

Neurology in Bhutan

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Bhutan, at the Eastern end of the Himalayas, has an estimated population of 700,000 spread over valleys that run north-south and the plains facing Assam in the South. Road communication is slow and difficult. In November 2005 I had the privilege to be invited by the Royal Government of Bhutan to discuss the provision of neurological and, in particular, epilepsy services. Primary medical care is provided by District Medical Officers (DMO), who are each responsible on average for the health needs of 15,000. The DMOs are assigned by the Ministry of Health and generally spend three years in a post and are then relocated. Secondary care is provided by regional Hospitals at Paro, Mongar, Bumthang and Trashigang, and the JDW National Referral Hospital is at the capital Thimphu.

As Bhutan does not have its own medical school, the medical staffs are either Bhutanese who trained abroad, typically in India, or are foreign medical graduates. There are no neurologists or neurosurgeons in Bhutan and until recently no brain imaging facilities. In 2006, the new JDW National Referral Hospital had a MRI installed, but still no EEG or EMG facilities.

At present neurology is dealt with by general physicians. Peripheral neuropathy is common in Bhutan. In Thimphu, the single consultant psychiatrist in the country, Dr Chencho Dorji, deals with many of those with epilepsy.

The nearest consultants in Neurology and Neurosurgery are at Siliguri in West Bengal, India, requiring many hours of travel by road. In practice, tertiary care is often provided in Kolkata, West Bengal. The daily flight from Thimphu usually has some patients going for medical care. Bhutan has a health assistance office in Kolkata to assist patients and their relatives and to negotiate arrangements with Hospitals. The provision of urgent Neurosurgical care, for example after head injury, is an active issue. Guidelines for general surgeons in the regional hospitals and ways to provide quicker access to brain scanning and neurosurgery are under consideration.

Generic medications are bought by the Ministry of Health, in India and other markets by a well organised essential drugs program, and are generally available throughout Bhutan. Alongside the conventional western medical treatments, there is a parallel network of traditional Bhutanese medicine and therapies, including administration of herbal infusions in steam and acupuncture with heated gold needles.

There is under-ascertainment, and hence under treatment, of much neurological illness in Bhutan. Taking epilepsy as an example, based on a prevalence of 1/130, and annual incidence of 50/100,000 population per year, one would expect there to be at least 5,000 individuals with the condition and approximately 350 new cases per year. In 2005, surveys carried out at Community and Hospital clinics revealed a maximum of 969 cases.

Health care in Bhutan is well organized, considering its limited resources and difficult communications. The advent of MRI in Thimphu is very welcome, and will hopefully be followed by provision of neurology and electrodiagnostic facilities.