenses.

On returning to Mango Tree the IOM booklet and poster are ready and Barbara gives the go-ahead for publication. Whilst in Kampala the team visit Geoffrey in Mulago Hospital. There is a 90% certainty that this is Burkett’s Lymphoma and treatment is already in progress.

Barbara has arranged for two of the UK medical nurses at Kamuli to do a survey for Dentaid of local mothers and their beliefs about Ebiino. These results will be collated by the Dentaid Action Group as part of the research into this barbaric practice. She also collects a supply of the finished Mango Tree materials and leaves copies at Mulago Dental School and four of the clinics they have recently visited. The next CRU dental team due to go out in March 2009 will follow this up for Dentaid to see if these new educational aids have been of value.

Barbara wants all the hard-working volunteers to relax and experience the sights of Uganda, with white water rafting, golf, shopping and a trip to see the gorillas amongst the activities enjoyed by the team.

A dental team is being assembled scheduled for March 2009 and will include research projects on IOM for Dentaid. There are always opportunities for volunteers to travel to Uganda with Barbara, under the umbrella of Christian Relief Uganda. Please contact her on 07970 185 798 or email bkoffmancru@hotmail.com. Further details available from www.christianreliefuganda.org and www.dentaid.org

CRU is a Christian charity dedicated to raising a smile in Uganda.

It isn’t easy working in areas where 45 per cent of children are malnourished and 50 per cent don’t have safe drinking water, but the people there keep a positive outlook encouraging us to give support to their smiles.

Today CRU provides:

1. Education for children starting at pre-school level, going through to secondary and vocational level;
2. Education for deaf children;
3. A child sponsorship scheme to provide food, clothing, shelter, education and all basic needs;
4. Community wide projects including dental projects and granny sponsorship;
5. Support to schools and projects in a variety of areas in Uganda.

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CHILD WITH POSSIBLE BURKETT’S LYMPHOMA

Mango Tree booklet on Infant Oral mutilation

Mango Tree sugar sack poster on tooth development.