

ARTHRITIS CARE FOUNDATION



**ANNUAL
PROGRESS
REPORT
2017-2018**

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FOREWORD

السَّلَامُ عَلَيْكُمْ

Warm Greetings on behalf of the Arthritis Care Foundation!

The progress made in the field of Rheumatology today offers much better outcomes to Rheumatic disease patients. Although the treatments available for Rheumatic diseases are effective in limiting pain, disability & premature death, these are expensive and not easily accessible by a vast majority of patients. As a consequence, the burden of Rheumatic diseases is growing at a fast pace in our country. The main objective of ACF is to provide assistance to deserving arthritis patients, for treatment, diagnostics and rehabilitation.

Since its establishment in 2010, Arthritis Care Foundation has been contributing towards enhancing access of Rheumatic patients for high quality diagnostics as well as medical and surgical treatments. During this short span of time, a growing number of patients have benefitted through the services offered by ACF and are managing to lead an active and productive life. This growth has been made possible with the enduring support of our worthy donors who have supported the cause and helped ACF extend its services to a growing number of patients with progressive joint damage and disability.

ACF is continuing to invest in addressing the critical shortage of qualified rheumatologists in Pakistan. Every year scholarships are awarded and opportunities are made available to doctors for acquiring advanced and specialized training in the field of Rheumatology.

As the disease continues to be surrounded by myths and misconceptions, ACF actively engages in awareness building campaigns whereby information about rheumatic diseases is disseminated amongst the general public through diverse mediums.

Journey of a thousand miles begins with a single step. ACF took that step and is fortunate to have the support of esteemed organizations like yours in helping ACF serve its mission of providing treatment to arthritis patients that are hugely dependent on its assistance. Such organizations indeed serve as a beacon of light and symbol of hope for us. As we enter another year full of hopes and aspirations, we look forward to strengthening our partnership with your ongoing support as it is only by working together that our fight in the war against disability can be won.

With warm regards,

Prof. Dr. Nighat Mir Ahmad
Founder Trustee & Chairperson
Arthritis Care Foundation (ACF)

Prof. Dr. Sumaira Farman Raja
Founder Trustee & Co-Chairperson
Arthritis Care Foundation (ACF)

1 ORGANIZATIONAL OVERVIEW

1.1 BACKGROUND

The founders of ACF started community services in Pakistan in 1998, with the establishment of Rheumatology Clinics at Akhtar Mubarak Referral Centre, Lahore, in collaboration with AFJOG and Fatima Memorial Hospital. These services were expanded to collaborate with the Health project of Behbud Association, Lahore, in 2005. These facilities provided free consultations, subsidized/free diagnostics, medications, physiotherapy and/or rehabilitation to indigent or less privileged arthritis patients. Arthritis Care Foundation was formally registered in 2010 as a step towards expanding and maximizing these services to deserving patients of rheumatic diseases requiring financial assistance.

Mission

To establish, encourage, assist and support, Medical, Social Welfare and Educational activities, pertaining to deserving or under privileged patients, both adult and children with arthritis and other related rheumatic diseases, regardless of their gender, religion, caste, or colour, and without prejudice to the generality of the aforesaid.

Objectives

- ✎ To assist non-paying patients with diagnostic tests as well as with treatment including consultations, laboratory test, radiology, medicines and latest Biologic agents;
- ✎ To provide latest treatments, which are highly effective but expensive e. g. Biologic therapies;
- ✎ To establish an endowment fund for providing scholarships to trainees in Rheumatology, where by addressing the critical shortage of qualified rheumatologists in the country;
- ✎ To facilitate joint replacement for deserving arthritic patients, both children and adults;
- ✎ To establish a comprehensive physician, patient and public awareness program, through seminars and disease information booklets;
- ✎ To establish patient support groups
- ✎ To establish the first Institute of Rheumatic Diseases in Pakistan: for patient care, training and research; and collaborate with other organizations for this purpose.

1.2 MEMBERS EXECUTIVE COMMITTEE

Chairperson

Prof. Nighat Mir Ahmad, MD
MBBS, FACP, FACR
Diplomate, American Board of Rheumatology
Diplomate, American Board of Internal Medicine
Consultant Physician and Rheumatologist,
Head Division of Rheumatology,
FMH College of Medicine & Dentistry, Lahore

Co-chairperson

Prof. Sumaira Farman Raja
MBBS, FRCP, SCE Rheumatology (UK), FACP, FACR
Graduate Certificate Paediatric Rheumatology (Australia)
Consultant Physician and Rheumatologist,
Professor of Rheumatology, Division of Rheumatology,
FMH College of Medicine & Dentistry, Lahore

General Secretary

Dr. Muhammad Ahmed Saeed
MBBS, FCPS Rheumatology, FACR
FCPS Internal Medicine
Consultant Physician & Rheumatologist
Associate Professor, Division of Rheumatology,
FMH College of Medicine & Dentistry, Lahore

Finance Secretary

Ms. Samina Sultana
BA, LLB
Managing Partner Alliance Education Management
Corporate Head, Learning Alliance (Pvt.) Ltd., Lahore

Joint Secretary

Dr. Col. Tauseef Irfan
MRCGP
Consultant Family Physician

Joint Finance Secretary

Dr. Shabnum Sarfraz
MBBS, MBA
Chief Executive Officer
PMU for the Punjab Public Health Agency
Primary and Secondary Healthcare Department
Government of Punjab, Pakistan

1.3 BOARD OF TRUSTEES

Justice (Retd.) Amir Raza

BA (Honors), LLB (Pb), LLM (Harvard University)

Prof. Dr. Tasnim A. Raza,

MBBS, M.Phil Anatomy (Pb)

Director Health Project, Behbud, Lahore

Mr. Farid Ahsanuddin

Chief Executive

Engineering Corporation (Pvt) Ltd.

Ms. Anjum Ahmed

CEO Learning Alliance (Pvt) Ltd

Prof. Jamshed Nasir

FRCS Ed, FFST Ed, FCPS (Pak), MCPS (Pak)

Principal, FMH College of Medicine

Associate Dean School of Health Sciences

HOD Ophthalmology

Ms. Laila Nusrat,

Chairperson

Bali Memorial Trust

Ms. Uzma Ahmad

LLM(USA), LLB(PU)

Legal Consultant (Corporate Governance)

1.4 LIST OF VOLUNTEER SPECIALISTS AND DOCTORS

| | |
|--|---|
| <p>Prof. Nighat Mir Ahmad, MD MBBS, FACP, FACR Diplomate, American Board of Rheumatology Diplomate, American Board of Internal Medicine Consultant Physician and Rheumatologist, Head Division of Rheumatology, FMH College of Medicine & Dentistry, Lahore</p> | <p>Prof. Sumaira Farman Raja MBBS, FRCP, SCE Rheumatology (UK), FACP, FACR Graduate Certificate Paediatric Rheumatology Consultant Physician and Rheumatologist, Professor, Division of Rheumatology, FMH College of Medicine & Dentistry, Lahore</p> |
| <p>Dr. Muhammad Ahmed Saeed MBBS, FCPS Rheumatology, FACR FCPS Internal Medicine Consultant Physician & Rheumatologist Associate Professor, Division of Rheumatology, FMH College of Medicine & Dentistry, Lahore</p> | <p>Dr. Saira Elaine Anwer Khan MBBS, MRCP (UK) SCE Rheumatology (UK) Assistant Professor, Division of Rheumatology FMH College of Medicine & Dentistry, Lahore</p> |
| <p>Dr. Shabnam Batool MBBS, FCPS (Medicine) FCPS (Rheumatology) Senior Registrar, Division of Rheumatology FMH College of Medicine & Dentistry, Lahore</p> | <p>Dr. Muhammad Razaqat Hameed MBBS, FCPS (Medicine), SCE Rheumatology (UK) Visiting Physician and Rheumatologist, Fatima Memorial Hospital & National Hospital, Lahore</p> |
| <p>Dr. Col. Tauseef Irfan MBBS, MRCP Consultant Family Physician</p> | <p>Dr. Amna Ahmed MBBS, FCPS (Medicine) National Hospital Lahore</p> |
| <p>Dr. Muhammad Yaser Imran MBBS, FCPS (Medicine), FCPS (Rheumatology) Assistant Professor of Rheumatology East Medical Ward, King Edward Medical University, Lahore</p> | <p>Dr. Bilal Azeem Butt MBBS, FCPS (Medicine), FCPS (Rheumatology) Assistant Professor of Medicine, Fatima Jinnah Medical University, Sir Gangaram Hospital, Lahore</p> |
| <p>Dr. Ghazala Mukhtar MBBS, National Hospital, Lahore</p> | <p>Dr. Tasnim Rasheed MBBS, Behbud Association, Lahore</p> |
| <p>Dr. Samra Yasmeen MBBS, National Hospital, Lahore</p> | <p>Dr. Sajid Ali Khan MBBS, FCPS (Medicine)</p> |
| <p>Dr. Faiza Naeem MBBS, FCPS (Medicine)</p> | <p>Dr. Roshila Shamim MBBS, FCPS (Medicine)</p> |
| <p>Dr. Zeeshan Aslam MBBS, FCPS (Medicine)</p> | <p>Dr. Haseeb Khan MBBS, FCPS (Medicine)</p> |
| <p>Dr. Asad Ullah Khan MBBS, FCPS (Medicine)</p> | <p>Dr. Muhammad Faiq MBBS, FCPS (Medicine)</p> |
| <p>Dr. Naveed Aslam MBBS, FCPS (Medicine), FACP</p> | <p>Dr. Zia Uddin MBBS, FCPS (Medicine)</p> |
| <p>Dr. Farhan Bashir MBBS, FCPS (Medicine)</p> | |

2 PROGRESS REPORT 2017-18

2.1 PATIENT TURNOVER

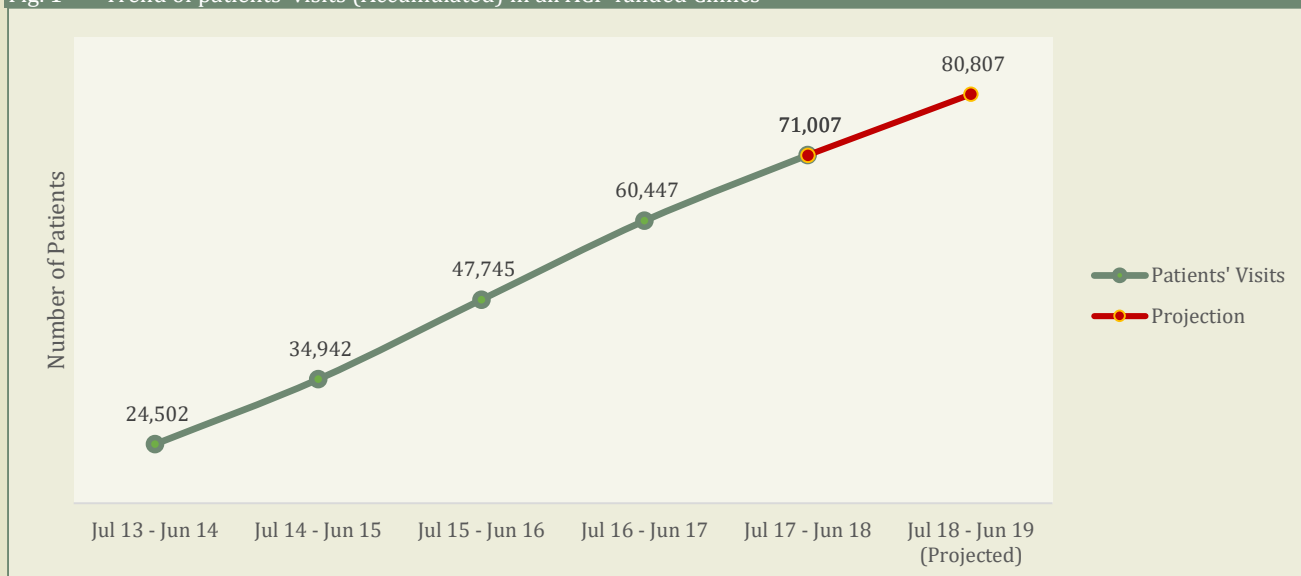
Founders of ACF who pioneered rheumatology services in the city of Lahore in 1998, together with their dedicated team of Consultants/Specialist Registrars are currently providing free consultations to patients at General Rheumatology Clinic at the Fatima Memorial Hospital, Behbud Association, AFJOG House/Akhtar Mubarak Referral Centre.

During the current financial year, we are hoping to reach out to around 12,000 patients. It is important to highlight here that other than these free/general patient categories, the same team is also providing consultations to the white-collar patients in the semi-private clinics of FMH Division of Rheumatology.

Alhamdulillah, these thousands of patients are saved from getting crippled and will therefore be useful members of society. It is important to remember here that when Rheumatic patients do not receive timely and effective treatment, they face the risk of disability and are even unable to carry out simple routine daily tasks.

'Every Day Counts' is the tagline for our arthritis awareness campaigns.

Fig. 1- Trend of patients' visits (Accumulated) in all ACF-funded Clinics



2.2 ACF SUPPORTED CLINICS

ACF is currently supporting the following projects:

- 🔗 Division of Rheumatology, Fatima Memorial Hospital (FMH)
- 🔗 ACF & Behbud Collaborative Rheumatology Clinic
- 🔗 ACF & Association of Fatima Jinnah Old Graduates (AFJOG) Rheumatology clinic
- 🔗 Dispensary at ACF Office

2.2.1 Division of Rheumatology, Fatima Memorial Hospital (FMH)

FMH Division of Rheumatology is headed by Prof. Nighat Mir Ahmad MD, who is an American Board-Certified Rheumatologist and amongst first few doctors who laid the foundation of this new emerging specialty in Pakistan. This Department was formally started in 2001, supported by the vision of the trustees of FMH who were aware of the critical shortage of rheumatologists in the country and fully supported the establishment of an academic unit of Rheumatology at FMH. Over the years, the department has grown tremendously in terms of the scope of Rheumatology services being offered, it's

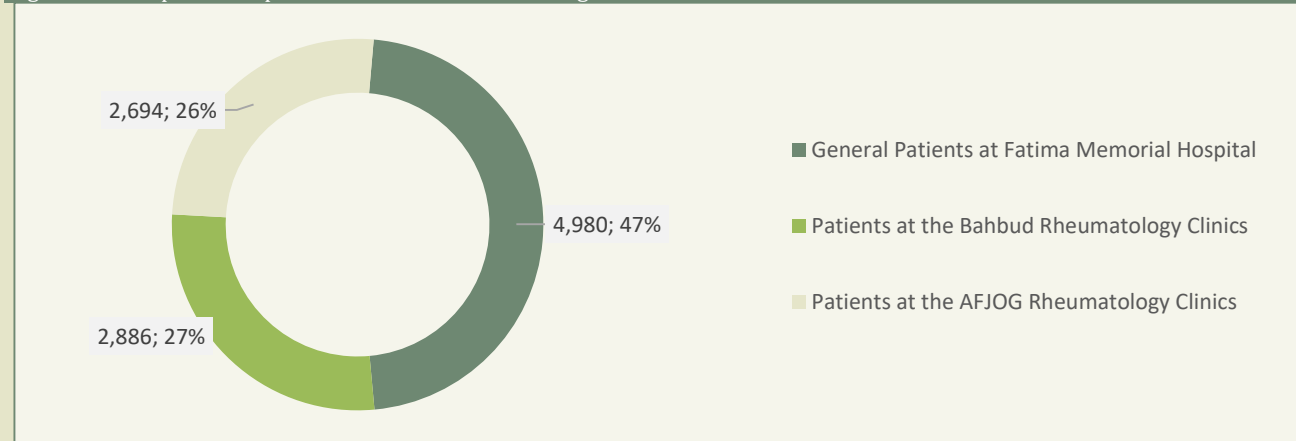
outreach and training opportunities. It is amongst the very few leading centres of treatment of Rheumatic diseases in Pakistan which are committed to Patient Care, Education and Research. The Co-Chairperson ACF, Prof. Sumaira Farman Raja and General Secretary ACF, Dr. Muhammad Ahmed Saeed, both are part of faculty and are fully committed to the cause. FMH provides free care to deserving patients, both outpatient & inpatient.

Faculty of Division of Rheumatology has overwhelming patient load due to extreme shortage of rheumatologists and unavailability of rheumatology services in government institutions. In order to cater to poor and white-collar arthritis patients, the faculty established a first ever trust by the name of Arthritis Care Foundation (ACF).

ACF provides free medications, biologics, diagnostics, joint replacements and expensive treatment to deserving inpatients as well as out-patients seen at the FMH Division of Rheumatology. ACF, FMH and Behbud Association have signed an MOU, according to which Fatima Memorial Hospital's faculty provides free consultation at the Behbud Rheumatology clinics.

In the financial year 2017-18, ACF spent Rs. 21,267,321 on providing medications, biologics, facilitating diagnostics and joint replacements for Fatima Memorial Hospital (FMH) patients; showing exponential growth of 75% compared to the last financial year.

Fig. 2- ACF sponsored patients served at collaborating clinics



2.2.2 ACF & Behbud Collaborative Rheumatology Clinic

Free Rheumatology clinics were started in collaboration with Behbud Association, in 2006. ACF funded trainees provide free consultation twice a week at this clinic. It is ensured that one of the consultant attends their monthly health project meeting. ACF provides funds for medications and bears the cost of diagnostics of rheumatology patients seen at the Behbud Clinic.

In the last financial year 2017-18, ACF provided free medicines at the Behbud rheumatology clinics worth Rs. 4,006,791 (2016-17: Rs. 2,768,281 reflecting 48% increase over previous year. Behbud provides clinic space, ancillary support staff, diagnostic facilities and physiotherapy to rheumatology patients at subsidized rates.

2.2.3 ACF & Association of Fatima Jinnah Old Graduates (AFJOG)

Free weekly Rheumatology clinics were started at Akhtar Mubarak Referral Center (AMRC), Lahore in 1996 and later were moved to AFJOG. AFJOG provides clinic space and support of ancillary staff diagnostic facilities and physiotherapy free of cost to rheumatology patients.

ACF is sharing with AFJOG AMRC the cost of medications provided to indigent arthritis patients and funding salary of senior medical officer worth Rs 25,000/- per month with support of one of ACF international donors. ACF team comprising of four Rheumatology consultants, senior registrar and PG trainees provide free consultation. During the last year there were 2694 rheumatology patients' visits at

AMRC rheumatology clinics. In the last financial year 2017-18, ACF contributed medications worth Rs. 96,197.

2.2.4 ACF Dispensary

ACF acquired premises on rent at Shadman, Lahore for its office and dispensary. Patients seen at various clinics supported by ACF are dispensed free medication at Shadman Dispensary under supervision of qualified Pharmacist.



2.3 ACF SUPPORTERS

- ✂ Fatima Memorial System
- ✂ Association of Fatima Jinnah Old Graduates (AFJOG)
- ✂ Behbud Association, Lahore
- ✂ INFAQ Foundation, Karachi
- ✂ Learning Alliance Pvt. Ltd
- ✂ Zaman Foundation
- ✂ Pakistan State Oil (PSO)
- ✂ Ashai Support Program
- ✂ Siddiq Shafi Trust, Lahore
- ✂ Askari Cement Ltd.
- ✂ Gloves N Gloves, Lahore
- ✂ Jamal Rug Weavers Pvt. Ltd
- ✂ WAK Group (Wak Gas)
- ✂ Rafi Group
- ✂ Convent of Jesus & Mary
- ✂ Interwood Mobel Pvt. Ltd.
- ✂ Tabba Foundation
- ✂ M. Khawaja Sports Pvt. Ltd
- ✂ National Bank of Pakistan
- ✂ Al-Hamd Corporation
- ✂ Murree Brewery
- ✂ Siddiqsons Limited
- ✂ Sitara Chicks Layer Farm
- ✂ Shafisons Engineering Pvt Ltd

- 🌀 Waheed Sons
- 🌀 White Pearl Rice Mills Ltd.
- 🌀 Pakistan Flour Mills Association
- 🌀 Horizon Logistics & Safety

2.4 ACF SERVICES

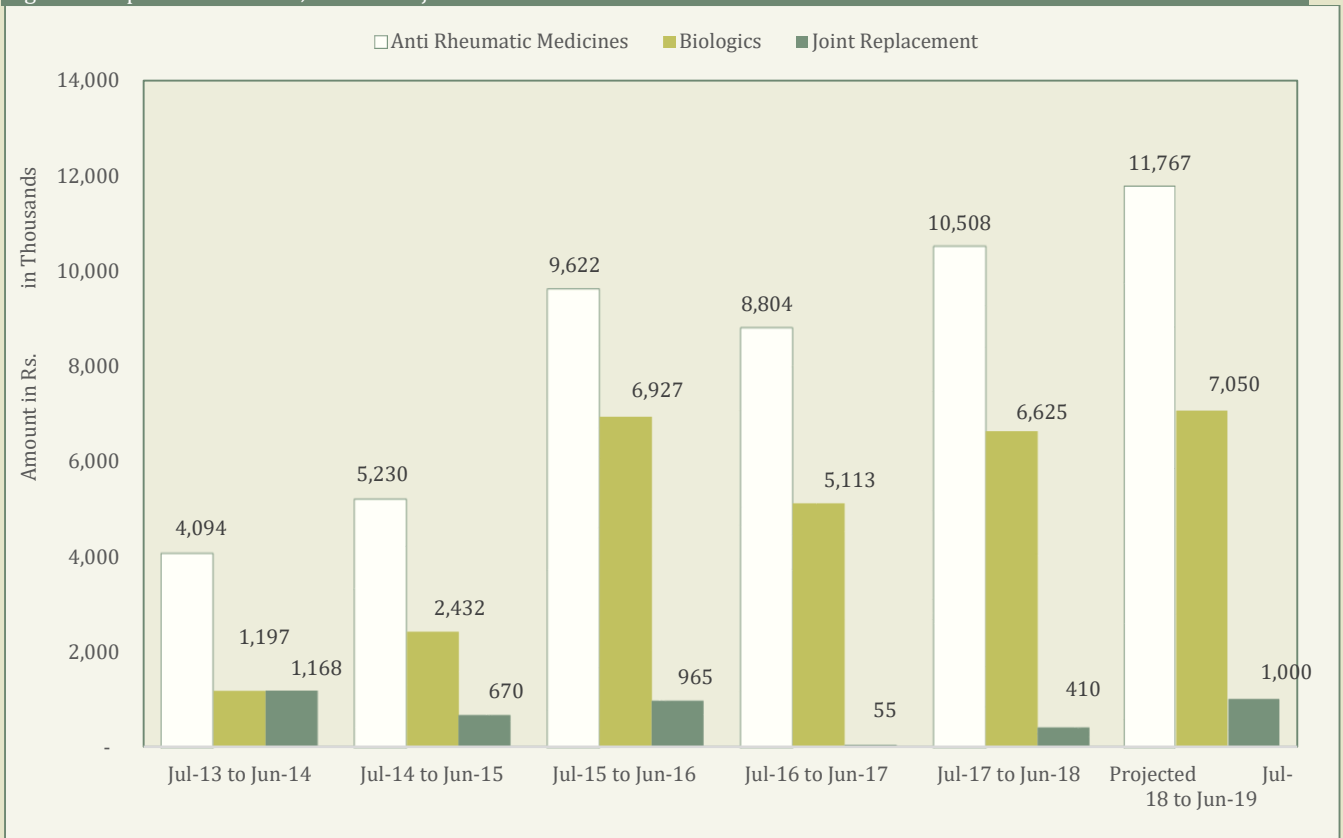
ACF services are listed as below:

1. Conventional Disease Modifying Medications, Diagnostics and Rehabilitation
2. Biologics (Rituximab, Etanercept, Tocilizumab)
3. Joint Replacements
4. Expensive Medications for Lupus (SLE) Patients (Mycophenolate Mofetil)
5. Scholarship(s) for Rheumatology Trainee (s)/Fellow(s)
6. Health Awareness Campaigns
7. Printing of Patient Educational Brochures/Newsletters

2.4.1 Conventional Disease Medications, Diagnostics and Rehabilitation

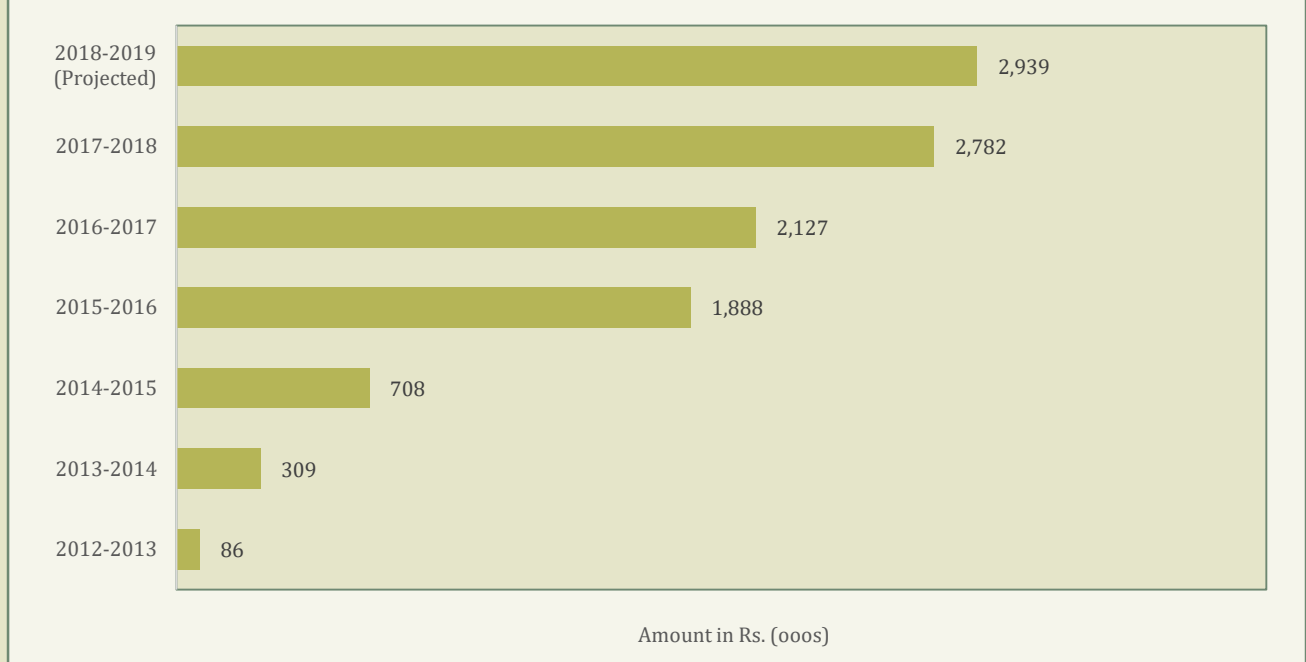
Arthritis patients are first started on conventional disease controlling medications. The average cost for the first line medications ranges from Rs. 15,000 to 80,000 per month.

Fig. 3- Expenditure trends; Health Projects



Lab tests and diagnostics have always been essential for screening of disease and proper treatment of patients. Therefore, ACF increased the funding for Diagnostics from Rs. 2,126,884/- (FY 2016-17) to Rs. 2,781,561/- (FY 2017-18); registering exponential increase of 30%, for facilitating for more number of patients.

Fig. 4- Expenditure trends; Diagnostics/ Laboratory Tests



2.4.2 Biologics

Severe Resistant Arthritis and Lupus Patients who do not respond to conventional therapy are given Biologics. These include Rituximab, Etanercept and Tocilizumab. Apart from these there is another class of expensive medication called IVIG which is very expensive and used for life threatening complications of diseases like Lupus and Myositis.



It must be noted that timely intervention with Biologics prevents disability & therefore prevents need for Joint Replacement. Therefore, in addition to a huge clinical benefit, there is significant health and economic impact as well. A total of Rs. 6,624,870 was expensed during July 2017 to June 2018 on provision of costly Biologics.

ACF team is not only providing facilitation to patients but also channelizing the deserving patients to Pakistan Bait-ul-Mal; liaising with patient support programs initiated by some pharmaceutical firms.

Two of the graduates of the FMH department are currently working in public hospitals; one at Mayo Hospital and other one at Sir Gangaram Hospital Lahore, have been mainly facilitating these deserving ACF referred patients.


Amount allocated on procuring biologics during the current financial year is Rupees 7 Million.

2.5 CHANGING LIVES

| Before Treatment | | After Treatment |
|---|---|---|
|  | <p>35 years old male, diagnosed with Spondyloarthritis (SPA) with peripheral arthritis. Despite of maximum dosage of conventional medicines, his arthritis was remain active and he was gradually became wheel chair bound within the period of two years. ACF sponsored his treatment with Biologic and now he is able to walk by his own without any support.</p> |  |

2.5.1 Medications for Lupus (SLE) Patients

Systemic Lupus Erythematosus (SLE) is a multisystem rheumatic disease generally affecting young females. It can involve organ like kidneys, lungs, blood vessels and brain. SLE patients are seen at the ACF Clinics on a daily basis. These patients may require expensive oral immunosuppressant like Mycophenolate Mofetil (MMF), which is the most costly amongst anti-rheumatic oral medications. Such medications, when instituted early in the course of the disease, can prevent kidney failure and hence prevent the patients from going into lifelong haemodialysis.



Here we would like to share with you a story of Mr. MQ, 45





years old male, non-smoker, diabetic, hypertensive working in a private firm. He presented to us with gangrene which had to be amputated. This was due to vasculitis and could have been prevented with timely diagnosis and appropriate treatment.

Currently around 140 patients are registered with ACF who are receiving monthly MMF. The average cost being incurred on MMF by ACF is Rs. 150,000 approximately per annum per patient. Duration of treatment is 2 – 5 years. Previously the cyclophosphamide was the drug of choice in this potentially life-threatening disease. Although cheaper, cyclophosphamide is potentially toxic and may cause infertility in young people; MMF is more expensive but does not carry this risk.

MMF is a long-term treatment and it is anticipated that in the coming fiscal year this number will go up. In order to continue providing this costly but effective treatment ACF requires at least Rs. 10 Million.

2.5.2 Joint Replacements

For patients with advanced Osteoarthritis and Rheumatoid Arthritis with irreversible damage to joints, joint replacements are the only option left. ACF has been sponsoring joint replacements of deserving patients since its inception. A single hip replacement costs around Rs. 250,000 to Rs. 300,000 and bilateral knee replacement costs more than Rs. 500,000.

There is a growing number of patients requiring financial assistance for joint replacements which is crucial for them to serve as useful members of the society, ACF targets to reach out to more in need and is seeking Rs. 2,500,000 to help extend this service in the coming year.

2.5.3 Rehabilitation Equipment

Every year ACF spent a handful amount on provision of rehabilitation equipment to indigent patients. These equipment includes walkers, crutches, rollators, canes as well as manual and electric wheelchairs. During last financial year, ACF provided rehabilitation devices of worth Rs. 116,500. Through this facilitation ACF tries to fulfil its aim of encouraging patients to become an independent member of the society.

2.5.4 Scholarship(s) For Rheumatology Trainee (s)/Fellow(s)

There are increasing number of patients requiring advice and treatment, but they are restricted not only by the financial constraints that they face but also by the critically low number of experts in the field of Rheumatology in our country.

It is estimated that for a population of above 210 Million, minimum of 2500 Rheumatologists are needed. Pakistan only has a handful of Rheumatology experts i.e. around 70, a number critically deficient to meet the needs of a large number of Rheumatic patients.

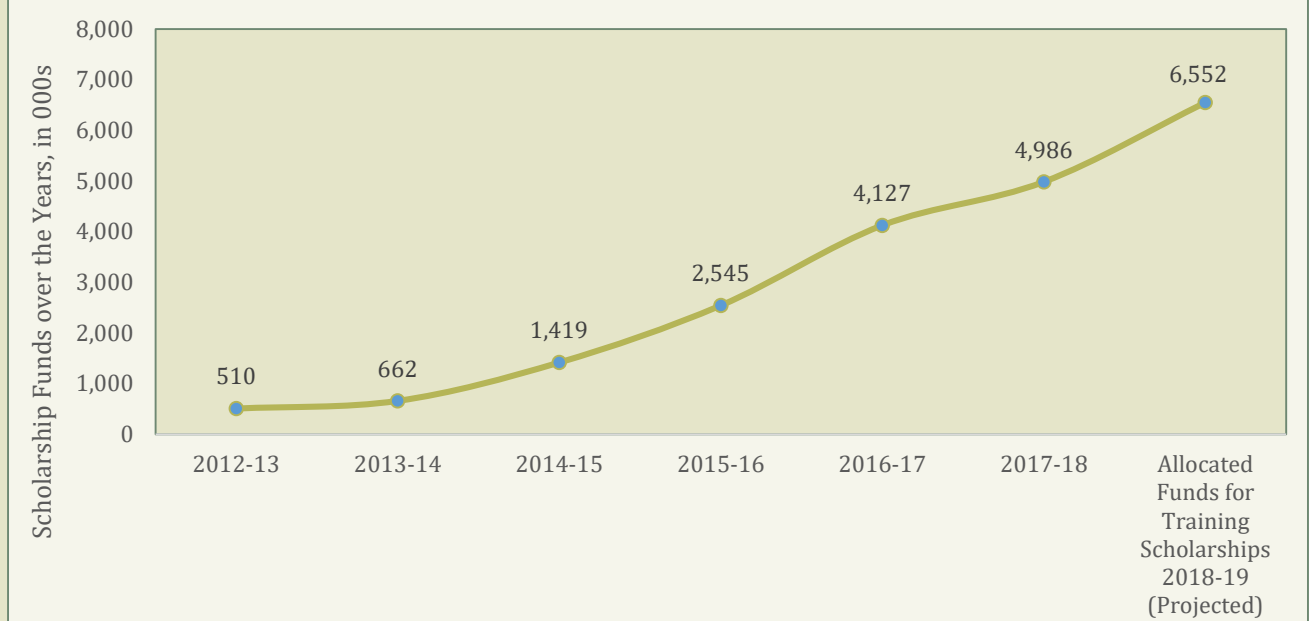
Recognizing the need for more experts in the field, ACF started scholarships fund for training in Rheumatology. ACF takes an undertaking from the recipients of the scholarship to dedicate at least one day per month after completion of their training towards providing free service to Rheumatic patients.

These trainee fellows during their training conduct free clinics at ACF supported clinics under supervision of qualified consultants. These residents also participate in patient awareness programs.

Considering the dire need to train more experts in the field of Rheumatology, ACF from this year would like to fund six scholarships (fully/partially) for FCPS trainees in Rheumatology at the Fatima Memorial Hospital, Division of Rheumatology. Following is the detail of scholarships for current financial year:

- ✎ Mir-Farman-Tariq-Mehboob Scholarships for supporting Junior Faculty
- ✎ Naim-Salam Scholarship
- ✎ Rao Farman-Aesha Farman Scholarship
- ✎ Zaman Foundation Scholarship
- ✎ INFAQ Foundation Scholarship (2x)

Fig. 5- Trend of Scholarship Funds for Post-Graduates

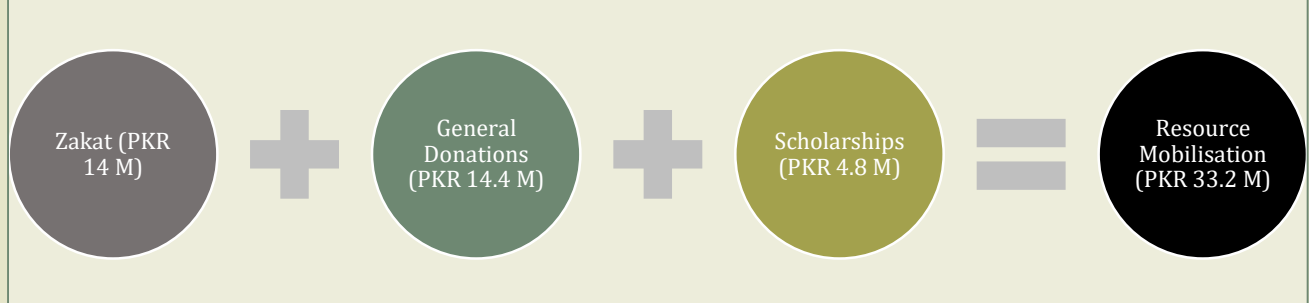


Since inception ACF spent more than Rs. 17 Million on scholarship funding. A total of Rs. 6,552,000 is estimate allocation to fund scholarship of Post Graduate trainees in 2018-19.

2.5.5 Resource Mobilization

ACF ran several charity-drives during the year and collected Rs. 14,006,789 through Zakat. We are grateful to our donors for support and assistance, which is always utilized with the utmost care. List of our corporate donors is also growing.

Fig. 6- Donations collected in different categories during 2017-18



Zakat donations are exclusively spent on medications for deserving patients in line with the Shariah.

2.5.6 Printing of Public Awareness Brochures/Newsletters:

ACF prints brochures on various rheumatic diseases and newsletters for patients and general public. ACF also actively organises public awareness seminars and walks. This is part of its commitment towards public awareness about these diseases.

PUBLIC AWARENESS SEMINAR ON ARTHRITIS IN COLLABORATION WITH PAKISTAN SOCIETY FOR RHEUMATOLOGY AND JANG GROUP; APRIL 2018



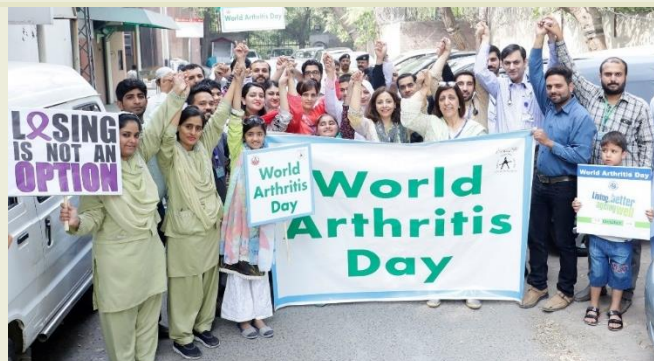
PUBLIC AWARENESS WALK IN CONNECTION WITH "WORLD ANKYLOSING SPONDYLITIS AWARENESS MONTH, MAY 2018



PUBLIC AWARENESS WALK IN CONNECTION WITH WORLD LUPUS DAY, MAY 2018



PUBLIC AWARENESS WALK IN CONNECTION WITH WORLD ARTHRITIS DAY, OCTOBER 2018



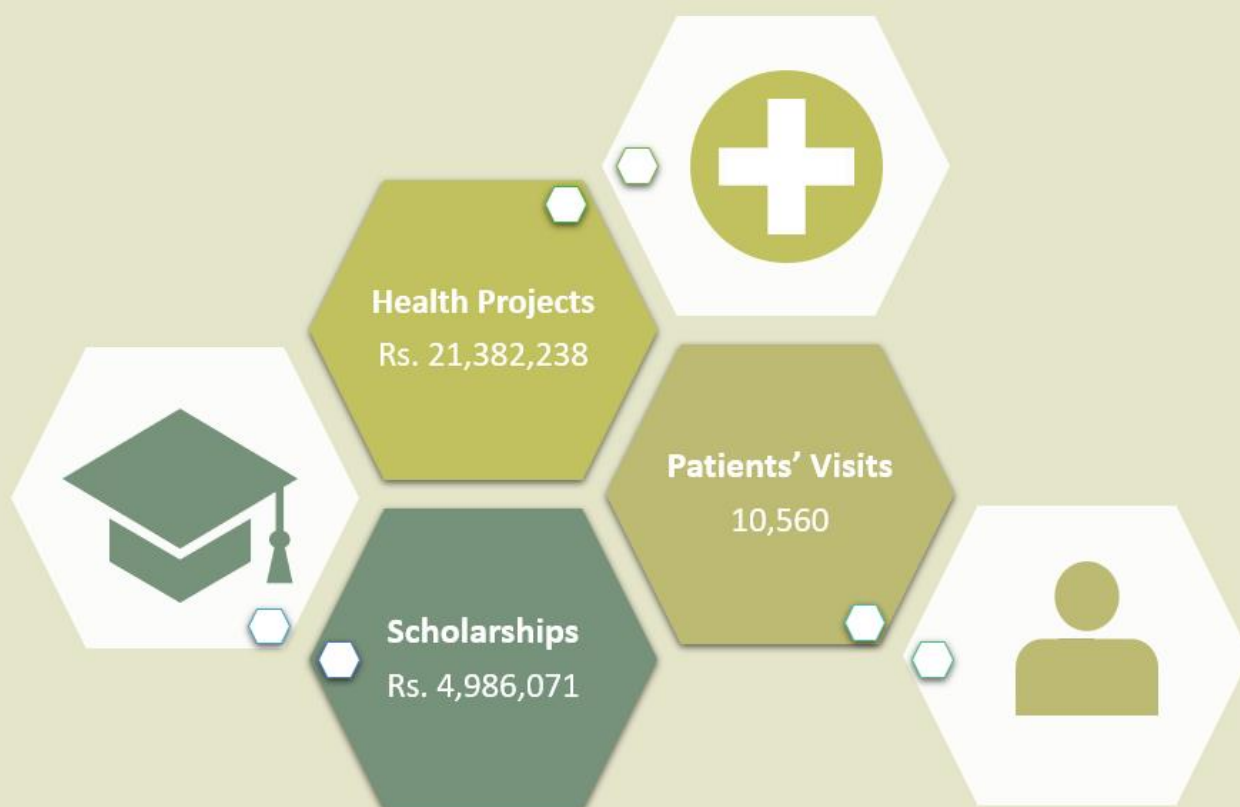
2.5.7 Targets for current financial year 2018 - 19

With enhanced scope and aspiration of reaching out to more number of patients this year, ACF aims to aggressively mobilize the resources to meet the forecasted targets for the year 2018-2019. ACF has set its target for fundraising as above Rs 50 Million.

Table: Expense Summary for 2016-18 and forecasted budget for 2018-19

| Expenses Heads | Expenses Incurred 2016-2017 | Expenses Incurred 2017-2018 | Projected Expenses 2018-2019* |
|--|-----------------------------|-----------------------------|-------------------------------|
| EXPENSES ON HEALTH PROJECTS | | | |
| - Expenses on Anti Rheumatic Medications | 8,803,900 | 10,508,424 | 11,767,354 |
| - Expenses on Biologics | 5,113,071 | 6,624,870 | 7,050,399 |
| - Expenses on Diagnostics | 2,126,884 | 2,781,561 | 2,939,447 |
| - Expenses on Clinical Staff Salaries | 894,773 | 940,883 | 1,018,084 |
| - Expenses on Assist devices | 244,250 | 116,500 | 250,000 |
| - Expenses on Joint Replacement | 55,000 | 410,000 | 1,000,000 |
| EXPENSES ON SCHOLARSHIPS | 4,127,083 | 4,986,071 | 6,552,000 |
| ADMINISTRATIVE EXPENSES | 3,286,925 | 3,584,301 | 5,257,400 |
| Grand Total | 24,651,886 | 29,952,610 | 35,834,684 |

* 19.63% projected increase based on average per month expenses



3 AUDIT REPORT

Arthritis Care Foundation - 2017-18



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INDEPENDENT AUDITOR'S REPORT To the Board of Trustees of Arthritis Care Foundation Report on the Audit of Financial Statements

Opinion

We have audited the financial statements of **Arthritis Care Foundation** ("the Trust"), which comprise the statement of financial position as at June 30, 2018, and the income and expenditure account, statement of changes in accumulated funds, and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Trust as at June 30, 2018, and of its financial performance and its cash flows for the year then ended in accordance with the Accounting Standard for Not for Profit Organisations issued by Institute of Chartered Accountants of Pakistan (ICAP).

Basis for Opinion

We conducted our audit in accordance with the International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Trust in accordance with the International Ethics Standards Board for Accountants' Code of for Professional accountant as adopted by the Institute of Chartered Accountants of Pakistan (the Code), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

The Board of Trustees is responsible for the preparation and fair presentation of the financial statements in accordance with the Accounting Standard for Not for Profit Organisations issued by ICAP, and for such internal control as the Board of Trustees determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, Board of Trustees is responsible for assessing the Trust's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Trust or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Trust's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs as applicable in Pakistan will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to the events or conditions that may cast significant doubt on the Trust's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Trust to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



Date: 15 NOV 2018
Place: Lahore


UHY Hassan Naeem & Co.
Chartered Accountants
Ibne Hassan, FCA


Arthritis Care Foundation
Statement of Financial Position
As at June 30, 2018

| FUNDS AND LIABILITIES | Note | 2018 | | 2017 | | 2017 | |
|--------------------------------------|------|---------------------------|-------------------|------------------------|--------|-------------------|-------------------|
| | | Rupees | Rupees | Rupees | Rupees | Note | Rupees |
| Funds | | | | | | | |
| | | Non-current assets | | | | | |
| Accumulated surplus - unrestricted | | 17,913,977 | 14,338,398 | Equipment | 5 | 205,531 | 188,621 |
| Reserve fund | | 640,882 | 640,882 | Intangibles | 6 | 42,000 | 52,500 |
| Deferred grant - income based | | 55,145 | - | | | | |
| | | <u>18,610,004</u> | <u>14,979,280</u> | | | <u>247,531</u> | <u>241,121</u> |
| | | | | Current assets | | | |
| Current liabilities | | | | | | | |
| Accrued liabilities | | 27,331 | 26,296 | Short term investments | 7 | 6,543,162 | 6,543,162 |
| | | | | Advances and deposits | 8 | 89,103 | 381,004 |
| | | | | Interest accrued | 9 | 166,276 | 153,986 |
| | | | | Stocks | | 1,326,851 | 897,648 |
| | | | | Cash and bank balances | 10 | 10,264,412 | 6,788,655 |
| | | | | | | <u>18,389,804</u> | <u>14,764,455</u> |
| Contingencies and commitments | 4 | - | - | | | | |
| | | | | | | <u>18,637,335</u> | <u>15,005,576</u> |

The annexed notes 1 to 19 form an integral part of these financial statements.

Date: 5 NOV 2018


Samma Sultana
Finance Secretary



Chairperson


Arthritis Care Foundation
Income and Expenditure Account
For the year ended June 30, 2018

| | Note | Restricted fund | Un-restricted fund | 2018 Total | 2017 Total |
|---|------|------------------|--------------------|-------------------|--------------------|
| ------(Rupees)----- | | | | | |
| INCOME | | | | | |
| Donations | 11 | 7,027,266 | 26,207,258 | 33,234,524 | 22,497,528 |
| Interest income | 12 | - | 293,665 | 293,665 | 202,764 |
| | | 7,027,266 | 26,500,923 | 33,528,189 | 22,700,292 |
| EXPENDITURE | | | | | |
| Expenses on health projects | 13 | 5,561,201 | 15,821,037 | 21,382,238 | 17,237,878 |
| Expenses on scholarships | 14 | 1,466,065 | 3,520,006 | 4,986,071 | 4,127,083 |
| Administrative expenses | 15 | - | 3,572,282 | 3,572,282 | 3,278,824 |
| Finance cost | | - | 12,019 | 12,019 | 8,101 |
| | | 7,027,266 | 22,925,344 | 29,952,610 | 24,651,886 |
| Surplus/(deficit) of income over expenditure before taxation | | - | 3,575,579 | 3,575,579 | (1,951,594) |
| Taxation | | - | - | - | - |
| Surplus/(deficit) of income over expenditure after taxation | | - | 3,575,579 | 3,575,579 | (1,951,594) |

The annexed notes 1 to 19 form an integral part of these financial statements.

Date: 15 NOV 2018


Finance Secretary



Chairperson

Arthritis Care Foundation
Statement of Cash Flows
For the year ended June 30, 2018

| | Note | 2018 Rupees | 2017 Rupees |
|--|------|-------------------|--------------------|
| Cash flow from operating activities | | | |
| Surplus/(deficit) of income over expenditure before taxation | | 3,575,579 | (1,951,594) |
| Adjustments for: | | | |
| Depreciation | 5 | 24,890 | 12,807 |
| Amortization | 6 | 10,500 | 10,500 |
| Finance cost | | 12,019 | 8,101 |
| Loss on disposal | 5.1 | - | 3,458 |
| | | <u>47,409</u> | <u>34,866</u> |
| Operating cash flows before working capital changes | | 3,622,988 | (1,916,728) |
| Working capital changes: | | | |
| Short term investments | | - | (3,235,320) |
| Advances and deposits | | 291,901 | (57,544) |
| Interest accrued | | (12,290) | (27,324) |
| Stocks | | (429,203) | (470,074) |
| Accrued liabilities | | 1,035 | 13,583 |
| | | <u>(148,557)</u> | <u>(3,776,679)</u> |
| Cash used in operations | | 3,474,431 | (5,693,407) |
| Finance Cost paid | | (12,019) | (8,101) |
| Net cash generated/(used in) operating activities | | 3,462,412 | (5,701,508) |
| Cash flows from investing activities | | | |
| Purchase of equipment | | (41,800) | (157,100) |
| Sales proceeds on disposal of equipment | | - | 7,000 |
| Net cash (used in) investing activities | | (41,800) | (150,100) |
| Cash flows from financing activities | | | |
| Grant received - net | | 55,145 | - |
| Net cash generated from financing activities | | 55,145 | - |
| Net increase/(decrease) in cash and cash equivalents | | 3,475,757 | (5,851,608) |
| Cash and cash equivalents at beginning of the year | | 6,788,655 | 12,640,263 |
| Cash and cash equivalents at the end of the year | 10 | 10,264,412 | 6,788,655 |

The annexed notes 1 to 19 form an integral part of these financial statements

Date: 15 NOV 2018



Finance Secretary


Chairperson

Arthritis Care Foundation
 Statement of Changes in Accumulated Funds
 As at June 30, 2018

| Particulars | Unrestricted fund | Restricted Fund-deferred grant income based | Reserve fund | Total |
|---|-------------------|---|----------------|-------------------|
| -----Rupees----- | | | | |
| Balance as on July 01, 2016 | 16,289,992 | - | 640,882 | 16,930,874 |
| Transferred from income and expenditure account | (1,951,594) | - | - | (1,951,594) |
| Balance as on June 30, 2017 | 14,338,398 | - | 640,882 | 14,979,280 |
| Balance as on July 01, 2017 | 14,338,398 | - | 640,882 | 14,979,280 |
| Grant/donation received during the year | - | 7,082,411 | - | 7,082,411 |
| Transferred from income and expenditure account | 3,575,579 | (7,027,266) | - | (3,451,687) |
| | 3,575,579 | 55,145 | - | 18,610,004 |
| Surplus for the year | 3,575,579 | - | - | 3,575,579 |
| Balance as on June 30, 2018 | 17,913,977 | 55,145 | 640,882 | 18,610,004 |

The annexed notes 1 to 19 form an integral part of these financial statements

Date: 15 NOV 2018

 Finance Secretary


 Chairperson

1 Reporting entity

Arthritis Care Foundation is a charitable society registered on July 27, 2010 under the laws of Societies Registration Act XXI of 1860. The registered office is situated at 711-Shadman-1, Lahore. The trust was setup with an objective to establish, encourage, assist and finance medical, social welfare and educational activities, of patients suffering from arthritis, rheumatic and other diseases.

2 Basis of preparation

2.1 Statement of compliance

These financial statements have been prepared in accordance with approved accounting and reporting standards for not for profit organization (NPO's) issued by ICAP.

2.2 Basis of accounting

These financial statements have been prepared under the accrual basis of accounting except for cash flow information.

2.3 Critical accounting estimates and judgments

The preparation of financial statements in conformity with approved accounting standards requires management to make judgments, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, receipts and expenditures. The estimates and associated assumptions and judgments are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the result of which form the basis of making the judgments about carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revision to accounting estimates are recognized in the period in which the estimate is revised if the revision affects only that period, or in the period of revision and future periods if the revision affects both current and future periods. The areas where various assumptions and estimates are significant to society's financial statements or where judgments were exercised in application of accounting policies are:

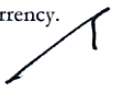
| | |
|--|--------------------|
| a) residual values and useful lives of property, plant and equipment | <i>Note</i> 3.1 |
| b) provisions and contingencies | 3.4 |

2.4 Basis of measurement

These financial statements have been prepared under the historical cost convention except as otherwise disclosed in the respective accounting policies notes.

2.5 Functional and presentation currency

Items included in the financial statements are measured using the currency of the primary economic environment in which the society operates. The financial statements are presented in Pakistani Rupees, which is also the functional currency.



3 Significant accounting policies

These accounting policies set out below have been applied consistently to all periods presented in these financial statements.

3.1 Equipment

Equipment are stated at cost less accumulated depreciation. Depreciation is charged on an asset from the month when the assets are available for use till the month of its disposal i.e. full depreciation is charged in the month of addition, while no depreciation in the month of disposal.

Depreciation is charged on reducing balance method at the rates specified in Note 5.

Normal repair and maintenance is charged to revenue as and when incurred, while major renewal and replacements are capitalized.

3.2 Intangible assets

These are stated at cost less accumulated amortization and any accumulated impairment losses. Intangible assets are amortized on a straight line basis at the rate given in the Note 6 to the financial statements so as to write off the depreciable amount of an asset over its useful life.

Amortization on additions to intangible assets is charged from the month in which an asset is acquired while no amortization is charged for the month in which asset is disposed off.

3.3 Stocks

These are stated at lower of cost and net realizable value. Cost is determined principally on first in first out (FIFO) basis. Net realizable value signifies the estimated selling price in the ordinary course of business less costs necessary to be incurred for sale.

3.4 Provision and contingencies

Provisions are recognized when the Arthritis Care Foundation has a legal and constructive obligation as a result of past event, it is probable that an outflow of resources will be required to settle the obligation and the realizable estimate of the amount can be made.

3.5 Taxation

Current

Arthritis Care Foundation has been approved as a Non-Profit Organization under section 2(36) of the Income Tax Ordinance, 2001. As such, its income is subject to 100% tax credit in terms of Section 100 (C) of Income Tax Ordinance, 2001.

3.6 Funds

Restricted Funds

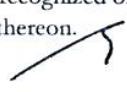
This fund represents donations received by the society for the treatment of patients who requires biologics vaccines.

Unrestricted funds

This is an un-restricted fund. Grants and donations not restricted for a specific purpose or fund are credited to this fund upon receipt. Surplus/deficit for the year is also credited/debited to this fund.

3.7 Interest Income

Interest income on deposits with banks is recognized on time proportion basis taking into account the amounts outstanding and rates applicable thereon.



Arthritis Care Foundation
Notes to the Financial Statements
For the year ended June 30, 2018

4 Contingencies and commitments

There are no known contingencies and commitments as on June 30, 2018 (2017:Nil).

5 Equipment

| Particulars | Office computer | Office equipment | Furniture and fixtures | Total |
|---------------------------------|-----------------|------------------|------------------------|----------------|
| -----Rupees----- | | | | |
| Cost | | | | |
| Balance at July 01, 2016 | 39,800 | 35,900 | - | 75,700 |
| Additions | - | 148,600 | 8,500 | 157,100 |
| Disposal | - | (13,000) | - | (13,000) |
| Balance at June 30, 2017 | 39,800 | 171,500 | 8,500 | 219,800 |
| Balance at July 01, 2017 | 39,800 | 171,500 | 8,500 | 219,800 |
| Additions | 4,800 | 37,000 | - | 41,800 |
| Disposal | - | - | - | - |
| Balance at June 30, 2018 | 44,600 | 208,500 | 8,500 | 261,600 |
| Depreciation | | | | |
| Balance at July 01, 2016 | 16,867 | 4,047 | - | 20,914 |
| For the year | 6,008 | 5,980 | 819 | 12,807 |
| Disposal | - | (2,542) | - | (2,542) |
| Balance at June 30, 2017 | 22,875 | 7,485 | 819 | 31,179 |
| Balance at July 01, 2017 | 22,875 | 7,485 | 819 | 31,179 |
| For the year | 6,226 | 17,896 | 768 | 24,890 |
| Disposal | - | - | - | - |
| Balance at June 30, 2018 | 29,101 | 25,381 | 1,587 | 56,069 |
| Written down value 2017 | 16,925 | 164,015 | 7,681 | 188,621 |
| Written down value 2018 | 15,499 | 183,119 | 6,913 | 205,531 |
| Rate of depreciation (%) | 30% | 10% | 10% | |

5.1 Disposal of equipment

| Particulars | Cost | Accumulated depreciation | Net book value | Sale proceeds | Gain/(loss) |
|------------------|--------|--------------------------|----------------|---------------|-------------|
| Office equipment | | | | | |
| 2018 | - | - | - | - | - |
| 2017 | 13,000 | 2,542 | 10,458 | 7,000 | (3,458) |

Arthritis Care Foundation
Notes to the Financial Statements
For the year ended June 30, 2018

| 6 Intangibles | 2018 | 2017 |
|------------------------------|----------------|----------------|
| | Rupees | Rupees |
| Cost | | |
| Opening balance | 105,000 | 105,000 |
| Additions | - | - |
| Disposal | - | - |
| | <u>105,000</u> | <u>105,000</u> |
| Amortization | | |
| Opening balance | 52,500 | 42,000 |
| Amortization during the year | 10,500 | 10,500 |
| Disposal | - | - |
| | <u>63,000</u> | <u>52,500</u> |
| | <u>42,000</u> | <u>52,500</u> |

6.1 Rate of amortization is 10%. (2017: 10%)

7 Short term investments

This represent investment made in scheduled bank fixed term deposits at interest rate of 4.44%. (2017:4.44%)

| 8 Advances and deposits | Note | 2018 | 2017 |
|--------------------------------|------|---------------|----------------|
| | | Rupees | Rupees |
| Security deposit | 8.1 | 40,000 | 340,000 |
| Advance tax | | 49,103 | 41,004 |
| | | <u>89,103</u> | <u>381,004</u> |

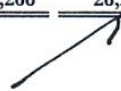
8.1 This represents security deposits for the office building.

9 Interest accrued

This represent interest accrued on short term investment in term deposits.

| 10 Cash and bank balances | 2018 | 2017 |
|---------------------------------------|-------------------|------------------|
| | Rupees | Rupees |
| Cash in hand | 6,169 | 15,694 |
| Cash at bank - <i>current account</i> | 10,258,243 | 6,772,961 |
| | <u>10,264,412</u> | <u>6,788,655</u> |

| 11 Donations | Restricted funds | Un-restricted funds | Total | Total |
|----------------------|------------------|---------------------|-------------------|-------------------|
| | -----2018----- | | 2017 | |
| I-Care foundation | 2,561,201 | - | 2,561,201 | 2,604,783 |
| Infaq foundation | 4,466,065 | - | 4,466,065 | - |
| Donation from others | - | 26,207,258 | 26,207,258 | 19,892,745 |
| | <u>7,027,266</u> | <u>26,207,258</u> | <u>33,234,524</u> | <u>22,497,528</u> |



Arthritis Care Foundation
Notes to the Financial Statements
For the year ended June 30, 2018

12 Interest income

This amount represent interest income on short term investment in term deposits.

| 13 Expenses on health projects | Restricted funds | Un-restricted funds | Total | Total |
|--------------------------------------|------------------|---------------------|-------------------|-------------------|
| | -----2018----- | | | 2017 |
| Medicine consumed | 3,000,000 | 7,508,424 | 10,508,424 | 8,803,900 |
| Clinical staff salaries | - | 940,883 | 940,883 | 894,773 |
| Biologics | 2,561,201 | 4,063,669 | 6,624,870 | 5,113,071 |
| Joint replacement | - | 410,000 | 410,000 | 55,000 |
| Rehabilitation equipment for patient | - | 116,500 | 116,500 | 244,250 |
| Medical test for patients | - | 2,781,561 | 2,781,561 | 2,126,884 |
| | <u>5,561,201</u> | <u>15,821,037</u> | <u>21,382,238</u> | <u>17,237,878</u> |

| 14 Expenses on scholarships | Restricted funds | Un-restricted funds | Total | Total |
|------------------------------------|------------------|---------------------|------------------|------------------|
| | -----2018----- | | | 2017 |
| Faculty support programme | - | 1,796,490 | 1,796,490 | 712,500 |
| Post graduate trainees scholarship | 1,466,065 | 1,723,516 | 3,189,581 | 3,414,583 |
| | <u>1,466,065</u> | <u>3,520,006</u> | <u>4,986,071</u> | <u>4,127,083</u> |

| 15 Administrative expenses | Restricted funds | Un-restricted funds | Total | Total |
|--------------------------------|------------------|---------------------|------------------|------------------|
| | -----2018----- | | | 2017 |
| Salaries and wages | - | 1,604,113 | 1,604,113 | 1,293,531 |
| Fund raising expenses | - | 683,390 | 683,390 | 163,000 |
| Rent rates and taxes | - | 266,000 | 266,000 | 1,050,000 |
| Printing and stationery | - | 350,016 | 350,016 | 204,773 |
| Repair and maintenance | - | 30,352 | 30,352 | 61,935 |
| Utilities | - | 105,800 | 105,800 | 60,961 |
| Vehicle running expenses | - | 59,821 | 59,821 | 56,437 |
| Website maintenance expenses | - | 136,420 | 136,420 | 74,500 |
| Depreciation | - | 24,890 | 24,890 | 12,807 |
| Amortization | - | 10,500 | 10,500 | 10,500 |
| Postages and Courier | - | 104,473 | 104,473 | 61,317 |
| Traveling expenses | - | 11,520 | 11,520 | 132,500 |
| Legal and professional charges | - | 40,000 | 40,000 | 26,000 |
| Loss on disposal of asset | - | - | - | 3,458 |
| Auditors' remuneration | - | 2,000 | 2,000 | 2,000 |
| Miscellaneous expenses | - | 142,987 | 142,987 | 65,105 |
| | <u>-</u> | <u>3,572,282</u> | <u>3,572,282</u> | <u>3,278,824</u> |

Arthritis Care Foundation
Notes to the Financial Statements
For the year ended June 30, 2018

| 16 Related party transactions and balances | | | 2018 | 2017 |
|--|----------------------------|-----------------------|-----------|-----------|
| | | | Rupees | Rupees |
| The related parties comprise of executive committee and members of board of trustee of the Arthritis Care Foundation. Transactions with related parties are as follows: | | | | |
| Name | Relationship | Nature of transaction | | |
| Prof. Nighat Mir Ahmad | Chairperson | Donation | 300,000 | 260,000 |
| Prof. Sumaira Farmman Raja | Co -Chairperson | Donation | 373,000 | 339,997 |
| Dr. M. Ahmed Saeed | General Secretary | Donation | 331,000 | 343,000 |
| Ms. Samina Sultana | Finance Secretary | Donation | 770,000 | - |
| Dr. Tauseef Irfan | Joint Secretary | Donation | 30,000 | 50,000 |
| Dr. Shabnam Sarfraz | Joint Finance Secretary | Donation | 100,000 | 50,000 |
| Prof. Dr. Tasnim A. Raza | Member of board of trustee | Donation | - | 40,000 |
| Ms. Anjum S. Ahmed | Member of board of trustee | Donation | 1,340,000 | 1,140,000 |
| Mr. Farid Ahsanuddin | Member of board of trustee | Donation | - | - |
| Ms. Uzma Ahmad | Member of board of trustee | Donation | 200,000 | - |

17 Number of Employees

| | | |
|--|---|---|
| Number of employees at the end of the year | 9 | 8 |
| Average number of employees | 9 | 8 |

18 Date of authorization

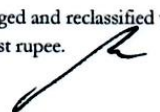
These financial statements were authorized by managing body on

15 NOV 2018

19 General

19.1 Figures of previous year have been re-arranged and reclassified wherever necessary for the purposes of comparison.

19.2 Figures have been rounded off to the nearest rupee.




Finance Secretary


Chairperson

Date:

15 NOV 2018

آرتھرائٹس کیئر فاؤنڈیشن

{ ایک تعارف }

جوڑوں کے امراض (Rheumatic Diseases) دنیا بھر میں معذوری کا باعث بننے والی بیماریوں میں سرفہرست ہیں۔ ان امراض کا تعلق صرف جوڑوں ہی سے نہیں بلکہ ان میں سے کچھ امراض تو گردوں، دل، دماغ اور پھیپھڑوں کو بھی متاثر کر سکتے ہیں۔ جن کی بروقت تشخیص اور علاج نہ ہونے پر موت بھی واقع ہو سکتی ہے۔ جوڑوں کی یہ بیماریاں عمر کے کسی بھی حصے میں لاحق ہو سکتی ہیں۔ حتیٰ کہ بچے بھی ان بیماریوں کا شکار ہو سکتے ہیں۔

پچھلی تین دہائیوں میں ان امراض کے علاج میں پیش بہا ترقی ہوئی ہے۔ اور بروقت تشخیص اور علاج سے ان امراض پر نہ صرف قابو پایا جاسکتا ہے بلکہ مریض کو معذوری سے بھی بچایا جاسکتا ہے۔

ایک اعداد و شمار کے مطابق دنیا میں ہر تیسرا فرد کسی نہ کسی قسم کے جوڑوں کے مرض کا شکار ہے۔ ترقی یافتہ ممالک میں ہر اسی ہزار سے ایک لاکھ آبادی کے لئے 1 جوڑوں کے امراض کے معالج (ریوٹھریٹولوجسٹ) کا معیار مقرر کیا گیا ہے۔ اس معیار کے مطابق لگ بھگ بیس کروڑ سے زائد آبادی والے اس ملک کیلئے کم از کم 2500 جوڑوں کے امراض کے معالجوں (ریوٹھریٹولوجسٹ/Rheumatologists) کی ضرورت ہے۔

بد قسمتی سے اس وقت ہمارے ملک میں صرف 50 سے 55 ریوٹھریٹولوجسٹ موجود ہیں۔ المیہ تو یہ ہے کہ بیشتر سرکاری ہسپتالوں میں جوڑوں سے متعلق شعبہ ہی موجود نہیں۔ اس گھمبیر صورت حال میں آرتھرائٹس کیئر فاؤنڈیشن کے بانی ڈاکٹروں نے کئی سال قبل اس شہر میں جوڑوں کے مریضوں کیلئے مفت کلینک کا اجراء کیا اور ۲۰۱۰ء میں باقاعدہ آرتھرائٹس کیئر فاؤنڈیشن کے نام سے ایک ٹرسٹ کی بنیاد رکھی۔ جو کہ جوڑوں کے امراض میں مبتلاء مستحق مریضوں کی فلاح کیلئے اپنی مدد آپ کے تحت کام کرنے والا اپنی نوعیت کا پہلا اور واحد ادارہ ہے۔ آپکی زکوٰۃ اور صدقات سے مستحق مریضوں کو نہ صرف رائج دوائیاں مفت فراہم کی جاتی ہیں بلکہ جوڑوں کے امراض کیلئے جدید اور کارآمد دوائیاں (جنہیں باؤلوجکس، Biologics کہا جاتا ہے) بھی فراہم کی جاتی ہیں۔ ان ادویات (Biologics) پر ایک مریض کے علاج پر اٹھنے والے خرچے کا تخمینہ چار سے آٹھ لاکھ سالانہ ہے۔

جوڑوں کے وہ مریض جو بروقت علاج نہ ہونے کی وجہ سے مستقل معذوری کا شکار ہو جاتے ہیں، آرتھرائٹس کیئر فاؤنڈیشن ایسے مستحق مریضوں کے جوڑوں کی تبدیلی کے آپریشن میں بھی معاونت کرتی ہے۔ ایک مریض کے ایک جوڑے کی تبدیلی پر ہونے والے خرچے کا تخمینہ ڈیڑھ سے تین لاکھ روپے تک ہے۔

ایسے بہت سے لاچار مریض آپکی معاونت (بذریعہ زکوٰۃ و صدقات) کے منتظر ہیں۔

شکریہ!

HOW YOU CAN HELP ACF .

You can support ACF by making a general donation, a Zakat donation, or a sadqa donation. Zakat donation are exclusively spent on Medications for deserving patients in line with the Shariah. Your support will help procure medication for deserving arthritis patients or can be used to fully or partially sponsor one of the following:

- Medication for one Rheumatoid arthritis patient Rs. 80,000/annum (Approx.)
- Medicine for one Lupus (SLE) Nephritis Patient Rs. 260,000/annum (Approx.)
- Hip Joint Replacement Rs. 250,000 (Approx.) and Knee Joint Replacement Rs. 500,000 (Approx.)
- Biologic Medicine (rituximab) for un-controlled Rheumatoid arthritis or Lupus patient Rs. 320,000 (Approx.)
- Biologic Medicines (Etanercept) for Ankylosing Spondylitis or Rheumatoid Arthritis Childhood Arthritis patient Rs. 1000,000/ annum (Approx.)
- Biologic Medicine (Tocilizumab) for JIA /Childhood Arthritis or Rheumatoid Arthritis patient Rs. 600,000/- anum (approx)

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To learn about our activities visit our website:

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