

The International Health and Development Network Mission Hospital– Weta, Ghana

A foray into Tropical Medicine
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Community Outreach

Village Health Fair: Worgbato



Worgbato is a village of about 2,000 people. The group traveled with a mobile pharmacy in a suitcase, medical history forms and two blood pressure cuffs. The most common diseases encountered were similar to those seen in the clinic in Weta: Malaria, Helminthiasis and Chronic Pain. The visit more importantly served to encourage personal responsibility in health maintenance and bolster faithful follow ups to the main clinic.

Worgbato Women's Club



Growing out of our village health fair was the Worgbato Women's Club, designed to expose the matriarchs of the village families with essential health information guided by an old African saying: "Educate a man and teach only one; educate a woman and educate a nation." We all sat under a mango tree discussing feminine hygiene, health literacy, diarrheal illness and family planning.

Teen Sex Education



Having noticed an alarming number of teenagers presenting with STIs (including HIV) and pregnancies, the group elected to put together a presentation at the Some Secondary School concerning sex education.

IHDN Mission Hospital



Today, the International Health and Development Network Clinic stands with its outer shell shiny and newly completed as well as much of its interior alive and bustling. Following its groundbreaking in 2006, the hospital has begun to serve its mission to meet the health care needs of the local population, with substantial room for future growth.



Outpatient Clinic

The clinic boasts six exam rooms servicing roughly 350-400 patients per month. Most common presentations include malaria, helminthiasis, hypertension, osteoarthritis, respiratory tract infections, and gastritis.



Emergency Ward

For severely ill patients, trauma cases, and those requiring minor procedures there is a three-bed emergency facility offering privacy and more acute nursing services. This also serves as a short-term observation unit.



Inpatient Unit

Occasionally, patients require longer term care, for which the hospital offers a ten-bed inpatient unit where patients can receive intravenous drug therapy and around the clock nursing care and observation.



Ancillary Services

The clinic offers basic laboratory services, including blood counts, basic chemistries, and microscopy, and a pharmacy stocked with most necessary intravenous and oral medications.



Future Plans: Hospital

The hospital still awaits the completion of the operating theater, arrival of a functional x-ray machine, overnight physician quarters, and administrative offices.



Future Plans: Grounds

The plans for the grounds include fish and cassava farms, more inpatient wards, a nursing school, a public health radio station, other staff quarters, and a community water tower.

Health Care in Ghana

During the visit to Ghana, we were exposed to various elements of the Ghanaian health care system, including their newly introduced national health insurance, various public and private hospitals, and the principle disease processes of Ghana's "tropical" environment.

National Health Insurance Scheme



A National Health Insurance Scheme is in place and operational which provides an excellent safety net for the poorest people in the country. However, the IHDN clinic is a fairly new institution and has yet to be evaluated and accredited as a legitimate center for health care provision by the government. After the December elections, an entirely new administration came into place, which had failed to appoint a new Health Administrator during our trip.

Public, Private, and Mission Hospitals



The hospital visitations spanned the spectrum from the massive teaching hospital in the capitol city, to understaffed clinics supported with governmental health insurance, to private clinics with mainly affluent patient populations, to a clinic supported by religious foundations.

Tropical Medicine



Tutorials focused on tropical diseases less frequently encountered on the floors at BJH and were moderated by Dr. Isaac Barnor, the full time physician for the IHDN clinic. These included malaria, typhoid, malnutrition, leishmaniasis, helminthiasis, schistosomiasis, and tetanus.