A few figures relating to our palliative care activities:

Ndi Moyo has 564 patients enrolled for care, of whom 332 are actively receiving treatment at the present time. As we have just reached our 10th anniversary, it is interesting to note that over this period we have recorded 1414 patients. Our role is to deliver palliative care, and it is therefore inevitable that over this time 849 patients have died, hopefully in greater comfort and peace due to our support. Of the survivors, many remain under supervision for symptom control and some, particularly those with Kaposi Sarcoma, are now in remission through simple chemotherapy and do not currently need any treatment.

As previously, our major clinical problems continue to be Kaposi sarcoma, mostly secondary to HIV infection, and cancers of the cervix and oesophagus. The last of these is emerging as increasingly predominant as HIV diagnosis and treatment of the population improves and numbers of patients with Kaposi sarcoma fall. Oesophageal cancer now represents 38% of our new diagnoses and 48% of deaths. It is a truly horrible disease and unfortunately few cases are suitable for surgical resection.

All our medication has to be low cost and given orally. A weak solution of liquid morphine, (5mg/5ml) remains the most useful therapy for moderate or severe pain.

A major development this year has been the increased role of Linly Chitete and Chimwemwe Nyirenda as Lead Nurse and Administrator respectively. Their ability and dedication enhance the real potential for sustainability in the future.

Spreading Palliative Care

Over the last year Ndi Moyo has been able to expand its role in disseminating palliative care practice, much helped by the new, purpose-built clinic, which gives space for consultation with patients and their families and for teaching. We now have an Oncologist visiting regularly from Lilongwe, to improve our diagnostic and academic standards and we receive placement students, nurses and clinical officers, from both government and mission hospitals all over Malawi.

Placement Students go with the Ndi Moyo Team on Home Visits
In addition, three students from the Institute of Hospice and Palliative Care in Africa have undergone practical placements at Ndi Moyo, and we have two English medical students on elective visiting this summer.

In August of last year we were able to hold an Initiators’ Course, for training those starting palliative care programmes, under the auspices and with the help of Hospice Africa Uganda. This intensive 5 week course was repeated in April/May this year and gave students grounding in both the theory and practice of palliative care, with the final week for the ‘training of trainers’, so aimed at further dissemination of the knowledge that they had gained. The opening ceremony was graced by the founder of Hospice Africa Uganda (HAU) Professor Anne Merriman, who made the keynote address, and many local dignitaries attended, including the Irish Ambassador to Malawi, the Palliative Care Association of Malawi Coordinator, the Salima District Health Officer, and other highly placed delegates from the community.

One of the immediate effects has been to enable the clinic run by Lifeline Malawi to revive its palliative care services, through retraining of key staff. This had been one of Ndi Moyo’s first outreach centres, but over the last 3 years lack of trained staff had meant its work had lapsed. Ndi Moyo was pleased to welcome a group of students linked to this Canadian charity recently.
The Garden

Gardens contribute to hospices and palliative care all over the world. Not only do they provide a tranquil atmosphere for treatment, but in Malawi have an important role in providing the knowledge to grow nutritious and medicinal plants. Our garden in Ndi Moyo is now much bigger, thanks to the acquisition of a new plot, adjoining the old, for the purpose-built clinic. We aim to demonstrate techniques which are cheap and reproducible, without the need for expensive fertilizer. I was intrigued by the low-cost trickle watering system pictured below. It uses recycled plastic water bottles from the local café with tiny holes in the bottom delivering water close to the plant roots, the flow determined by the tightness of closure of the lid.

The enlarged garden at Ndi Moyo demonstrates growth of nutritional and medicinal plants and uses an interesting trickle watering system

Vulnerable Children Programme

All our staff at Ndi Moyo have to be involved in multi-tasking!

Helix, one of our drivers, shares with one of his nursing colleagues the visits to children registered on the Vulnerable Children Programme. Many children in Malawi suffer not only the loss of a parent through illness, but also the lack of income puts severe strain on their ability to access an adequate diet, simple bedding or school uniform and materials. In May twelve children were visited by the team from Ndi Moyo and provided with blankets, mosquito nets and bed mats. Helix commented on how poor their home conditions were and sent us the picture below.
Funding

Ndi Moyo Palliative Care Centre is entirely dependent on charitable funding, much of this raised through Ndi Moyo UK. This year there has been a major drive to raise funds within Malawi, with a very successful golf tournament, and through a European fundraising trip by founders, Lucy and Tony Finch. All costs are carefully monitored and budgeted, though inflation and fluctuating exchange rates are beyond our control. In Ndi Moyo UK we have been very grateful for generous donations from a number of individuals and trusts, including those who donated through the Big Give. We are fortunate that we do not incur any costs in the UK and all funds raised can be used in Malawi. Currently Ndi Moyo’s annual expenditure is £175,000 per year, very modest in terms of Palliative Care delivery, but requires continued efforts from us all. We are so grateful for all your help.