

Medical Cover

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The winter-over team had the advantage of having two doctors during the period of their stay at Maitri. Dr Nalin Mehta from the All India Institute of Medical Sciences had been given elementary training in Anaesthesiology prior to his departure from India. Luckily for this team we did not have to test his skills.

We had a total of 176 cases during the period between 1 Feb. 1993 and 26 Jan. 1994. This works out to an average of approximately 15 cases per month, which is a very acceptable figure. All cases were of a minor nature and responded to simple medication and advice.

There was no incidence of infections of any kind, not even Coryza, URTI, Wound or GI infections. It is our confirmed opinion that such conditions are not as common as have been made out previously. There was no case of fever. The only real danger is if injuries are caused due to the nature of the work in the delirious effect of the harsh Antarctic climate and terrain. Fortunately, we had no major injuries, mainly due to the fact that strict preventive measures were enforced and the team members readily appreciated the importance of the advice rendered. The much talked about sleep-cycle disturbance was observed in some cases but it appeared to have been voluntary in all of them and did not adversely affect the performance of their duties. In any case no one reported sick on this account. Members were encouraged to talk to each other freely and this probably helped in precluding psychological disorders or depression and no medication. All in all the mental robustness displayed by the team more or less ensures that the doctors stayed un-employed. It has been a pleasure to have been so.

I hope the XI Winter-over team enjoys similar good luck.

Medical Attendance

Details of cases attended are as follows :

Sl. No.	Diagnosis	No. of cases
1.	Headache	37
2.	Myalgia/Arthralgia	54
3.	Low back ache	23
4.	Minor crush injuries	39
5.	Joint injuries	18
6.	Dental problems	03
7.	Psoriasis	01
8.	Accidental Vitriolage eye	01
Total		176

The above figures do not include 7 Russian patients attended to, including one patient monitored overnight and treated at the Russian station Novolazarevskaya.

Medical cover was also provided to 3 stranded Russian polarmen during a rescue mission.

Our thanks are due to Drs Slava and Victor (Novo) for providing dental cover for three cases.

Recommendations

1. The space provided for hospital facilities is too little and preclude major emergency management.
2. It is suggested that the composition of the medical team in nearby Novolazeroskaya be kept in mind when deciding our own team, *e.g.*, if a Surgeon is present there and anaesthesiologist in Maitri may be more useful in an emergency.
3. Adequate preliminary training should be given to the doctor on the use of sophisticated laboratory equipments available at Maitri. In addition, he should be trained in X-ray techniques.
4. Briefing of doctors should be more exhaustive so that they have a correct perspective of medical problem in Antarctica.
5. Considerable reduction in expenditure for expendable medical stores can be made with a more realistic and practical approach to indenting, *e.g.*, the low incidence of infections in Antarctica removes the requirement for expensive antibiotics. Similarly other examples can also be given. The matter was discussed with the Surgeon in the XI Winter.