

2020 AUGUST UPDATES FROM MINISTRY OF MERCY, NIGERIA Inc.



Warm greetings to you from all of us at Ministry of Mercy, Nigeria Inc. We hope that all is well with you and yours.

We bring you the August edition of our monthly updates. All the three arms of our mission (MoM Medical Center, MoM Orphanages and MoM Christian Academy) are enjoying grace and mercies of God. Below are some of our stories for the month.

MINISTRY OF MERCY MEDICAL CENTER



As always, the month's update on our mission hospital is presented along the paths of the three main domains of the hospital's activities – General healthcare, Charity and the Gospel. We have the following few selected stories and relevant statistics from this arm.

GENERAL HEALTH CARE:

Here we have the following selected few stories and relevant statistics.

1. **Hand and Foot Syndrome:** One of the signs of sickle cell anemia is a condition called “hand and foot syndrome”. It is characterised by swelling of the hands and feet in children with this genetic disorder. In some children this is the first sign to show up among the features of sickle cell anemia. This was the situation of Augustina, a 22-month-old girl who came into our care during the month. In addition to the swelling of her hands and feet, she also had fever. On laboratory investigation, she turned out to be a “sickler” (HbSS). She was managed out of the emergency condition, discharged and scheduled for follow-



up. Hemoglobinopathies have remained a big challenge in this part of the world. We have therefore continued to educate parents on special care required by such groups. However, premarital counseling and testing remain our priority. Augustina needs your prayers because living as a “sickler” can be a huge challenge.

2. **Renal failure in Diabetes:** A 47-year-old presented with over 3 years history of recurrent abdominal pain, weight loss, excessive weakness and malaise. He was chronically ill liking. He had consumed several herbal concoctions and was left in a prayer house. It was from this prayer house that the proprietor sent him to MoMMC after paying him a visit. The initial lab. investigation results were in keeping with chronic kidney disease because

highly elevated urea and creatinine levels. But the nephrologist who reviewed him was



rather silent and not excited about a kidney disease. Rather, he investigated for diabetes mellitus using serial fasting blood glucose tests, and very interestingly, this patient turned out diabetic! It was actually a case of Diabetes with chronic kidney disease (or diabetic nephropathy). Antidiabetic drugs were commenced on him, and amazingly the patient dramatically improved. The kidney function test results began to return to normal. This makes

sense because one of the most common causes of kidney disease is diabetes mellitus. This man who could not remember the last time he was well said “I feel good for the first time in a long while”. His laboratory investigation cost a great deal but thanks to God for our proprietor Mr. Daniel Edeh who bore the cost.

3. **Urinary Obstruction Months After a Prostatectomy.** First thought about the diagnosis of a 64 year old male with urinary obstruction would be prostatic enlargement (there are other possible causes). But for the patient to have had a successful prostatectomy some months earlier, it becomes a cause for concern because if the prostate which is expected to be the most likely cause of urinary obstruction has already been resected, where then is this problem coming from? The emergency care doctor, urologist and radiologist are already trying to work their way through. The good thing is that his urinary retention has been relieved while we work towards definitive cure. He is very dear to Ministry of Mercy because, as an experienced lawyer and a true friend, he has been instrumental in wading us through legal issues encountered by the ministry. Now, he needs your prayers.



4. Body wasting due to Malnutrition. Hussein, a 7-year-old girl who presented with vomiting, diarrhea and anorexia. She looked so chronically ill and wasted. Several laboratory investigations did not give any specific diagnostic direction. She was finally adjudged to malnutrition. Managed along this line, she significantly improved and discharged. She has returned for follow up and looks much better. Thank God for Hussein.



5. MoM Medical Center Outlet Otutulu.

Relocation and Expanded Coverage: This clinic outlet has been relocated to a separate and more convenient building outside the orphanage fence. With this, the clinic is better positioned to attend to the villagers outside the orphanage.



General Healthcare Statistics

General

General out-patient department visits	272
Ward admissions	44
Surgical procedures	09
Total no. who received drugs	393
Total number of laboratory tests done	559
Number of transfusions	04

Preventive Primary Health Care:

Immunizations (within the hospital)	
Number of children immunized	91
Number of doses received	249
Number of women immunized (tetanus toxoid)	23
Number of doses	23
Contraception.	
Women received contraceptives	10

CHARITY HEALTH SERVICES:

Several medical services were provided to many patients for free or at assisted cost during the month. Most of these services have to do with maternal and child health cases. 19 women had child deliveries free of charge within the month, 7 of these were free cesarean sections. This is in addition to several orphans who also had medical services free of charge. Few of these stories are summarized below.

- I. **A Previous C-Section with a Prolonged Pregnancy:** This is a combination that will almost always requires another surgical birth. This was the case with one of our patients, a 31-year-old in her 2nd pregnancy. Her due date had passed without labor starting. To save her baby sudden fetal death (which can occur in prolonged pregnancies) she had to go through facilitated delivery. Induction of labor with drugs could not be carried out to avoid the risk of uterine rupture, being that she has a previous uterine C-section scar about 2 years earlier. After all necessary preparation, she was taken to the operating room and after about an hour, wheeled out with her live baby girl weighing 3.5kg. The procedure was not without its issues, though. But a post-operative transfusion with one unit of blood sufficed.



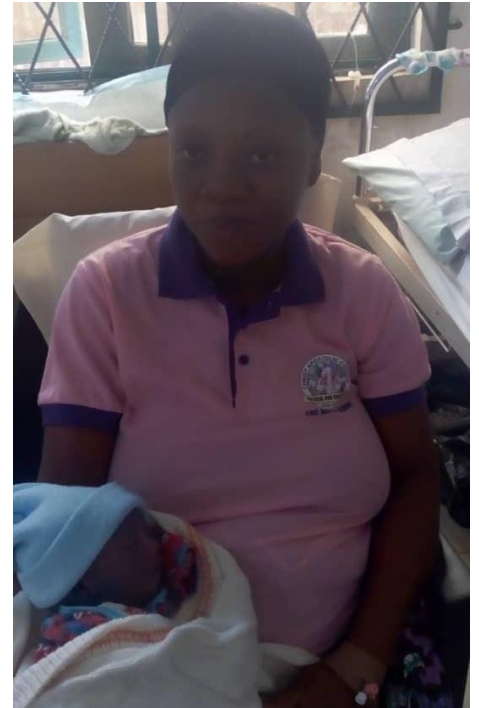
- II. **A Fibroid Cohabiting with A Fetus:** A 26-year-old woman in her first pregnancy came to us for antenatal care at MoM Medical Center. Further assessment revealed that her baby was sharing the womb with a huge uterine fibroid. She was fortunate not to have

been prevented from conceiving by this mass in the first place. The next concern was whether this intruder would not expel the rightful occupant of the uterine space before full term. Next, if at all this pregnancy survived the 9 months of cohabitation with the fibroid, how was the delivery going to be? There have been many instances of obstruction of childbirth due to an unfavorable fibroid location in the womb. In many of such cases, the women had to go under the surgical knife to be delivered. Fortunately for this particular patient, on the day of delivery everything went well without



surgery. She was delivered of a live baby girl weighing 2.3kg (could have probably weighed more if the fibroid had not taken up the space). The fibroid is now the sole occupant of the womb, or so it “thinks”. That would not be for too long though, because in 6 months’ time, the surgeon will be coming for its head with his sharp blade for eviction through a surgical procedure called myomectomy.

III. **Twins – One Dead, and One Alive.** A 28-year-old woman in her 2nd pregnancy, who is registered with us for her antenatal care was found to be with a set of twins (boys). However, as at the time of her ultrasound scanning, one of the twins was no longer alive. The living twin weighed 3.5kg while the dead one was only 1.5. This means that the lifeless one died several weeks earlier and stopped growing since that time. There are risks associated with this kind scenario, both to the mother and the living fetus. Eventually their delivery was conducted through a cesarean section to rescue the living one, and to evacuate the dead. It's not very clear what took the life of one of these babies (there are a number of possible causes), but we are grateful that the other hung on till delivery. He is a survivor. It can be uncomfortable to cohabit with a fibroid (as in the story above) but it's quite scary to live with the dead in the same room for weeks, even if it is your own twin brother. We are grateful to God that one of them lives. The mother is fine too. This is her second set of twins. The first set was born about two years earlier with only one of them surviving.



IV. Eclampsia and Post-Operative Bleeding. A young woman, not registered with our antenatal clinic came to MoMMC with complications of uncontrolled hypertension in pregnancy. It all started with a headache at home earlier in the day. Rather than go to the hospital, she sought care at home where she was inappropriately managed. By the time she was brought to the hospital she began to convulse, followed by unconsciousness. Her unborn baby was found to be in distress too. An urgent delivery



was imperative. An emergency C-section was carried out, yielding a live baby girl weighing 2.5kg. But shortly after she wheeled out of the theater she began to bleed profusely. All non-surgical measures to address this occurrence failed. Her life was ebbing away! Next step: she was rushed back into the theater and reopened to search for source of bleeding. If a definite source could not be located on time, the uterus would have to be entirely removed. Fortunately for her the bleeding source was promptly located and bleeding arrested.

- V. **C-section due to Antepartum Hemorrhage:** Any level of bleeding during pregnancy (before labor) indicates something is not right. In many instances it does not end well.



For this reason, it was not taken lightly when one of our pregnant patients complained of bleeding in her second pregnancy. An ultrasound scan revealed the placenta was abnormally located – low lying. This is why she was bleeding. Her previous C-section scar might have put her at risk of this anomaly. Thankfully the bleeding was mild, so the medical team was willing to wait (watchfully) in order to buy some time for her developing fetus while on hospital admission. When the time was right, an elective cesarean section was

successfully carried out, yielding a live baby boy weighing 3kg.

VI. **Three other women benefitted from free C-sections for the Following Reasons:**

- a. Breech presentation
- b. Breech presentation, fetal macrosomia and fetal demise
- c. Previous c-section scar

These women are grateful beneficiaries of the work compassion God is doing in MoMMC. Thank God for His grace.

Statistics on Charity

Antenatal care statistics		
Week	New patients	Patients on follow-up
Week 1	05	27
Week 2	07	21
Week 3	02	24
Week 4	10	22

Week 5	00	03
Total	24	97
Grand Total Number of Visits		121
Other Free Consultation (Children below 1 year, orphans and indigents) excluding pregnant women		25
Number of Deliveries		
C-Sections		07
Normal Deliveries		12
Total Births		19
Number Who Received Drugs for Free (Children below 1 year, orphans, pregnant women and indigents)		225
Number Who Had Laboratory Tests for Free		97
Total Number of Free Surgical Procedures		06

THE GOSPEL:

We have the following story of the gospel for the month of August.

Rest for the Weary and Heavy Laden. A 38-year-old woman came to us at MoM Medical Center practically weary. She had abdominal distension, swelling of legs, body wasting, weakness and easy fatigability. These have been recurrent for three years. She is a known patient of congestive cardiac failure. Further investigation uncovered deranged kidney and liver functions. She is also a known HIV patient who has been on antiretroviral therapy but appears to have poor adherence to these drugs. She seems to have slipped into treatment failure as a result. She is going require multidisciplinary approach. The medical team in MoM Medical Center deemed it fit to transfer her care to a more suitable healthcare center at this point. On the morning of her departure, one of our staff members sat with her and

opened the scriptures to her. It was Matthew 11:28–30 ***“Come to Me all you who labor and are heavy laden, and I will give you rest. Take My yoke on you and learn of Me, for I am meek and lowly in heart, and you shall find rest to your souls. For My yoke is easy, and My burden is light.”***

With emphasis on the hope of eternal glory for a child of God irrespective of earthly circumstances, she received exhortation. She was also encouraged to cast all her cares on the Lord because He cares. After a little more encouragement, this patient decided to make the Lord Jesus her Lord and savior. She was led through the prayer of salvation, and shortly after, she was visibly flooded with joy. Obviously, she has found rest! She left MoM Medical Center that morning joyful. She came with depression and left with joy even when her medical condition had not changed. Something supernatural must have happened to her!

Although she has left us, our prayers are with her. God who redeemed her spirit is able to do same to her body and health. Please remember this lady in your prayers.

(The patient prefers not to take photo because of her markedly emaciated figure)

The gospel continues to be preached to many souls in different forms: one-on-one and in groups during our morning devotional sessions in the hospital. Your prayers continue to be needful. ***Ephesians 6:18–19.***

May we continue to be fruitful in every aspect as a Christian mission medical center by the grace and mercy of God.

Blessings,

Dr. Friday Odiba

On behalf of the Medical Director,

MoM Medical Center



Dr. W. A. S. Omale, MD

Consultant Ophthalmologist and Medical Director,

MoM Medical Center

MINISTRY OF MERCY ORPHANAGES

During the month of August, the two locations of MoM Orphanage – Otutulu village and Lokoja received and cared for many orphans and vulnerable people.

● **New arrivals:** MoM Orphanages had 3 new arrivals in the month of August.

i. Baby Joseph Miracle Abah was brought to Ministry of Mercy Orphanage Otutulu on

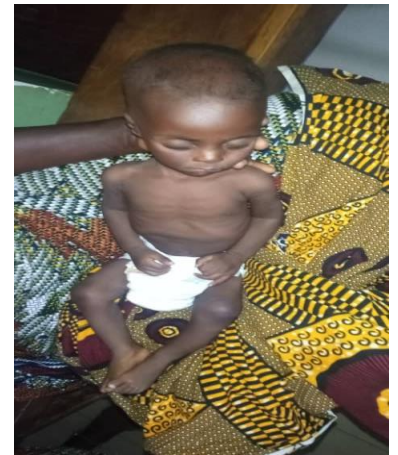


Tuesday, August 18, 2020 following the death of her mother during delivery on Wednesday, July 29, 2020.

- ii. On Sunday, August 23, 2020, MoM orphanage Otutulu received another new born named Edeh Junior Joseph who was given birth to on Wednesday, August 19, 2020. Daddy Daniel Edeh paid a condolence visit to the family of the deceased to share in their moment of grief. The father with the understanding of the wife's family decided to give the baby to the Ministry of Mercy Orphanage for his upkeep. He hails from Ichama Centre, Benue State.



- iii. Baby Sunday Gimba was brought to MoM orphanage Lokoja on Sunday, August 23, 2020. The mother was said to have died three months after childbirth from an unknown illness since she could not afford the needed medical services. After the death of the mother, the baby was fed with some local herbs since they could not afford the needed baby formula. He was brought to the orphanage for his upkeep and it was agreed for the baby to be reunited to his biological family after two years. But, we unfortunately lost the baby 3 days later.



- **Handing over of baby Abdulaziz Hassan:** baby Abdulaziz Hassan was brought to MoM orphanage Otutulu on May 31, 2018 for his upkeep following the death of his mother. He has since then been with MoM orphanage Otutulu until August 8, 2020 when he was formally handed over to his biological family. Please, pray that he may grow to know the Lord Jesus Christ even in the midst of his Muslim family.



- **Preparation for First School Leaving Certificate Exam:** Eleven(11) of our children at MoM orphanage Lokoja moved to Otutulu on Saturday, August 22, 2020 in preparation for their first school leaving certificate exam. Please, pray for them to be successful in their academic endeavors.



MINISTRY OF MERCY FARMS

a. Poultry

There has been a great improvement in our poultry farm.

On daily basis, we pick an average of 30 crates from our poultry. 8 out of these 30 crates are used in feeding our children on daily basis.



Just as stated in our last report, we bought a set of two hundred (200) day old broilers on Friday, August 28, 2020 to be raised in our poultry. This is with the view of improving our children's diet.

Please, pray for resources to keep restocking our poultry on monthly basis.



b. Crop farming

There has been a hike in the price of cassava which makes a good part of our food. Fortunate enough for MoM family, we have enough cassava in our farm to last us this season. We are currently processing cassava to feed the two locations of MoM orphanages– Otutulu and Lokoja.



C.Fish pond.

Our fish pond have long been prepared to receive a new set of 2000 fingerlings. This is with the view of improving our children's diet.

Please, pray for resources to sustain the farm.



D.Piggery: We have quite a good number of pigs in our piggery. This has continued to be a huge source of meat for our large family.



MoM CHRISTIAN ACADEMY

Just as stated in our last report, the school management resumed full academic activities for the exit classes (Prim. 6, JSS 3 and SSS 3) on August 4, 2020 in accordance with the directive of The Federal Government of Nigeria. The remaining classes were also made to resume fully seeing that the school is not overly populated. All precautionary measures against the spread of Covid-19; hand washing, use of facemask and social distancing are fully observed.



- **More hands joins MoM Christian Academy.** during the month of August, MoM Christian Academy was able to employ the services of two more teachers (Mr. Oguche and Mr. Ogacheke) in a bid to give her students the best education they deserve. Mr. Ogacheke holds a Bachelor's degree in Economics while Mr. Oguche holds a Higher National Diploma in Survey and Geo-informatics.



Mr. Oguche



Mr. Ogacheko

Please, pray for divine provision to be able to pay the salaries of this increasing number of staff.

Daycare Program

Our daycare program has been largely successful in that our babies and toddlers who before now have just been playing around are now exposed to various learning experiences ranging from color identification, naming of animals, proper sitting posture, coloring, and letters of the English alphabets.

Please, be praying along with us as we deeply rely on his faithfulness for divine provision for the smooth running of this program.



Sincerely yours,

Monday Alidu and Ogijo Joseph

PRAYER REQUESTS

1. Appreciate God for His goodness we enjoy at Ministry of Mercy – peace, security, provision, new staff, healing, and salvation.
2. Thank God for the safety of Dr. Omale and his family during a robbery attack on his home.
3. Thank God for every safe child birth and patient recovery at MoMMC.
4. Pray for the new orphans admitted into the orphanage in the Month of August. May God grant the resources to raise them.
5. Pray for the converts at MoM Medical Center. May God give them a foundation that will abide. May He heal all their diseases.
7. Please pray for divine provision to enable us continue more for the Lord in the vineyard of the lord.
8. Appreciate God and pray for His blessings upon every supporter of Ministry of Mercy – past, present and future supporters. May their hands never run dry in Jesus name.

Thank you for your invaluable continuous partnership in prayers, thanksgiving and giving.

Dr Odiba Friday,

Publicity Department

Ministry of Mercy, Nigeria.

www.ministryofmercy.org

STAY SAFE!

Ministry of Mercy..., *Love finds a way. 1 Cor. 13:7*

DONATIONS

You are welcome to help more of these kind of people get help however you can: you can help a pregnant woman access a doctor for antenatal consultation and care, or help her give birth in expert medical hands, or help a sick child see a doctor, or any of these under listed services, for free or at an affordable subsidy through your donations as God will enable you. All donations are welcome.

Click any of the “Donate” buttons at the bottom of the page if you wish to send in a donation

MoM Medical Center

Maternal Care	Full Cost Waiver in Naira	Full Cost Waiver in USD Current exchange rate averages 362 naira per dollar, but may increase or decrease at any time.
Cesarean section	150,000 naira	\$416.00
Normal delivery	22,000 naira	\$61.00
Antenatal consultation	300 naira per visit	\$0.85
Routine antenatal drugs/medicines	Average 4,000 naira per pregnancy	Average \$11.00
Other Medical Services	Total in 2018: 2,300 naira	Average \$6.35
Pediatrics care - Kids below 1 year and all Orphans	Full Cost Waiver in Naira	Full Cost Waiver in USD
Clinic consultation	300 naira per visit	\$0.85
Ward Review	200 naira per review, average 2-7 reviews per hospital stay	\$0.55 per review
Lab tests	Average of 1500 naira per test, average 3-5 tests per patient	\$4.20
Drugs/medicines	600-5,000 naira per course	\$1.70-\$14.00
Other Medical Services	Total in 2018: 2,300 naira per patient	Average \$6.35
Clinic consultation	150 naira per visit	\$0.40
Ward review	100 naira per review, average 2-7 reviews per hospital stay	\$0.30
Lab tests	Average 750 naira per test, average 3-5 tests per patient	\$2.10
Drugs/medicines	1,500-2,500 naira per course	\$4.14-\$6.91

Other Medical Services	Total in 2018 150 naira	\$0.41
Widows and indigent patients	Cost Reduced According to the Patients' Needs	“Sliding Scale”
All Medical Services	Total in 2018 > 93,760 naira	>\$259.00

MoM Orphanages

Items	quantity	Cost (in naira)	Cost (US dollars)
Infant milk per child for one month	8 tins	24,000	66.30
Diapers for one child for a month	2 packs	8,600	23.76