When I started my residency, I had no idea that I would spend nearly 6 months of my precious time venturing through Lyari Town, but the moment I walked into the emergency department on my very first day of residency, my life changed. A young boy grabbed my arm, imploring me to save his grandmother’s life. I followed him to the corridor, where I found an elderly woman who appeared cachectic and lethargic. She was lying on a stretcher with deeply sunken eyes, a pale face, and chapped lips—all telltale signs of severe dehydration that I had learned in medical school. I promptly inserted a wide-bore intravenous cannula into her left arm, pushed saline boluses, and transferred her to the high-dependency unit, where I continued to oversee her care.

As I started my initial rotation in the high-dependency unit, I saw that the young boy stayed by his grandmother’s side. As days turned into a week, the elderly woman’s eyes regained their sparkle, her skin became less pale, and her lips transformed into a grateful smile. I bid farewell to her on my last day in the unit, leaving her with instructions on food hygiene. This was my first encounter with cholera during my residency, but she was not the only patient from Lyari Town to enter Lyari General Hospital with a preventable infectious disease.

During my very first week on the hospital floors, I encountered a total of 72 cases of preventable diarrheal illnesses, all related to enteric fever, infectious colitis, and giardiasis. This included my first death.

Even now, when I close my eyes, I picture the patient’s grieving husband standing in the hallway. Tears streaming down his face, he pulled out a crumpled bunch of antibiotic prescriptions from his pocket and looked at them in anguish—a desperate attempt to show me the multitude of medications his wife had taken during her battle. But none of the antibiotics worked against the extremely drug-resistant typhoid that killed her through sepsisemia.

After seeing this suffering, I needed to do something to prevent it. Along with four other internal medicine residents, we began to volunteer in Lyari Town. We went door to door, house to house. On that first day, we did not have a clear plan. I found myself sitting on a charpais (a handcrafted cot) in a small house with a leaking roof and missing windows talking about typhoid when a 14-year-old girl pulled up her long, embroidered tunic to reveal a scar on her abdomen and inquired “do you know how I got this scar?”

Curious, I replied, “No,” and listened intently.

“This scar is the result of the surgery I underwent due to typhoid.” She further asked, “Do you know how I acquired typhoid?” I again carefully listened as she replied, “Unpurified water!”
typhoid today, just as written on your pamphlets.” These words filled me with a profound sense of reassurance, reaffirming the impact of our ongoing efforts in the fight against infectious yet preventable diseases.

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