

Palawan Visit Report 2019

I visited Palawan from mid-March until the week before Easter. I stayed in my usual hotel. Small but comfortable where the staff know me.

I take a tricycle taxi to the Bahatala clinic in Abanico Road each morning except on those days when we are doing an out reach clinic. In Bahatala there are sometimes a patient or two that the PTs want to discuss. Often it is because the patient needs an explanation from a doctor as they tend not to fully believe the PTs and nurses. Others need a diagnosis which has to be made on history and clinical examination. Occasionally patients have already been X-rayed. I saw backaches, knee pains, shoulder pains and short legs due to untreated but healed hip fractures.

One day a young girl came asking for help with her mother. She had been hit by a motorcycle causing a comminuted fracture of lower tibia and fibula.



She was admitted to the Provincial Hospital in Puerto Princesa. The attending orthopaedic surgeon said she must have “stainless” which is the local word for any fixation device, and that she should find 50,000 pesos (about£800) for the implant (a locking nail) before any operation could be planned. She is from a poor peasant family and cannot afford this. She could get it from PhilHealth if she can show she is over 60 and indigent, but she has never had a birth certificate. When if ever she gets recognition from PhilHealth it will take 1-3 weeks to get final approval and then 3-4 weeks to buy the implant by which time the fracture is likely to be healed in angulation. The local orthopaedic surgeons have no real idea how to treat fractures without stainless. The surgeon has offered immediate operation in the private hospital at a cost of 200,000 Pesos (£3500).

We also went on out-reach visits. These are done in cooperation with the medical social workers who go around the communities and find patients for us. They then gather at a central point such as the village hall. Many are old and some have had strokes so all we can do is give them walking aids such as sticks or walking frames, but this is often enough to make their lives better. There were the usual high number of CP children many of whom need wheelchairs or the specialist Reymon chairs for which they are measured. I also saw three children with mildly hypoplastic legs, which I assume is from in utero infection. There were also one offs

such as severe syndactyly and many varieties of constriction band syndrome and some new club feet. At least the social workers have learnt not to include non-orthopaedic conditions.



We visited a pair of incredible Siamese twins. They are now about 4 years old and are joined at the cranium with basically one brain so inseparable. They have appeared on Philippine television, so I feel able to put in a photo.



I met up with many old friends and visited some new restaurants. Puerto Princesa has grown with the most obvious being new hotels and eateries. The traffic is also much worse until you get out of the capital. A new menace on the roads are the very large number of tourist buses. These hold 10-12 and are mostly driven by maniacal speed merchants!

The Unit is working well. We seem to have lost the financial support from the German charity CBM. It is not clear why this is but it seems to be related to a change in attitude to community based rehabilitation which has now been superseded by the two in words “inclusion” and “empowerment” neither of which are well defined nor do they have much practical application on the ground or the need for rehabilitation services. New “buzz words” seem to have taken over overseas aid.

Cecile Socrates is very aware that the BPT income is falling. Fortunately, she has been very successful in raising income from other sources including the Philippine ones. For this reason, I remain optimistic about the future.