

## 'What Appears to be the End, May Really Be a New Beginning'

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It was the fateful night of the 25th May 2011, when my brother Arshad, stepped forward to support his team to transfer a critically ill young male patient to the Apollo Hospital, Delhi, in an Air Ambulance. According to his colleagues, the patient's family were desperate to save their son, putting their life savings towards his care. Even though Arshad was not on duty at the time, he wanted to help save the young ITT aspirant. The air ambulance on route to Delhi with seven people on board, including my brother, crashed that evening at around 10:45 pm. Everyone on the Air Ambulance died. The pain it has inflicted on the family, friends and patients is unimaginable. The sudden and tragic death of a young, enthusiastic and energetic doctor shattered many dreams. For family and friends his tragic death remains irreconcilable. The national and local media praised my brother, reaffirming his personality and professionalism which had impressed people from all walks of life.



The Dr. Syed Arshad Abbas Memorial Trust was established in June 2012, in memory of my brother. We, as a family, set up the Trust to keep his mission alive. The aims of the Trust are to promote health care and education and to provide scholarships to students from families with very low incomes. The Trust also aims to establish, maintain and develop educational and vocational institutions and research centres.

Initially, we started by setting up a free medical health camp twice a year at the family clinic in a small hamlet named Nowlari, in Kashmir. My family has been living there for the past 300 years. Work to date includes running the health camps twice a year, where we screen patients, do routine investigations, get input from specialists who volunteer at the clinic and refer patients to secondary care services. They are also given free medication. In collaboration with the Red Cross, a blood donation clinic was set up in September 2012. The Red Cross team were surprised with the overwhelming response from the donors, however, they fell short of equipment.



My father donated an ambulance to the Trust which is



available 24 hours a day in the surrounding area. Many family members and friends volunteer throughout the year. Since the Trust was established, I have been involved in organising and setting up health camps, coordinating with different specialists, inviting them to attend the health camp and raising funds for the Trust. Over the years, after the health camps, we arrange a feedback meeting to discuss things that went well or could be improved. When we first set up the

camp, we advertised it in two of the main local papers. We started the camp at 8:00 am and it ran for twelve hours. We felt that not all the patients who attended the health camp needed the service. During consultations I became aware that there were a few patients who had come because they had read in the newspaper that it was a free health camp, and they decided to get checked out as well as receive free medication. To avoid this happening again in future years, we screened patients by registering them on a first come first served basis. We also shared some of the pictures of health camps and Mental Health Awareness talks on a small media platform on Facebook. Consent from the patient is requested every time we take pictures.



I have a vivid memory of transferring a teenage boy to tertiary care, who presented with Acute Appendicitis. He was operated on within two hours because of the availability of an ambulance. His life was saved that day. It is something I will always remember.

We provide financial assistance for children from low income families to go through primary and secondary school. We have also provided financial help to patients with Breast Cancer and Renal Failure for their chemotherapy and dialysis costs. In 2018, I raised funds for a patient who needed a renal transplant. I still remember the text message I received from him after the transplant saying, "Thank God for my third day of life after a successful surgery". It was so thought provoking that I have kept that text message on my phone. Currently, I am raising funds for a Kashmiri medical graduate who studies in Bangladesh and needs financial assistance. We are supporting a girl who is an orphan and is in her second year of completing her Diploma in Cardiology.

We, as a Trust, have supported victims of the Kashmir floods in September 2014. During my supervision, my supervisor and I discussed how the floods affected people of Kashmir, how I, along with my nine-year old daughter, organised a cake sale in her primary school and raised funds with my local Community Centre. We discussed how people were generous enough to support the cause. My supervisor, my husband who works as a Consultant in the same Trust, and I set up a GoFundMe to raise money for a Rehabilitation Centre in Kashmir, which was badly affected by floods. My daughter and I went to Kashmir in October 2014 following the floods. We helped one school with financial assistance. We also donated wheelchairs, medicines and surgical equipment to two hospitals in Srinagar which were badly affected by the floods. Following a survey which was done locally by volunteers who live in Kashmir and work for the Trust, twelve families were chosen in our neighbouring area who had been badly affected. We provided them with bedding and basic commodities such as food and basic heating materials for the next six months.

Mental health has been a priority since day one, as my husband and I are both trained in Psychiatry in the UK. We offer specialist psychiatric services whilst participating in a health camp each year. Over the years we have noticed that the most common disorders present in patients are Depression, Anxiety Disorder and PTSD. There has been an increase in these disorders because of the turmoil caused by the conflict in the Kashmir Valley. Drug and Alcohol problems have been a real concern amongst parents whose children are affected by it. There is a real issue of polypharmacy. SSRIs are combined with Clonazepam and most of the patients are on that combination. I have raised my concerns about this issue with regional managers of two pharmaceutical companies.



While assessing the patients, we realised that there was a need for a Mental Health Awareness Programme. Since 2015 we have been successful in setting up Mental Health Awareness talks in four different Universities, two of which were given by me. I received positive feedback and have been invited to come back by other Universities to raise awareness about mental health in May 2020. My recent Mental Health Awareness talk in May 2019

was broadcast by two local news channels. They interviewed both staff and students, who shared their views about the talk. We gave feedback forms to the faculty at the end of the talk and we received positive feedback. Two things were concluded from the feedback forms; firstly, there should be a counsellor in universities for students, and secondly, similar awareness programmes were needed.

As people are becoming aware of the voluntary work done by the Trust, we are receiving donations on a regular basis. Some have come forward and set up a direct debit, donating monthly. We are thankful to all volunteers who work for the Trust and those who assist us with donations. Without their help it would not be possible to continue our work. It has become my passion and love to work for the Trust. It is a tribute to my brother and his humble desire of providing the best possible health services to the community at large.

To conclude, I would like to share what my brother wrote on the day before he left us: "What appears to be an end may really be a new beginning".



#### Acknowledgement

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A special thanks to all our patients for giving permission to add their pictures to this article.

#### Conflict of Interest

None