



Severe drug and equipment shortages at Port Moresby General Hospital

By Glen Mola

It's not always good news. Today we heard at our staff meeting at Port Moresby General Hospital that we have run out of antiretroviral (ART or HIV) medicines.

We have many thousands of HIV positive people on treatment in the National

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Capital District (and several more thousands around the rest of the country) and they may not have any medicine to take unless new supplies arrive in the very near future.

People on ART must take their medicine every single day: if they stop and start again they are very likely to breed resistant HIV.

This is not only bad (in fact life-threatening) for the patient, but life-threatening for everybody else in the community who might catch HIV from them.

We also don't have any syphilis test kits in the country. Syphilis used to be the most common cause of stillbirth (babies dying inside their mothers) in our audit statistics - and after we started routine testing of all mothers coming to ante-natal clinics and treating the positives, we virtually eliminated this scourge from our pregnant mums.

But now, with no test kits available, the syphilis problem will come back and many babies will die.

And this week we ran out of oxytocin, the drug that prevents women from losing too much blood when they deliver babies.

The most common cause of death when oxytocin is not available is post-partum haemorrhage (excessive bleeding after the birth); so we are probably going to see a lot more mothers die even when they come to hospital to have a supervised birth.

And we are very short of surgical sutures - the special thread and needle that surgeons use to sew up patients during and after operations.

Every day we don't have some essential item that is critical to standard medical practice.

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And the PNG government does not pay for any of the family planning commodities – pills, depo-provera, implants etc. They are all donated to us by the United Nations Population Fund and other overseas donor agencies.

Eventually this will stop, because PNG has recently been upgraded to a middle income country because of our oil and gas extractive industries.

And if the government does not step up and buy the family planning commodities that we need to assist people to plan their families, I'm not sure what the consequences will be.

Most doctors and nurses try to stay positive about their work, but in the face of a government that does not support the health system it is becoming more and more difficult.

We know there are millions of kina available for high profile stuff like various intensive care facilities at PMGH (coronary care, trauma, cardiac catheterisation, renal dialysis) that benefits only a minority (less than 1% of patients).

But there is no money for the majority (99%) of patients – the sick kids, the women delivering babies, the people needing emergency surgery every night, the HIV and TB patients, families needing contraceptives to plan their families. Why?

“The answer my friend is blowing in the wind...” (Bob Dylan)

Can we all please start putting pressure on the government to fund health services properly – and not just through Borneo Pacific?

This article was first published on [PNG Attitude](#), and is republished with permission. According to [Radio NZ](#), a shipment of HIV drugs has just arrived in PNG.

About Glen Mola

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