

MOUNTAIN MEDICINE SOCIETY OF NEPAL NEWSLETTER

A n n u a l E d i t i o n

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EDITORIAL

The year 2020 brought about a paradigm shift in the way we live our lives. Coronavirus pandemic has affected the entire world including our country, our mountains, and the Mountain Medicine Society of Nepal. Despite all odds, it gives me immense pleasure to present this MMSN Newsletter - Annual edition.

Given the roller coaster ride that the previous year was, it is obvious that we too went through many ups and downs. Expedition season being canceled brought about a feeling of dismay for many, and the loss of our beloved Prakash sir was an irreparable cause of grief. For those of us who have developed a sense of belongingness to the mountains, lockdown meant that we were caged - but this was a demand of the situation and we could not complain. However, this did encourage us to make the most out of the resources at hand. The horizon of MMSN Newsletters broadened and e-editions of the same was started with the Fall Edition having been published in November. Similarly, digital platforms were utilized for conducting MMSN Journal Clubs and experience sharing programs. Although conducting outdoor activities was initially difficult, the post lockdown COVID phase saw MMSN taking full precautions and organizing treks, hikes, and cycling events. Our doctors reached the Everest ER, Pheriche aid post, Manang, and Namche. Expeditions did take off, and we tried our best to redeem ourselves since last season.

The pandemic is far from over and the impending second wave means that we might have come back to square one. Taking more precautions and with more understanding about how devastating the effects of this pandemic can be, we move forward. This annual edition puts forth the dilemmas of mountain medicine enthusiasts during this pandemic, their experiences, their contemplations, and most importantly, their memory of the mountains!

Kanchana

Kanchana Bali
Chief Editor

MESSAGE FROM THE PRESIDENT

Buddha Basnyat

Prakash means light

Prakash in Nepali means light. As we reminisce about the life and times of 54-year-old Prakash Adhikari, the Chief Executive Officer (CEO) of the Himalayan Rescue Association (HRA) who passed away on October 23 2020 due to COVID-19 pneumonia, his name holds a special significance for us. Mountain Medicine Society of Nepal often worked very closely with Prakash and our lives will be successful if we at MMSN follow his indelible example.

Prakash always went out of his way to show us how to help the poor and needy. He did this primarily by helping rescue porters who were sick and stranded at high altitude in the Khumbu region of Nepal. He did so by skillfully negotiating with helicopter pilots, who were out in the field at high altitude rescuing sick trekkers who had health insurance coverage, requesting if they could kindly also rescue an ill (often uninsured) porter in the vicinity to bring him down to lower altitude. This simple act saved the lives of many porters because severe altitude illness often responds to just dramatic descent. As though this were not enough, if the sick porter was brought to Kathmandu with no one to help (as porters are

usually not from Kathmandu), Prakash took it upon himself to receive the porter at the airport, take him to a hospital and follow up. All this time, he would be wondering where on earth he could find the money to pay for the porter's hospital bills, as often the porters just have enough to eke out a living. Also, hardly anyone has health insurance in Nepal. Let alone porters.



*Late. Mr. Prakash Adhikari
CEO, Himalayan Rescue
Association (HRA)*

Somehow, miraculously financial help would turn up. It was as if some wise yogi had told him to keep doing all the great and compassionate things that he was doing, the money would be found from wherever it was then. This showed us how it's not always wealth that is key in order to be able to help those in need, but mere intent also suffices. He clearly thrived on

helping others, especially the vulnerable and the disenfranchised amongst us.

Prakash always made sure that not only porters but also trekkers and tourists were treated well because he clearly realized that by doing so he would be helping everyone, especially the tourism sector in Nepal. He felt that his small contribution would help alleviate poverty in Nepal, a topic that often devastated him for his ability to do so little in this regard. His close attention to safety in the mountains was, however, not limited to only foreign tourism. For almost twenty-five years (his entire tenure at the HRA), he dedicated himself through the HRA to organizing the yearly Gosainkunda health camp at 4300 m so that thousands of pilgrims could ascend safely from Dhunche (about 2000m) with emphasis on prevention and treatment of altitude illness.

Prakash contributed to academic mountain medicine by actively helping many young Nepali and Western doctors to cut their professional teeth on altitude medicine (with proper supervision by senior experienced doctors) in these high-altitude camps. As the

CEO of HRA, he helped doctors highlight plights of the pilgrims by encouraging medical research to find out more about the vulnerability of this population. He actively helped out with determining that a lower dose of Diamox (125 mg bid) with fewer side effects was adequate for the prevention of acute mountain sickness, unlike what a British Medical Journal's meta-analysis had earlier reported. Although we doctors at the HRA planned and conducted this high altitude research which is often universally useful and therapy- changing, it would not have been even remotely possible in our bureaucratic set-up had it not been Prakash's strong backing and gentle encouragement.

The bureaucracy also involved obtaining official approvals for volunteer HRA doctors for the Manang (3519m), Pheriche (4300m) and Everest Base Camp (5600m) aid posts from the health ministry, the labour ministry, immigration, and the Nepal Medical Council. He first collected all the certificates from the volunteer doctors, had these vetted by us health professionals at the HRA and then started his rounds (with the generous and necessary help of other HRA officials) of the

ministries and approval boards. His caring and friendly nature clearly came in handy as he navigated these corridors of power to humbly seek their approval so that these well-qualified volunteer doctors could work in the mountains. I have no idea where he obtained this relentless strength to do these rounds twice a year especially when officials in the ministries changed so frequently.

Prakash, as the CEO, obtained a very modest salary that the HRA could afford and yet everyday he dealt with Nepali trekking agents who easily earned many times what he was paid. Given his multi-talents he could easily have jumped ship for a better pasture but Prakash was so focused in his work that he did not let this financial disparity get in the way. He was always very courteous, honest and practical, never allowing any financial bitterness and frustration to overshadow his calling. The holiday seasons (Dashain and Tihar) is also when trekking season is at its peak in Nepal but he never took time off and was always on call. Amazingly though, despite this busy life, he took very loving care of his family. His son Binamra is so inspired by the

help his father provided in the mountains that he (Binamra) has worked very hard and was admitted to medical college just some months ago. Prakash was overjoyed.

He clearly cared deeply for tourism in Nepal. I would recommend the Nepal Tourism Board to bestow their highest honor for him. Without exaggeration, I can say that there is probably no one who, with zero financial incentive, has done so much to promote safe trekking and climbing in the Nepali Himalayas over the last 25 years.

In conclusion, Prakash, the light, is our "path pradarshak" - the person who highlights our way in this life and challenges us in our endeavor to help others. A model citizen. The back-bone of HRA. Truly an unsung hero. We (Nepalis, foreigners, porters, and pilgrims) will miss him.

(The article in Nepali Times below was adapted from the above write-up <https://www.nepalitimes.com/latest/the-light-is-gone/>)

Buddha Basnyat
President, MMSN

THE “MOUNTAIN MEDICINE”

Samriddha Raj Pant

Every year from May to July, locals hailing from the villages of Northern Nepal head to slopes far from their homes with hopes of gathering as much of this blue-chip herb as they can, putting their lives at risk. Schools close down and houses empty out as villagers from varied age groups set out in pursuit of this ‘mountain medicine’ that could fetch them thousands of rupees a day.

Cordyceps sinensis, more popularly known as *Yarsagumba* in Nepal - is a rare and unique organism formed when parasitic fungal spores infect a moth larva living in the soil. The fungal spores of the genus *Ophiocordyceps* infects the larva and grows out from the head becoming a 2-3 inches long brown colored herb. The etymology of the local name, thus translate to this very behavior. ‘*Yart Swa Gun Bu*’ in Tibetan means ‘herb in the summer and insect in the winter’.

Antique Himalayan apologues trace back to times when animals taken to graze in high pastures consumed this typically odd-looking worm-like herb and came back fresh with lots of vigor towards the opposite sex. When people from this region started consuming it, they had similar effects. In fact, it has been used in traditional

Chinese medicine for over 2000 years supposedly for its ability to cure lung and kidney ailments, cancer and asthma; and most importantly to treat impotence and improve libido. However, the noticeable performances of a group of female Chinese athletes at the World Athletics Championships in 1993 was attributed to their regular consumption of this herb and that was when the world took notice.

Decades have gone by since the demand and value of *Yarsagumba* went up in the international market but most of its benefits are yet to be statistically proven at a large scale. At least two of its pharmacologically active constituents; cordycepin (deoxyadenosine) and cordycepic acid (mannitol) have been identified. A study done at Stanford University, California, and published in 1998 found an increase in androgen and its precursors in the urine samples of people regularly consuming *Yarsagumba*; while another study showed 64% of users experiencing a subjective boost in their libido.

Studies relating Cordyceps and its effects on hypoxic adaptation have been done,



Source: Dreamstime Stock Image

albeit not in species or conditions that might best reap its benefits. In an in-vitro study performed by Singh *et al*, researchers treated human lung epithelial cells with Cordyceps extract and exposed them to hypoxia. This herb was shown to improve tolerance to hypoxia by increasing expression of anti-inflammatory cytokines and decreasing expression of pro-inflammatory cytokines. In another experimental animal trial in China, mice that were fed Cordyceps extract and then subjected to hypoxia were able to utilize oxygen more efficiently. They tolerated acidosis better and lived longer than mice in the control group. While *Yarsagumba* gets a big chunk of attention from its huge price tag and its lucrative yet not well proven pharmacologic effect, a fair share comes from stories of how first-hand graspers attain it. An article published in the Wilderness and Environmental Medicine Journal in 2017 by Koirala *et al*

focuses on this aspect. It states that almost half the harvesters – most of whom come from altitudes lower than 3000 meters, experience symptoms of Acute Mountain Sickness. While their symptoms could have subsided if they descended, descent would also mean a low earning season. As they would already have paid a hefty sum (upto 16000 Rupees) to district authorities for permit to collect *Yarsagumba*, descent would hardly be an option. Furthermore, overharvesting has resulted in decreased abundance, forcing harvesters to take desperate and unsafe paths leading to more tragedy.

Nepal is the second largest producer of *Yarsagumba* after China; and it earned about USD 50 million in 2016. Last year, this herb was included in the International Union for Conservation of Nature's Red List as a vulnerable category because of overharvesting. The Government of Nepal, in particular the Ministry of Forest and Environment are on the same page, as they said they look forward to sustainable

harvesting under strict guidelines. Charging a sizable amount as permit fee will only be justifiable when the financially deprived harvesters get proper food, shelter and sanitation.

However, news of people getting injured or even dying during high harvest season in their quest of collecting this rare medicinal fungus is not new. The unfortunate 2019 news of 8 people dying in the remote Himalayan district of Dolpa while collecting it – five due to altitude sickness and the rest to injury, had left us all heavyhearted. Many more grievous events remain unreported each year. While the year 2020 had fewer people move up the mountains to collect *Yarsagumba* - courtesy COVID-19 restrictions from local governments, the harvesters were left unimpressed. It would fetch them 5-10 rupees per piece and become their source of sustenance throughout the year. When the lockdown was finally eased, they did go out on search but most of the harvest was

rotten and useless as prime picking season had long passed.

The probable contribution from the medical fraternity towards its use remain twofold – firstly, protecting the health of harvesters; and secondly performing clinical trials to prove its medicinal benefits. As the quantities of this herb start to dwindle and prices skyrocket, research over its beneficial properties will become more difficult and will lose substance. So, the focus must be to work for the safety of *Yarsagumba* harvesters with assistance from governing bodies. Even after the finest planning and best control over the number of harvesters, concerned authorities should pay attention to their health and well-being by setting standard protocols on daily ascent limits and allocating mobile health facilities during harvest season.

Samriddha Raj Pant

LANGTANG VALLEY TREK

Aakash Sherpali

Langtang valley, located in Rasuwa district lies at an altitude of 3800m and shares its northern border with China. It is famous among tourists for red

pandas, beautiful dunes, and beautiful souls. The massive earthquake of 2015 had a devastating effect on this region; it took the lives of more

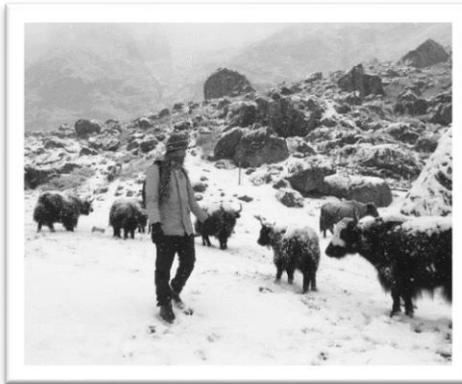
than 300 people and many houses, hotels, and lodges were swept by landslides following the earthquake. This led to many families being buried

under rocks and stones. After the disastrous earthquake, the locals have been striving to build hotels with good facilities and promote local tourism in the valley. Like every year, my friends and I set out on a journey to explore this famous valley. Our previous journey to *Sailung* had made us realize the importance of proper preparedness before heading to the mountains. Thus, we brainstormed for a suitable itinerary, prepared a handy first aid kit, and packed all necessary items required for our trip.

On the first day of our trip, we took a bus from *Maccha Pokhari* as early as the rooster. Newspapers were starting to fill with headlines related to the coronavirus and there were rumors about China sealing its borders with Nepal. We reached *Dhunche* (1960 m) during midday and our hearts were filled with joy on being far away from the 'city chaos'. We then reached *Pahiro* which is usually considered as a good location for spending the night, but being the ambitious young lads that we were, we decided to head towards *Bamboo* (2200m).

Our over-ambitiousness did not turn out to be too good for us as we were exhausted by the end of the day. The next day, we had our breakfast in *Bamboo's* majestic ambience with waterfalls burbling in the

background. From there, we first passed by *Rimche*, then *Lama Hotel*, and finally reached *Ghodatabela* (3030m) where we got to interact with local people whose lives were impacted by the devastating earthquake. This unforeseen pandemic has had a similar impact on this region's economy that had been fostered



post-earthquake by its tourist attractions. *Langtang valley* gets its name from a Tibetan word, *Langtang*, where *Lang* means Yak and *Tang* means to follow. It is believed that a Sherpa once followed a lost yak along the route which is now used by trekkers to get into this valley. On our way to this valley, we followed two police officers, instead of a lost yak, who helped us navigate our way and also to find a hotel. After dinner, we warmed ourselves by the fire. The next morning, we were greeted by the early morning view of *Langtang Lirung* (7145m) and *Langtang II* (6596m). After hiking for

about four hours, we reached *Kyanjim Gompa* which was deserted due to the COVID pandemic as China had sealed its borders. We collected some firewood and settled by the bank of a river but our momentary fireside jollification was swept away by a heavy snowfall that obscured our view. On our way back to *Langtang valley*, we stopped by a local shop to sip on cup of tea. The shopkeeper had few yaks that were grazing in the field ahead of us. Due to heavy snowfall and dry weather, there was a shortage of grass for those yaks during winter, so they were fed rock salt. Yaks are not slaughtered by natives who follow Buddhism but they do consume the meat if a yak dies accidentally.

On our way back, the trail was full of snow due to the previous night's snowfall. We reached *Dhunche*, and enjoyed the famous hot bath there. The next morning, we took a bus back to *Kathmandu*. This trekking was easier than the ones we had been to previously as we made a better itinerary and carried useful medications. Our participation in journal clubs and experience-sharing programs helped us have a better understanding of altitude-related illness and ways to mitigate it.

Aakash Sherpali

BACK TO THE BASICS: MOUNTAINS

Shailesh Niroula

Let me begin with this question that I have had a few times as I have trekked through the Himalayas - **What exactly is a mountain?**

Well, it turns out that there is no universally accepted definition of a mountain. If we are to follow the UN Environmental Programme then "*mountainous environment*" includes any of the following:

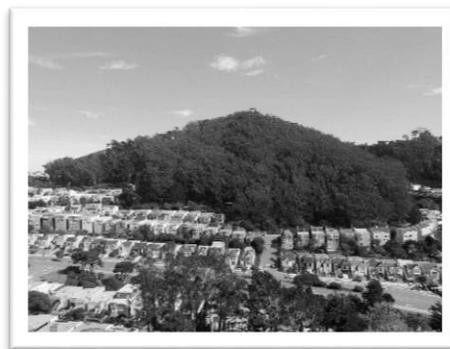
- Elevation of at least 2,500 m (8,200 ft);
- Elevation of at least 1,500 m (4,900 ft), with a slope greater than 2 degrees;
- Elevation of at least 1,000m (3,300 ft), with a slope greater than 5 degrees;
- Elevation of at least 300m (980ft), with a 300m (980 ft) elevation range within 7 km (4.3 miles).

With this definition, as a whole, 24% of the Earth's landmass is 'mountainous'. But I believe that this is too strict of a definition for a mountain. Personally, I like these three criteria set forth by *Roderick Peattie* in 1936 for defining mountains. Peattie argued that

- Mountains should be impressive
- They should enter the imagination of the people that live in their shadows
- Mountain should have an individual character and play a symbolic role in the local area

Undoubtedly, what really comprises a mountain is indeed a subject of relativity. In places where the geography lacks steep terrains, locals may refer to small rises in elevations, as a mount or mountain. An example of this is the highest point in San Francisco which is known as Mount Davidson with an elevation of 283 m.

Now, I am coming to the peak that comes into most of our



Mount Davidson
(Source: Wikimedia commons)

minds when we hear the word mountain – Mount Everest. After years of debate, China and Nepal finally agreed on a

precise elevation of Mount Everest in December 2020. The new agreed height of 8,848.86 meters (29,031.69 feet) was announced at a virtual ceremony i.e., 8848.86 meters above sea level. This begs a simple question –

What exactly is sea level?

As per high school physics, water always finds its level. So I had always thought sea level to be the same everywhere on earth. But low and behold, earth is far more complex than test tubes. If the earth was a perfect sphere, then the average distance from center of earth to surface of sea would be the actual sea level. But since earth is spinning, the center of the earth is pulled outwards due to centrifugal force which squashes the poles. The earth is 42 km farther across the equator



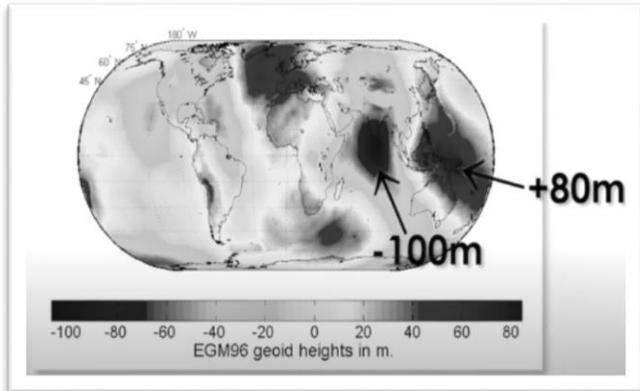
Source: Minute Physics

than from pole to pole.

We can then think of earth as a spinning ellipsoid and calculate the height that

oceans would settle to when pulled by gravity, can't we?

We cannot. This is because the interior of earth does not have the same density everywhere



Density of the earth at different areas.

which means gravity is slightly stronger in some places and slightly weaker at other places around the globe.

Hence the ocean tends to puddle more in regions where there is a higher density of earth - i.e. the continents. On top of that the presence of large mountains itself pulls the ocean closer to them and it raises the level of sea around them. To take into account these changes, scientists have put forward a model called Earth Gravitational Model which is incorporated into every GPS device. So in summary, sea level for the mountains is the level of sea that would be present if the mountains did not exist but effect of their gravity did.

I bring out this topic of Sea Level because the project to re-measure the height of Everest was formally started in 2017 by

Nepal Government and it took another four years to complete. **I had always asked why it was taking so much of time to calculate the height of Mt. Everest** in this day and age.

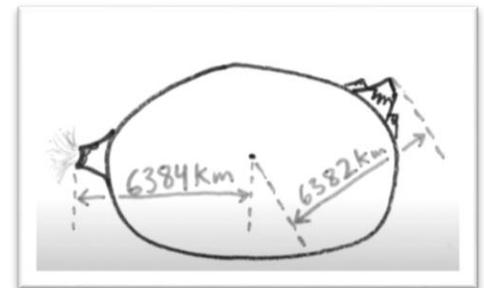
Whenever I go on a trek, I use the GPS in my smartphone to know my altitude. So I had guessed that measuring the height of Mt. Everest would simply involve climbing it again with a GPS device. Turns out, the Nepali survey was a mixture of both traditional and latest technologies and five sets of separate surveys including precise leveling, trigonometric levelling, gravity survey, GPS survey and summit observation was conducted. So, I guess this is one of the most precise measurements of Mount Everest till date.

Summit observation from top of Everest - even reading those words brings back numerous pictures taken by

climbers from top of the world. The top of the world - But wait.

Is the top of Mount Everest really the top of the world? If you look into it, Chimborazo volcano in Ecuador is the farthest point from the center of the Earth and the closest place to space on this 'pale blue dot'. This is because this volcano is located right along the planet's equatorial bulge. Chimborazo summit however is not higher than Mount Everest since elevation is measured from sea level.

As I write this piece, I am trying to summarize tiny details and facts I have learned over the years. It is always fun to read into new things and I have realized that answers to simple questions are always complex and interesting. I hope I have



Source: Minute Physics

taught a few new interesting points to my readers in this very eccentric article of mine.

Shailesh Niroula

PANDEMIC SHENANIGANS

Ashish Tiwari

Amidst an ongoing pandemic, a group of intern doctors and medical students went on a trip to the hills on their bicycles. They believed that it would be first of all the fun and learning opportunities that they would experience now that lockdown was lifted. Reflecting back, the trip was memorable as well as scary as we tried to feel transient normalcy while fearing contracting the virus. The small talks and wonderful views on the way brought joy to all the cyclists that had been staying home during those tumultuous times. But guess what, the pandemic is not going anywhere anytime soon so we are back to being cautious. Although the vaccination program is ongoing, we must be equipped to fight the pandemic at our own level. While we as doctors are doing our part in the hospital, all other people must wear masks and win this pandemic as heroes. It gets frustrating sometimes but believing that when this passes we will visit places we have always dreamt of, go for adventures that we have been waiting for, and meet beautiful people, is what will keep us going. Hope is a wonderful thing; it drives the best in you and makes you thrive in the worst of times.

Our friends and colleagues have contracted the virus. So might have our families. We must be aware that the virus does not see friends and foes and so we must be careful with everyone. “Preventing the virus, one hand wash at a time” should be our motto. We should always show empathy and be there for each other; that will definitely help us to defeat the virus. The pandemic has changed our daily routine and being captive inside our rooms has taught us to be happy at small things. Even just a good dream brings a smile on my face. Food has to be the next best thing during this pandemic and trying new dishes and experimenting is a hobby to cherish. Learning new skills such as playing guitar or piano and listening to beautiful tunes out there is always a great idea. The pandemic has also taught us the value of being with our family.

As I am writing in my hostel room, I believe life is filled with uncertainty, especially at times like this. While many things remain outside your control, your mindset is key to coping with difficult circumstances and facing the unknown. Some methods that were helpful for me are exercise, relaxation, good sleep and healthy diet.

Improving your daytime habits and taking time to relax and unwind before bed can help you to sleep better at night. Eating a healthy meal can help maintain your energy levels and prevent mood swings. A good video call with friends and loved ones will re-energize you from within. There are many ways to cope with the change in lifestyle during the pandemic that are beneficial for our wellbeing. It is okay to be hopeful the previous day and be afraid the next day as neither emotion invalidates the other. It's all about keeping the hopes high and telling the virus ‘not today’.

I believe that we, as members of MMSN, have a pivotal role in encouraging hope and love of the mountains in the younger generations. When the pandemic ends, we will be re-packing our bags and exploring our beautiful country

Ashish Tiwari

SEVEN SUMMITS WOMEN TEAM

Sanyukta Gurung

“The late Kenyan Nobel peace laureate Wangari Maathai put it simply and well when she said, ‘the higher you go, the fewer women there are.’”

-Chimamanda Ngozi Adichie.

During the period through 2006-2019 a mere 14.6% women scaled Mount Everest. These figures have risen from the past, only 9.1% were recorded to be women for 1990-2005. The rise in percentage of women climbers has been possible through contributions made by teams like the Seven Summits Women. The Nepalese team comprising of ten enthusiastic women from six different ethnic groups began their adventure in 2007. Up until 2007 only seven successful climbs by Nepali women conquering the highest peak, Mount Everest had been recorded. The whole team successfully scaled Mount

Everest in 2008, preaching the message “Unity in Diversity”.

After scaling the highest peak in the world their journey continued on to the highest peak in Australia, Mount Kosciuszko in July, 2010. Followed by Mount Elbrus in Russia, the highest peak in Europe in August, 2010. On Women’s Day 5th March 2013, their adventure carried on to Mount Kilimanjaro, Tanzania the highest peak in Africa.

In February 2014, the triumphant journey was shaken as only four members of the team successfully scaled Mount Aconcagua in Argentina, the highest peak in South America. Three members of the team had to take an early descent to avoid threats of frostbite. The hurdle did not stop the team as they scaled the highest peak in North America, Mount Denali in the United States of America in June 2014. After the climb the

team was granted an audience with Secretary of State, John Kerry in the White House.

In December 2014, the team scaled Mount Vinson Massif the highest peak in Antarctica which completed their mission to conquer the highest peaks in all the continents making them the first women team in the world to achieve this remarkable glory.

They have been honoured “Jana Sewa Shree” by the president of Nepal, one of the highest civilian awards. The team members founded Global Inclusive Adventure Organization and have been dedicated to causes of education, empowerment and environment. Their exceptionally motivational story encourages women to shine and reach new heights.

Sanyukta Gurung

UIAA VOLUNTEER SERIES – BUDDHA BASNYAT

President of MMSN, Prof. Buddha Basnyat, recently featured in the UIAA Volunteer series. The International Climbing and Mountaineering Federation (UIAA) promotes the growth and protection of mountaineering and climbing worldwide by preserving their spirit and traditions; advancing safe and ethical mountain practices, promoting responsible access, culture and environmental protection, supporting youth participation and the Olympic movement. For more details on this series, please visit: <https://www.theuiaa.org/uiaa/uiaa-volunteer-series-buddha-basnyat/>

FOR THE LOVE OF THE MOUNTAINS – AN INTERVIEW WITH MINGMA GYALJE SHERPA

*In the climbing world, Mingma Gyalje Sherpa can rightly be called the **One Man Show**. He is the first and the only solo climber from Nepal and holds the world record of having summited most 8000m peaks without oxygen. His most recent victory includes successfully setting a new world record by becoming the part of the team to first to reach the summit of K2, the second highest mountain, in winter. As we nervously sipped on our coffee, Mingma Sherpa arrived and what followed was a wholesome conversation; almost like how old friends catch up. Here are the excerpts.*

Can you tell us about your early life? What brought you into climbing?

I was born into a climbing Sherpa family in *Rolwaling, Solukhumbu* at an altitude of 4200m. As I was growing up, I listened to stories about climbs and mountains. It was as if in the back of my head I knew that I wanted to experience an expedition at least once in my life. So, right after I finished my SLC in 2006, I grabbed the first opportunity to do so. My first climb was Mt. Manaslu, an 8000m peak. One year after that, on the 19th of May, 2007, I made my first summit as a climbing Sherpa and that

too, Mt. Everest. After that, there was no going back.

Was there a point in time when you decided that climbing was what you wanted to do for the rest of your life?

I believe it was after my first summit. You see, there are a lot of factors that influence what you end up doing for the rest of your life. I began climbing not only out of interest, but also out of necessity. I belonged to a family of six siblings and I had to think about my sisters as well. Although primarily, my humble family background initiated my involvement in climbing, I was one of the lucky few who got to make a living out of what I absolutely enjoyed doing – and what I was good at.

How was your first climb different from your latest record setting climb?

Oh, they were miles apart. (*He smiles*). In my first climb, I was impulsive about a lot of things. I did not know how to save myself if anything went wrong. I



would probably not have made it. From then onwards, I took different trainings, received certifications from internationally recognized organizations such as the International Federation of Mountain Guides Associations (IFMGA/UIAGM) and of course, gained more experience. I have summited 45 peaks from 2006 until now. Each mountain is different, and with each climb you learn something new. As far as our climb to K2 this winter is concerned, it was an extraordinary example of great teamwork. When two different teams from Nepal came together to climb, not for themselves but for the country, it had to be successful. We knew that we had made the whole world smile!



Can you please describe any difficult experience that you've had while climbing?

My solo attempt to summit Mt. Chobutse, also known as *Khang Tagri*, was one of the toughest experiences. This mountain, you see, was the one I had grown up watching from my windows. The base camp was just two hours away from my valley! So I made a decision. Firstly, I chose to go alone. Secondly, because no one had ever attempted a solo climb, I did not have anybody to guide me or help me out. Finally, I knew that one mistake could cost me my life. It was on this climb that I was stranded on the top for nearly 48 hours, without food or water. I thought it was the end. I was caved in one of the crevasses. Lucky that I was, I was rescued by a helicopter and I was just glad that I survived.

Have you ever had to deal with high altitude illnesses? How do you tackle illnesses

while on an expedition?

I personally have not suffered from illnesses related to high altitude, largely because I was born at such a height and because of my lineage. However, I have had members from my team who have had to immediately descend due to HAPE and HACE. There have also been friends who have fallen from great heights and injured their legs, if not lost their lives too. If you talk about physically tackling these illnesses, then all climbers receive first aid training and we carry basic medications such as *Diamox* (Acetazolamide) with us. Other than that, we sometimes have a helicopter rescue system for immediate descent as well. However, the emotional issue is there too. Whenever I lose a friend, I rethink my entire life. That is short lived though. When I am on the mountains, there is no fear or regret. I belong there.

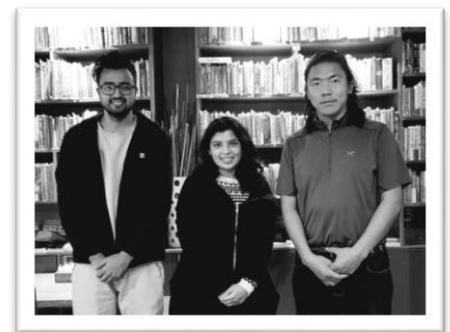
How has the pandemic affected the climbing environment?

Although climbing seasons were cancelled last year and the impact of the pandemic was felt in all sectors of the country and abroad, one positive aspect is that people are now returning to their villages. At least that is the scenario in high altitude where villagers returned. They are

being innovative and thinking of ways to survive in the home towns. That does bring a sense of hope in me. However, that of course does not take away from the chaos, and health issues that this pandemic has brought in our lives.

Finally, we want to ask you a basic question – how tough is summiting Mt. Everest? Do you think I can do it too?

(Laughs) Oh, it is not that difficult. Everyone can do it. My sister is a record holding climber too. If you prepare well, and are determined, then nothing is impossible.



With a sense of empowerment that we might be successful at climbing Mt. Everest if we wished to and after clicking a decent picture, we bid farewell to Mr. Mingma Gyalje Sherpa.

EXPEDITION DOCTOR IN COVID TIMES: THE CHALLENGES

Prakash Kharel

It was the sunny day of September 16th, 2020 when the Royal Guard of Bahrain arrived in Nepal in order to attempt summit world's eighth highest peak Manaslu (8156 m) and Lobuche east peak (6119 m) for acclimatization. This expedition was the first of its kind as it was happening after the five-month long lockdown period in this Himalayan country.

The Nepalese government had established standard protocols that had to be followed throughout the entire duration of the expedition. All team members were quarantined following arrival at a hotel in Kathmandu. After compulsory stay of 5 days, RT-PCR test was repeated (the first one had been done in their home country before travel) after which they were allowed to proceed to the high Himalayas. This was particularly important as Nepal's mountainous regions had only very few cases of COVID-19.

Not just the climbing team, but also every Sherpa, cooking staff and expedition crew member had to test negative before they were allowed to commence this voyage. Although everyone in the crew was tested before



departure, there would always be a chance of cross-infection. Expeditions require regular transport of goods from Kathmandu and sometimes, emergency manpower are also required who are usually not tested. As an expedition doctor, it was a challenge for me to suspect and isolate cases of fever and cough. Since cough is quite common in high altitude, I always made sure to recheck whether the person had accompanying fever. I planned to isolate such cases in a separate tent.

It is always hard to isolate the entire team, especially when the team has an eminent person in it. So was the case in this expedition. The team was welcomed with ceremonies in

every village that was on the way. This meant interaction with a lot of untested people. Thus, we laid our focus on separating and isolating only the symptomatic members rather than the whole team from people of the community.

The crew had people living on sea level of Bahrain and none of the members had prior experience with being in such altitude as that of Khumbu region of Nepal. Thus acclimatization trek to Lobuche East base camp and summit of Lobuche was quite arduous initially for the team. I had to manage a few cases of mild acute mountain sickness in Namche Bazar (3440 m) and the numbers slowly increased as we gained altitude.

The team stayed in complete isolation after returning to Kathmandu and then went to Manaslu base camp via helicopter. Few members, who had symptoms of bacterial infections were isolated and

taken down to Kathmandu. Rest of the members had a successful summit direct from Camp 3 (6800m) due to the narrow summit window. Finally, each group member was tested for RT-PCR before they left for

Bahrain. The team again isolated themselves on reaching Bahrain.

Prakash Kharel

A MILLENNIAL'S QUEST FOR *SHANGRI-LA*

Saramshika Dhakal

The word *Shangri-La* reminds us of the heavenly and otherworldly paradise that was first introduced to our pop-culture by James Hilton in his epic tale *Lost Horizon*. A hijacked plane crash lands somewhere near mount Karakul and four surviving passengers reach *Shangri La*- a utopian lamasery, high in the Himalayas in Tibet. But the original concept of *Shangri-La* comes from a Tibetan Buddhist concept of *Shambhala* (a place of peace and happiness). The search for *Shambhala* traditionally begins as an outer journey that becomes a journey of inner exploration and discovery.

Exploring new territories is one of many astonishing habits that are hardwired to our hunter-gatherer mind; our ancestors left Africa some 80,000 years ago on a voyage to discover new possibilities and have given birth to modern-day sapiens who are on a mission to inhabit other planets. Presently, as most

parts of our planet have been mushroomed by human settlements, exploring new places and summiting new mountains have become a matter of recreation and glory. In the context of Nepal, most of our trekking routes became popular during the sixties; picturesque buses and vans playing songs by Hendrix and The Beatles drove along the Silk Road and many hippies ultimately marched up the steep trails of our Himalayas. In the aftermath of the hippie era, many Nepali vicenerians pledged to leave their footprints on every ascendable mountain in an attempt to find peace beyond the confines of the mundane.

We millennials, often known as a generation of doomers, have romanticized and spent our entire teen years striving to become the do-it-all and know-all global citizens. We are confused about whether to play by the rules or to follow gut instincts. As our mid-life crisis

is hitting its peak, something inside of us is yearning for freedom, something inside of us wants to break free and find refuge in a place where everything feels peaceful. This might be one of many reasons why trekking is growing popular among Nepali youth; a quest to connect dots and oneself to a deeper meaning. Mountains remind us of the fact that we humans are a part of a bigger picture and our human experiences are minuscule when compared to the grand scheme of this universe.

Dead bodies lying frozen in Mt. Everest and the news of many naïve ascenders losing their lives to altitude illnesses remind us that pursuit for glory and triumph can turn fatal if necessary and important measures aren't taken. With the mountains and trekking routes being accessible and open to virtually everybody, the prevalence of altitude-related illness is on a high rise. Lack of adequate knowledge on the

ways to mitigate these illnesses act as a cornerstone of the escalating death toll among our Nepali trekkers. One major difference between Nepali and foreign explorers, especially those from the west, lies in the fact that most westerners have itineraries and ascent schedules that are backed up by scientific research and reasoning. In a country like ours where a thick black line exists between the knowledge and attitude of medical professionals and the general public, instilling a habit of applying research-based findings to everyday habits might take time and effort.



Does a paradise-like Shangri-La exist in this modern world of vehicle honks and mobile beeps? I cannot tell you! But something that I can assure is that a trek or a day-long hike in

the outskirts of Kathmandu valley, albeit short and brief, will help one realize that human experiences are way richer and deeper than what's painted on present-day news portals and social media. It might not give you a feeling of longevity promised in the kingdom of Shangri La, but it will fill your heart with joy. Though the concept of *Shangri La* is fictional, our quest for such a place should be a lifelong journey.

Saramshika Dhakal

MMSN JOURNAL CLUB PRESENTATION EXPERIENCE

Saroj Kumar Jha

As a research enthusiast, I was always fascinated organized by Journal Club Presentation of Mountain Medicine Society of Nepal (MMSN). I used to attend journal club presentations very often. The sessions were quite useful as it was more than just knowing about the research articles that were presented. The post presentation sessions filled with discussions on research methodology and critical appraisal of scientific paper in general were more useful. I had always wondered how difficult it would be to present a paper in a journal club until I did so on 21st July, 2020.

This was my first attempt. I took the topic as assigned by the academic coordinator of MMSN along with the format of presentation slides. First, I took the event as an opportunity but as the day for presentation approached nearer, I used to question myself about my decision to present. It seemed so difficult initially.

I had read many research papers in the past as a medical student. However, I had never studied any research article in much detail before. Since I was supposed to critically analyze the same, I found it difficult. But hey, where there is a will,

there's a way. I contacted the previous presenters, my friends and some of my seniors. I asked one of my friends to help me with literature search. One of them helped me to design the presentation. Though I was a presenter, my presentation was a team work.

On the presentation day, I had been posted in Casualty Department from 9 am to 9pm. But, I managed to get a break of one and half hour for my presentation. I had prepared a lot for it. But your preparation is never complete until you get your work done. I was skeptical about my performance as this

was my first time. I again consulted one of my friends, he assured me that everything is going to be fine and that our moderator for the journal club, who is also our Professor would make it easy for me. The presentation started and I did it well enough. In discussion session I answered few questions, referred some of them to the Professor. Overall, the session was great.

I learnt so many things from this event, most importantly how to critically appraise the research article, understanding its

reliability for adding up evidence in medical literature. I learned how to critically dig out the strengths and weaknesses of any research paper. I got a motivation to present in journal club some sessions later and to conduct a research of my own.

This event honed my presentation and discussion skills. It made my understanding better on the importance of team work. As the session was conducted online due to COVID, it was an opportunity for me to experience virtual audience. I

also got to catch up with some of my seniors and friends online.

It would have been better if I had gotten some professional help on critically analyzing the scientific paper. I also felt that my literature search was not adequate. I was not very fluent in the presentation and also my presentation slides could have been better. These are the areas I have to work on. These lessons made my journal club experiences a productive one.

Saroj Kumar Jha

DIMM SHENANIGANS

Sangeeta Poudel

Finally, it was my turn to carry the prestigious sword and shield. This was the same sword and shield that I had made with Anna and Jacob's help to match my wonder woman outfit that I wore on our costume day. My turn came one day early as Pemba dai got a hole in his expensive jacket by a fire speck despite everyone's warning to stay away from the fire. We decided to nominate him for the next day. As far as I remember, I was the fifteenth and Pemba dai was the sixteenth nominee. I don't exactly remember how this started though. What I remember is Neil carrying the sword and shield from Tilicho hotel to Ngawal village in his backpack. Tom carried it later.



Then, while heading to Kangla glacier each entitled nominee started carrying it until the very last day! Remembering reminds me, we all seemed to have a very short-lived memory in high altitude. Some forgot their trekking poles on the way and

searched for it later, someone's water bottle fell from the bag and got lost somewhere, some stepped on their ropes while making knots and pulleys while some forgot their helmets and carabiners in their tents. Why this is relevant is because

whoever has some small disaster of sorts would be the sword-bearer the following day. Now you must be wondering what happened with me.

Every day we had to walk around two hours to reach our destined training site (Kangla glacier) which was at an altitude of 5300 -5400 meters. Once we reached the site, we were trained to walk on ice with crampons, drill ice and make ice anchors and use an ice axe. We would learn to make different types of rope knots, to use belay devices, carabiners, ascenders, and to make the z- pulley system. Furthermore, we were trained to rescue patients from the crevasses by using various hauling techniques. We were also trained to use the RECCO rescue technology to find lost victims. During the course of the training, we would also have to become leaders of the group and that was yet another challenge to be described yet another time.

Coming back to my story, it was just another day at DiMM and we were heading towards the glacier from high camp. The route was heavenly to say the least. We were embraced by the magnificent, white, alluring big mountains. The blue sky looked like a ravishing piece of newly prepared art. The bright sun gave us enough warmth in that cold, chilly weather. I was lost

in these thoughts until I got a call. No, not a phone call. Nature's call. Oh, I really needed to relieve myself and it was an extreme urge that I could not hold any longer. So, I went ahead and looked for the most rational place I could think of while being surrounded by snow on all sides. I found a big snow-covered rock, a seemingly safe place to not be seen during my short voyage. When I came back, everyone was already ready to go. I hurriedly joined them.

Few seconds after attending to this call (haha), I remembered. Where is my phone? I checked my fleece pocket, gore-tex, bag, and everywhere around me. Last time I had used my phone was when I tried calling my parents. It had been a week since I had talked to them. The network was poor at high camp and most of the time unreachable. After the call, I had kept it inside my fleece pocket. I had no memory of my phone whatsoever after that. Did I drop it on my way? I was panic-struck. Everyone had moved ahead on our route, except Christian who was the leader that day. Neil and Anna were waiting for us too. They asked, "Why are you taking so long, Sangeeta? Is everything

alright?" I told them that I might have lost my phone. Christian gave me a few minutes to have a quick look. Then I wondered if I dropped it while I was peeing? Anna hurriedly ran down the snow-capped rock. She screamed, "I got your phone". Yet again, I was relieved but more than that, I was embarrassed. How forgetful of me. I got my phone back but I knew that this was enough for everybody to tease me and announce me as the sword bearer the following day.

Next morning, by the 'power invested in her by knights of the god', Justine handed me the sword and shield. I did the same to Pemba dai the following day. Everyone's story made us laugh, taught us lessons and we made new memories.

Sangeeta Poudel

COVID IN THE HIMALAYAS

Kamal Thapa

A frontliner's perspective

“Doctor, will there be any effect on your patient if I fly higher to about 16000 feet to cross a pass?”

Of the many questions that came from the helicopter pilot, this was the question I liked most. He was well aware of the thin air at high altitude and thus, we planned accordingly. That day, we were flying on a mission to rescue a COVID patient from Yalbang, Humla, a Himalayan district in northwest Nepal near the Tibetan border. Teamwork, coordination and communication is key in any expedition, whether that be a trek or a helicopter rescue mission. We took a leap of faith and got going.

There is not even a single dedicated Medevac Helicopter in our country. Therefore, it makes sense that we do some makeshift arrangements in converting a regular Helicopter into a Medevac Helicopter. We apply methods of improvisation that we usually learn in Wilderness and Mountain Medicine training. We remove the co-pilot's seat and fold back half of the passenger's seat to fit a mattress, a stretcher, and Patient Isolation Unit (PIU) particularly in case of a COVID-19 patient. All the



necessary medical equipment including cardiac monitor, portable ventilator, BiPAP machine, syringe pumps, infusion pumps, oxygen cylinders, personal protective equipment and a rescue bag with emergency drugs and accessories are loaded in the limited space of the helicopter before we fly. We make sure we recheck and rearrange everything before every fresh mission.

Taking care of a critically ill patient on air is in itself a very challenging task. In addition, we face the obstacle of not having a dedicated Medevac Helicopter and adequate trained personnel, lack of coordination and dispatch center, expensive operational cost, unpredictable weather conditions and difficult terrain especially in a mountainous country like

Nepal. Helicopter Emergency Medical Service (HEMS) with a medical team on board is in operation in Nepal these days run by some Private hospitals. HEMS, as an important component of Prehospital care, goes well along with the theme 'Time is Life' in terms of improving morbidity and mortality. During the time of the COVID-19 pandemic, HEMS became more relevant as the nationwide lockdown meant unavailability of other modes of transportation and added risk and fear of the spread of the infection. Our team had been involved in Heli-rescue from many parts of the country even before the pandemic though. Interestingly, the mountains always called me. I was involved in most of the remote high altitude rescue missions.

Disasters, natural or manmade, are bound to happen in future as well. Sooner or later, COVID probably will go away, but there will definitely be various conditions needing a well-coordinated and affordable rescue mechanism in the country with a dedicated Medevac aircraft. Preparedness for disasters and mountain rescue should always be one of our top priorities.

On a personal level, I sensed the satisfaction of being able to offer help to the needy patients, got the opportunity to know people better - both their real and masked faces and to be more creative and thoughtful until COVID hit our country hard. As cases increased, we worked day and night, and I received more than 200 calls a day. We witnessed painful

events and memories. Mental, physical and emotional trauma impacted people's lives in a lot



of different ways.

Looking deeply, COVID-19 pandemic gave us an opportunity to reflect on ourselves and has taught a lesson that we, as humans, still have a long way ahead. This is indeed a time to realize how an invisible particle, a virus, can

threaten the whole world and its technological advancements.

Amidst the ups and downs of the pandemic, we were deeply saddened by the loss of Mr. Prakash Adhikari, our friend and a real hero who dedicated his life keeping Himalayan Rescue Association (HRA) alive. Always rest in peace dear Prakash. You taught us how unpredictable life can be! You will forever be remembered with love for your simplicity, hard work and dedication. We vow to continue our work in saving lives and not to forget saving life in the mountains!!

Kamal Thapa

BREATHING THROUGH THE TRAILS OF MARDI

Sujan Timilsina

The coronavirus pandemic had locked us all in our homes with nowhere to go and no goals for the day. Boredom had reached its peak. It was only after Dashain that the lockdown restrictions eased up a bit and getting out of our houses was possible. I had not been in contact with most of my friends during the lockdown period. One evening, I received a call from Aakash. We talked about our days at home and

realized how much we missed our days in college. He told me that he and his friend Laxman were planning a short-trek around Pokhara and asked if I would want to join them. Without a second thought, I agreed. We decided to go through the trails of Mardi Himal trek as it would take us approximately three to four days and lied within our budget. We did the necessary planning, packed warm clothes and

trekking goods, and were ready to go!

At 5 am in the morning, Aakash and Laxman reached Pokhara. We met at 6 am, had some breakfast and headed for a short trip to Peace Pagoda before beginning our trek. After clicking pictures of some beautiful sceneries from the Stupa and breathing in the fresh breeze of Phewa Lake, we descended back

to where we had started from. Then we had yet another meal and took a bus from Pokhara to *Dhampus*. We reached *Dhampus* at 2:30 pm and headed towards *Pothana*. We clicked some more pictures and tasted some berries along the way. Akash luckily managed to find a thousand rupee note on the way. With jokes and fun conversations, we did not notice how fast we had reached *Pothana*. It was around 4 pm so we decided to ascend up to *Deurali*, which was about half an hour away. We reached *Deurali* at dusk and stayed there for the night. During dinner, we sang beautiful songs and even went live on Instagram to share our memorable musical night with others as well.

The next morning, we woke up early, had a cup of coffee and few biscuits and paved our footsteps through the trails of the trek. This day, we planned to reach High Camp which was indeed a little ambitious as it normally took two days for an average person to do so. We were very desperate and determined to complete the day as per our plan as we were short of time and we would be missing our Tihar celebrations if we spent even a single additional day on our trek. Thus, we ascended up the trails exploring the beauty and making new memories. We crossed *Forest Camp* at 12 pm in the afternoon. We rested there for

a few minutes, took our snacks and continued our journey. We had lots of fun chit-chats along the way which brings a smile to my face even to this day.

It was 2:30 in the afternoon when we reached *Low Camp*, where we enjoyed the warm sunshine and quenched our thirst and hunger. After staying there for 15 minutes, we headed to *Badal Dada*. On the way we met three other travelers who were also heading the same way. On reaching *Badal dada*, we started having slight headaches and mild nausea. We supposed that we could develop altitude sickness. So, we rested there for half an hour and drank hot soup. As soon as we started feeling better, we departed from there and moved towards *High Camp*. We had almost reached *High Camp* when I started feeling unwell and it was difficult for me to take even a few steps. When we finally reached High Camp, there was ongoing *dohori* on the Chautari. The locals and Aakash had a small fun *dohori* battle. We even finalized our cost of night stay in the course of the *dohori* battle. Amidst all the fun, I forgot that I had felt a little unwell previously. As soon as we reached our hotel, we changed our clothes and kept our bed warm. We devoured a bowl of hot garlic soup and it took away all our tiredness and headache in a few minutes

The next day, we woke up at 4am in the morning. It was freezing cold and pitch-dark outside. So, with our jackets and torch lights, we headed towards Mardi Himal Base Camp(4500m). We reached the Base Camp at about 9am. We clicked some pictures with our flag, recorded some beautiful memories and rested for a while there. We also wanted to go to Upper Base Camp(4700m+), from where actual mountaineering begins. But we didn't have the adequate gears for reaching there. So, with heavy hearts we descended back to *High Camp*. We reached our hotel at 11. Then, we packed our bag, ate our delicious meal and bid goodbye to the locals. We descended so fast that we reached Siding at 3pm from where we took a jeep to Pokhara. It was 6 pm in the evening when we reached Lakeside. We enjoyed the night on the lakeshore and then returned to the hotel at 10pm. We had dinner and went to bed expecting sweet dreams and a beautiful next day.

Sujan Timilsina

NEPDIMM 2019 EXPERIENCES AND REVIEWS



Christian Dean (USA)

The NepDiMM 2019 course blew my mind. The faculty was amazing; from the clarity of Andy Luks' altitude physiology lectures to the hilarity of Ben Clark's commentary to the vast climbing experience of our climbing guides to lucking out with weather and doing it all pre-COVID. Highlights for me were the night search and rescue mission and the mass casualty scenario above Manang. But hands down, the best part of the course was making amazing physician friends from all over the world.



Lene Pernes (Norway)

DiMM 2019 will forever stand out as a memory of a lifetime. My network of doctors and friends with similar interests has expanded to include the whole world. Loads of good lectures combined with practical workshops and in-field-case training has contributed to increased knowledge and skills when continuing the path to become a real expedition medic. As a fun additional, the climb and rescue training kicked off a new interest in climbing and made me more confident. The opportunity to get to know Nepal, the Nepalese culture and the Nepali people made the overall experience with DiMM memorable and unforgettable!



Samriddha Raj Pant (Nepal)

Those thirty days passed by real quick. It was a surreal experience, especially the camping part. I do not think I have ever learnt so much in such little time hands on. Getting to know and connect with so many like minded brains from around the world was special. Apart from classes, scenarios and assignments, we got to spend a lot of quality time with the entire group and made memories that we shall cherish for life. Will never forget the Yoga classes, knighting ceremonies, Manang hotel nights and the high camp dining tent talks! We got the best DiMM team ever!



Sangeeta Poudel (Nepal)

Participating in Nepal DiMM 2019 was a great opportunity. Learning about wilderness in wilderness, and getting hands-on implementation of knowledge was an amazing experience. Personally, this course has helped grow as a person. We practiced leadership skills, teamwork, decision-making and evacuation skills in remote resource-limited settings at high altitudes (5320meters). I started the course as a beginner and completed it with good knowledge of mountain illness, rescue, and its management. The most amazing instructors from different parts of the world added ease to the course. It was a privilege to make friends from around the globe. Thanking everyone, grateful!

MMSN NEWS AND ACTIVITIES

Outdoor Activities:

Ashish Tiwari, Outdoor Activities Coordinator

This year Mountain Medicine Society of Nepal (MMSN) conducted several outdoor activities with the help of the Farrar Foundation. Proper safety measures were ensured and female participation was highly encouraged. Climbing for fun: This indoor wall climbing and training program was facilitated by a mountain trainer and a Diploma in Mountain Medicine (DiMM) graduate. Participants learned about the basic rope techniques and climbing skills, many of whom were first-timers. Cycling For Fun: 16 enthusiastic participants cycled their way through beautiful views and experienced breathtaking scenarios during the lockdown. Hiking and Case Scenarios: A short one-day hike was organized in which medical students marched their way through Champadevi trail. While enjoying the view of nearby snow-clad mountains of Jugal range and green hills of Kathmandu, we conducted case scenarios for the management of patients with hypothermia and snake bite, and we discussed techniques of patient transfer and management. We are grateful for the generous support from the Farrar Foundation which has helped us organize effective and fun-filled outdoor activities that have encouraged young doctors to explore and love mountains.

Academic Activities:

Om Prakash Bhatta, Academic Activities Coordinator

For the year 2020, MMSN conducted a host of academic activities, most of which were conducted virtually due to the ongoing pandemic. One of the silver linings of this unforeseen pandemic is the shift of most of the discussions to online platforms which can be accessible to people across the globe.

Throughout the year, we conducted a total of six journal club webinars and one experience-sharing webinar as of March 2021. Most of the webinars were presented by intern doctors and were a great learning experience for the presenters as well as the participants. Each journal club presentation was followed by a discussion session which provided the participants with an opportunity to indulge in an in-depth discussion to clear their doubts and present their opinions regarding the research. The words from Prof. Dr. Buddha Basnyat sir as well as other moderators provided new insights about the topic and encouraged students to take part in discussing and critiquing papers related to science and high altitude medicine. One of the most important and recurring themes of discussion in most of our journal clubs was the need for high altitude research in Nepal and the need for enthusiastic Nepali researchers leading this path. Nepal holds so much potential to contribute to the scientific community but much of this potential remains untapped.



A screenshot of a Zoom meeting. The main window shows a slide titled "Relevant Literature" with a list of research papers. The list includes titles like "Outdoor air pollution in high-altitude settings: An assessment of influencing factors across four Sherpa villages in the Khumbu region, Nepal" and "Outdoor Respirable Particulate Matter Concentrations from an Open, Improved Cookstove, and LPG/Open Fire Combination in a Rural Tibetan Community". The Zoom interface shows a video feed of a participant on the right and a name bar at the bottom with "Dr. Prasanta P...".

MOUNTAINS AND MEMORIES



**Mt. Machhapuchhre
smiling against the sun
- Rajesh Sharma Paudel**



**Ain't no sunshine when
she's gone
- Ashish Poudel**



**All hail Lord Shiva!
- Samriddha Raj Pant**



**Tranquility
- Prakash Kharel**



**Who run the world?
Girls!**



**The blue green hidden gem
of Mustang : Dhumba lake
- Pragya Aryal**



DiMM 2019 - An Adventure

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