

Central Africa Medical Mission - Malawi

April 2019 Newsletter

Greetings to all our brothers and sisters in Christ! You have heard by now about the severe rains, cyclone and flooding in southern Malawi. Please continue to pray for recovery efforts here, as well as in Mozambique and Zimbabwe. One of our staff has family in Nsanje, who were blessed not to lose their home but have nothing to eat as their entire maize and rice crop was destroyed. He says that maize is available in the next district, but the price has increased, and it is difficult to obtain. Our mission here is supporting congregations in the south with the help of Christian Aid and Relief and other local organizations. We are also concerned for those in the midwestern US where farmers are so hard hit by the floods there, and continue to pray for those families.

Here in Lilongwe we have finally had some dry, sunny days, and had no problems getting to our remote clinics this week. We were not as affected by the storms here in the Central Region, other than the initial power outages and nonstop rain. Our patients somehow still make it to clinic, even when muddy roads are so slippery one can barely walk or ride a bike on them! The main effect of the rainy season is an upsurge of malaria cases. With all the rain, there is standing water where the female Anopheles mosquito larvae develop into the insects that transmit the malaria parasite through their bite to a human. The parasite spends part of its life cycle in the liver, then enters red blood cells for another growth phase where the red cell ruptures, releasing the mature parasites to the bloodstream where a mosquito will ingest it with a blood meal. The parasite reproduces within the mosquito, and the tiny immature parasites end up getting injected into another human when they are bitten. The more mosquitos, the more malaria.

How does this affect our patients? Fever, headache, lethargy, body pain, vomiting and diarrhea, and cough can all be present. It's the children who seem to suffer the most. We see them lying on the concrete when we arrive, covered with a chitenje cloth, barely able to stand, often with high fevers. Their mothers carry even older children on their backs to get them to us and arrive exhausted and sweating. Our staff does the rapid test (MRDT) for malaria. Unlike many rural clinics, the Lutheran Mobile Clinic has the oral medication to treat malaria in infants through adults. Malaria can be life-threatening when not treated early as it can cause severe anemia, seizures, and very low blood sugar. We are able to check patients' hemoglobin and blood sugar levels. They are assessed for secondary infections such as pneumonia. We give injectable medication for these severe cases and refer them to the government hospital. In March, our four clinics treated over 800 patients with malaria.

Our nurse-midwives give insecticide treated mosquito nets to pregnant women as well as antimalarial medicines. Our patients are taught about how to prevent malaria and how to recognize symptoms. We are grateful to be able to relieve some of the suffering, and save lives through your prayers and donations. I'm reminded this Lenten season of the eternal life that is theirs through faith in Christ and the urgency of continuing to spread the gospel throughout the world. Have a blessed Easter!

Beth Evans,
Nurse in Charge