

Charity **Doctors of the World UK**

supports maternity provision in war-torn regions such as Darfur, Sudan

I'm woken up at 2am by the guard, who is pointing towards the clinic. As we arrive, we find a lady in labour with the baby's foot sticking out. I have never delivered a breech baby before. I wonder if the baby is still alive. I thought I heard a heartbeat, but then see that the cord is next to

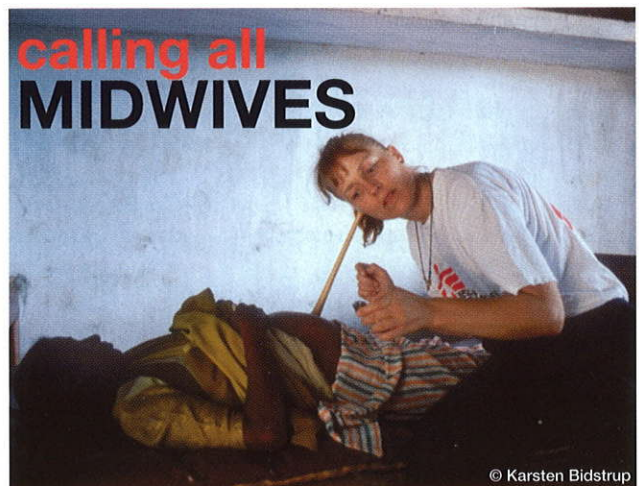
the foot. This baby definitely isn't alive. Even with the baby close to delivery, the woman's bump is still big. She must be having twins. I hope the second one survives. Please let it survive! This is her first pregnancy. When the first baby finally comes out, it is a relief but also

'Will this baby pull through? I ask myself. I'm not sure. With the cord cut the heartbeat is good, but still no breathing whatsoever. We have to do it for her; I sucked out meconium from the lungs. We kept going, hoping, just hoping'

heartbreaking. Some patches of the baby's skin have already started breaking down. There is no point in trying to resuscitate it. All of us in the room are pushing with the mother and praying that the second baby makes it. It is a boy and he comes out crying! He weighs just two kilos but as one of

twins that is fine. We are all filled with tears of relief. Despite the high stress levels, I love this job; it is amazing.

Emily Denness (pictured left), a 30-year-old midwife, went to work in Darfur in Sudan. Having trained at John Radcliffe Hospital in Oxford, she worked in Lymington in Hampshire, before deciding to ▶



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calling all MIDWIVES

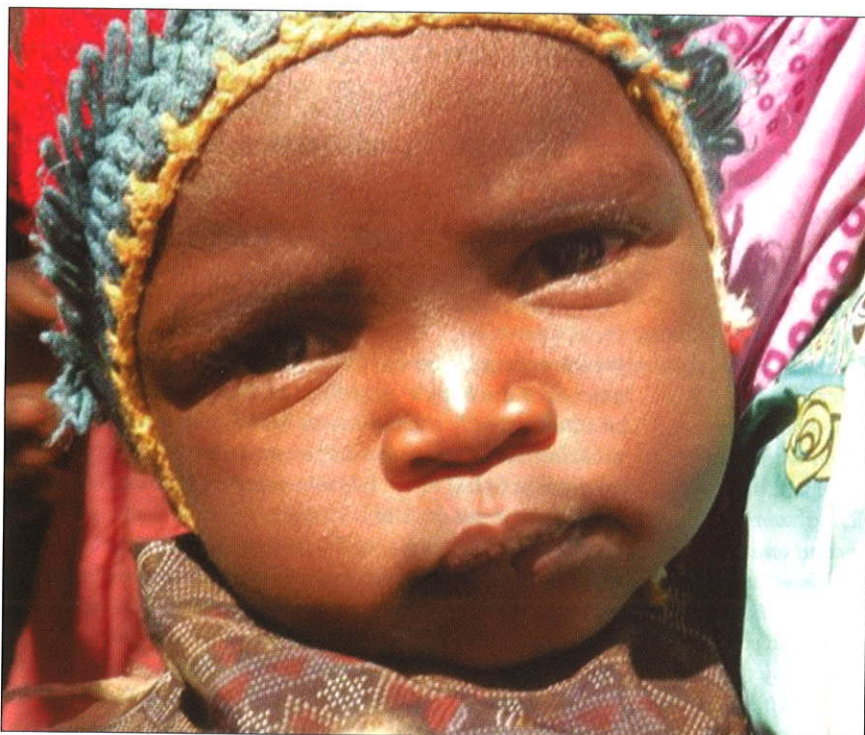
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REQUIREMENTS

- Willing to work in insecure environments
- French speaking
- Management skills
- Availability for 9 – 12 months

For more information contact:
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'An amazing part of the work I did was being able to mentor local staff; seeing them putting into practice the skills you've passed on means I know my work will have a lasting effect long after I've returned home'

leave her job behind in a quest to see new cultures while giving something back. She says:

I decided to volunteer with Doctors of the World UK (Médecins du Monde) because I find cultures fascinating, and to find out about these whilst helping local communities through work is perfect!

Challenging role

For her first overseas mission Emily took on a challenging role. She headed to Deribat, a town with a population of 77,000 people, situated in a mountainous region. It's a place that Doctors of the World has been working in since February 2008. The project aimed to reinforce the primary health care services as well as improving the health services in order that the local population could maintain its own health status in the long term. Darfur has been ravaged by civil war, as a consequence maternal mortality rates are among the worst in the world (UNICEF 2010a) and child deaths under five years old are 109 per 1,000 (UNICEF 2010b). With this in mind, why would anyone give up the safe security of working in the UK?

Emily explains:

Jumping on the plane was rather exciting but also highly nerve-wracking. My judgement and experience were put into practice regularly with little reliance on machines. With the closest hospital an eight-hour journey away it was a challenge but I relished it. One



unforgettable day a meeting was under way with the European Commission Humanitarian Aid department (ECHO), one of our biggest donors. It was also when we received word that a woman from a community in Tabasa, about one-and-a-half hour's drive away, was in labour and was coming to the clinic.

The ECHO representative asked me about the project but I suddenly lost the ability to speak and made a fool of myself in front of the whole group. Suddenly I was whisked away from the meeting to attend to the labouring woman, she had been in labour for two days and there was thick, thick meconium in the waters. The baby wasn't happy and the woman was 7cm dilated. She just needed a little push with a drip, but I insisted that we rehydrate her and give her something to eat first. Once born, the baby would need resuscitation, I was certain of it. The baby's heartbeat was dipping.

Finally we saw the head. The resuscitation equipment was ready, and the adrenalin started pumping. The head was advancing, we were poised. Out came the baby, we started bagging before the cord was even cut. Will this baby pull

through? I ask myself. I'm not sure. With the cord cut the heartbeat is good, but still no breathing whatsoever. We have to do it for her; I sucked out meconium from the lungs. We kept going, hoping, just hoping. I swear we weren't breathing either, or at least it felt like that. The mother was watching with bated breath, as was the grandmother. Please, please, please...

It was 10 minutes before the baby gasped one gasp. Still unresponsive, still not breathing by itself, but there was hope. Another five minutes passed and then she was breathing. Yes! The baby's not opening her eyes or anything like that yet, still a bit floppy, but she's breathing! Everyone breathes a sigh of relief and we keep watching her like hawks. It could have been a

double whammy of deaths if they'd stayed at home. I go back to the compound, where the ECHO visitors were still having a meeting. I give news of the good outcome. They're all relieved and amazed by the story. My reputation as a midwife is intact. So what if I'm not good at big speeches and suchlike? I can do my job as a midwife, which is what I'm here for!

Unfortunately Emily's mission was cut short as a result of security concerns, but the experience has made her all the more keen to continue with overseas work:

I have now had a taste of what a difference I can make on a personal level. Actually seeing the difference is a huge motivator. If there's an emergency now I feel like I have dealt with so many situations I can cope a whole lot better. An amazing

part of the work I did was being able to mentor local staff; seeing them putting into practice the skills you've passed on means I know my work will have a lasting effect long after I've returned home.

Now that I have some teaching experience I am looking to develop this skill on future overseas missions. Who knows where my career will take me next?

Interested in volunteering for Doctors of the World UK? Visit their website: www.doctorsoftheworld.org.uk

References

UNICEF (2010a). *Maternal, Newborn and Child Survival Country Profiles: Sudan*: www.childinfo.org/profiles_973.htm

UNICEF (2010b). *Statistics: Sudan*: www.unicef.org/infobycountry/sudan_statistics.html

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