

Aizawal, Mizoram, March 2019

Mizoram is a unique part of India. Located in the remote north-east, the state is mountainous, culturally homogeneous. Administratively, Mizoram is divided into eight districts: Aizawl, Kolasib, Saiha, Champhai, Lawngtlai, Lunglei, Serchhip and Mamit. Only Aizawl has established palliative care services (in the government run Civil Hospital which houses the Regional Cancer Centre and Synod Hospital, managed by the Presbyterian Church). In Mizoram the prevalence of HIV / AIDS is high, as is substance abuse (both alcohol and injectable use of heroin).

Site

Synod Hospital / Grace Hospital

Synod Hospital opened in 2004 and began palliative care services from 2016 and operates the free-standing Grace House for patients with HIV / AIDS as well as K Ward for patients with substance abuse patients (K being the abbreviation for Khawngaihna, meaning 'Grace' in the Mizo language). The hospital has 20-30 beds and provides Free bed, free food but only some treatment provided free of charge. Other centres ceased providing HIV treatment in 2013 due to lack of support at national level. Six nurses have now completed training in palliative care: Arinie, Tetei, Zoremi, Maduhi, Dami and Rosalind. Although there is a room for the palliative care outpatient clinic in Synod Hospital, outpatients are more often seen in Grace House or K ward

Participants from APLI

- Anil Tandon
- Ed Gaudoin

Other participants

- Shalini Arora Joseph, Project Officer with Pallium India
- Santanu Chakraborty, Director of Ruma Abedona Hospice (RAH) in Kolkata

Team at Aizawal

- Ralte Lalchhanhima - Graduated 2005, joined Synod Hospital 2007, Completed TIPS six-week course in 2017 and has Completed training in Dignity Therapy

- Sanghluna Renthlei - Joined Synod Hospital 1992, Completed Hyderabad six-week course in 2016 and has conducted sensitisation workshops several times since 2017
- Sena Renthlei - Project manager for the HIV community care centre, No medical background, Completed TIPS two-week course in 2017 and has since then has been the social worker for the palliative care service
- Dr Evelyn Pachuau, Civil Hospital, trained February 2019 was currently pregnant and appeared to be more interested in research
- Dr V Dochai, Seaha District Hospital, trained February 2019
- Dr HD Lallawmkima and Sister Amteii Vamlalhnaii, Kolasib District Hospital, trained February 2019

Executive staff

- Dr Eric Zomawia, State Director of the National Health Mission
- Dr Lalmuchhuaka, Medical Superintendent of Civil Hospital
- Dr James Mawia, Medical Superintendent of Kolasib District Hospital
- Sister Lalfamkimi, Principal for the Department of Nursing, Regional Institute of Paramedical and Nursing Sciences (RIPANS)
- Dr LH Thanga Singson, Director of Synod Hospital
- Dr Vanlalsiama Chhangte, Director of Synod Hospital

Objectives of visit

- Meet with key health and community leaders
- Deliver a ten-day foundation course in palliative care for doctors and nurses from the state's various district hospitals.

Summary

- The team attended ward rounds at Grace house, Synod hospital and K ward.
- Ward rounds at Grace house – Dr Sanga was relaxed with an informal bedside manner. The center had no access to an Infectious disease specialist. Only cylinder oxygen was available.
- Ward rounds at Synod hospital – the center had an adjustable bed headrest and had wall oxygen available.
- Ward rounds at K ward (for substance abuse patients) – A knife was used as the dermatome donated by a German team was broken, there was a significant problem with recidivism as the

long-term success rate was only 5% towards successfully rehabilitating patients. There is a need to have more activities / psychological support. The patients appeared generally bored, seemed to have good insight into the emptiness of their lives and were well aware of the high risk of relapse into drug abuse. There is a need to improve the facilities – a table tennis was provided but only one bat was available with no balls, a guitar was provided but one of the strings was broken.

- The team visited the Regional Institute of Paramedical and Nursing Sciences (RIPANS) which has an MoU between Pallium India and Synod to provide a two-hour session annually. The presentation by Ed satisfied this requirement for 2019. The Oncology component of the curriculum had a 10-hour allocation and Palliative Care was included in this. Encouragement was given to the leadership team for RIPANS to 1) organise nursing student placements at Synod Hospital for exposure to palliative care and 2) send a tutor for the 6 week training course in palliative care
- The APLI team members also accompanied the Synod palliative care team during their weekly Home visits in Aizawl District. Dr Snahluna and his team extend support in various forms – both via their personal capacity (paying the school fees for patients kids, paying towards rehabilitation expenses etc.) and through their hospital (food kit distribution) as well. Bereavement support was also extended during the home visits.
- One of the patients with a past history of breast cancer has now become a local advocate for cancer and palliative care in her community
- The Kolasib District Palliative Care Service has only just begun since February 2019 with a doctor and nurse trained in Palliative care. The hospital has 60 beds, 13 doctors and has been granted RMI (Recognised Medical Institution) status and can therefore stock and dispense essential narcotic drugs. Despite this, morphine has not yet been obtained and the plan is for morphine to be provided by the Civil Hospital in Aizawl. The palliative care service currently has 4 community patients and the outpatient clinic has not yet commenced. The Medical Superintendent expects the doctor and nurse to provide palliative care outside of their rostered hours, ie. In their own time
- Based on seeing patients in the district hospital, teaching discussions were held about the potential role for tranexamic acid and the concept of Ask-Tell-Ask in communication, massage / positioning of the arm, opioid conversion to morphine and regarding the role of dexamethasone.

- The APLI team also delivered presentations to the below:
 - Third year nursing students at RIPANS (30 students)
 - Synod Hospital nursing staff (30 nurses)
 - Synod Hospital medical staff (26 doctors)
 - Civil Hospital medical staff (60 doctors)
 - Ebenezer Hospital doctors and nurses (40 staff in total)

Debriefing notes

- Very different palliative care exposure and often felt did not have the right knowledge to offer ie HIV/AIDS, drug addiction
- **Impressed by the lack of clinical supervision available for the palliative care staff**, many of whom were only recently trained via the 10 day courses. The mentors wonder how to provide ongoing mentoring and support for them, how to link them with other providers in India and beyond, for day to day advice when needed
- WhatsApp group exists for the state palliative care providers
- 5 of 8 regions in Mizoram have received training in Feb 19 in course run by Mhoira
- Conscious that this visit was more of an orientation visit and need more time to interact with doctors to really improve services and knowledge etc
- Both mentors agree to return in 2020
- Shalini/Pallium hope Dr Sanga will lead a statewide group. Pallium I funding of services to Synod ends in 2019