



## Kantha Bopha FACTS in view of 2011

### **Discrimination of the poor, not poverty, is causing the high mortality rate of children and mothers in the poor world**

During the year 2010, with a total cost of 28 million USD, 108'000 severely sick children were hospitalized at the Kantha Bopha Hospitals in Cambodia; 733'070 sick children received their treatment at the outpatient facilities; 15'265 children underwent a surgical procedure; 25'220 children were treated and bimonthly evaluated at the TB outpatient clinic for their newly diagnosed tuberculosis; and 14'171 deliveries occurred at the maternity clinic. The Kantha Bopha Hospital's cost efficiency rate has been shown to be the best worldwide among the numerous humanitarian projects for children evaluated in the poor world.

Over 85% of all diseased and accidented Cambodian Children receive their treatment at the Kantha Bopha Hospitals. The average annual delivery rate at the Kantha Bopha Maternity Clinic is around 14'500. **Ninety percent of families of these mothers and children are deprived of financial means. Their daily wage is still half a dollar. Therefore, the Kantha Bopha Hospitals are open to all and free of financial charge and discrimination.** Upon treatment, the children's health is restored. The mortality rate in the hospitals is 0.5 percent. There is one maternal fatality in 16'000 deliveries. **Thus, the Kantha Bopha Hospitals can show it to the world: it is not poverty per se, causing the high mortality rate of children and mothers in the poor world, but their discrimination.**

### **Why is there discrimination of poor children's health care in the poor world?**

Two fundamental reasons are to blame for the existing discrimination of the poor. One is the non-existence of a true Public Health Service within the Political System, because of the System's corruption. The other one is the fact, that within the health care protocols of WHO and the International Organizations, children's diseases which are typically not affecting children in the «richer world», remain ignored.

**One disastrous example is the hemorrhagic Dengue fever.** If untreated, its course is as fatal for the child as chicken flue (not to be mistaken for swine flue). There are no funds for treatment of Dengue fever in Cambodia. Millions of dollars have been raised on the other hand to treat and prevent chicken flue. Why? The tiny mosquito carrier makes a distance of some hundred yards. The birds carrying chicken flue, however, may reach out to California. In 2010 we admitted 7600 children with severe hemorrhagic dengue fever to the Kantha Bopha Hospitals as emergencies. In 2007 the extreme number of these patients was 22'000!

**Another fatal example is tuberculosis.** The child affected by tuberculosis is not contagious by coughing the bacilli to the outside world. The bacilli are swallowed. Thus, none of the surrounding people is at risk. Affected adults, however, may endanger numerous tourists in Cambodia. To this day, tuberculosis is not mentioned in the health protocols of WHO with respect to treatment of affected airways of children in the poor world. The child's tuberculosis is regarded as a «non-entity», while each child suffering from active tuberculosis is likely to die of the disease, if untreated. **In 2010, 25'220 children who suffered from tuberculosis were effectively treated at the Kantha Bopha facilities.** WHO and Unicef continue to promote BCG vaccination in order to prevent tuberculosis in the poor world despite the fact, that this vaccination has been shown to be without effect, i.e. useless!

**One third devastating example is cholera.** On November 9, 2009 a case of cholera was detected at one of the Kantha Bopha Hospitals, since this has become a routine test in children with severe diarrhea after **Cambodia's cholera epidemic of 1998.** Upon double checking the information from the laboratory, the minister of health was personally informed of the case by an urgent telephone call. The diagnosis of one sick patient from cholera is alarming, because it points to likely numerous infected other people. Cholera typically spreads among the poorest, where the «sanitary facility» and cooking place commonly are in close proximity. The government and WHO categorically denied the presence of cholera over six months and tried to keep it under cover (presumably in order to prevent a negative impact upon tourism). In June 2010 we informed the media. A total of **2'691 severely diseased children from cholera were hospitalized** during that period, all from extremely poor families. Luckily, all could be cured, even the ones whose disease had progressed into shock and renal insufficiency.

### **Correct and «single class» medical care for all children**

The Kantha Bopha Hospitals clearly demonstrate, with their documented best cost-healing rate in poor countries, that the discrimination of the poor can be eliminated. **Every sick child is being treated. Using correct medicine of uniformly adequate quality, according to the demands of humanitarian common sense and justice.** The 90% of very poor Cambodian children receive the same efficient treatment as the grand children of Cambodia's Prime Minister Hun Sen repeatedly received, if there was worry about their health.

**Corruption does not exist within the Kantha Bopha Hospitals thanks to our consistent presence and the working discipline of the 2400 Cambodian doctors, nurses, cleaning and security personal.** Otherwise, roughly 9/10 of state funds destined for health care would likely be lost. It is up to the health director of any province to spend just 5% for health care in his domaine. The «System» calls for other silent financial obligations, hidden from the public.

Only two times during a year for a short week over the past 19 years I am in my home country Switzerland, informing about the facts, asking for continuous support and in search of possibilities to guarantee the necessary finances for the next 20 years.

**All this can only be achieved thanks to your sponsorship. We hope that this will again be possible in the year 2011. Each USD, EUR and CHF contributes to healing, life saving, and preventing disease and damage. With our heartfelt thanks.**