


INDIA: C.J. Foote, Surgical Scientist Program, PGY 3 Orthopedics.

The INORMUS Study is designed to collect injury, treatment, and 30-day outcome information of patients presenting to emergency departments with fractures around the world. Because India has the fastest growing population and the largest burden of road traffic accident-related injury, we started the study on the subcontinent. When I started working on this project with Dr. Bhandari six months ago I had no idea how embarking on the INORMUS Project would change my life. We are currently in the third month of recruitment and have 3000 patients enrolled. Currently, INORMUS is recruiting 3 patients every 10 minutes. We have 20 centers involved, 10 of which are actively recruiting patients. I am writing this from the Postgraduate Institute in Chandigarh, the second biggest hospital in India. In their emergency department, I was humbled to see over 40 patients in either traction or external fixation. I am inspired by the trauma team's commitment to their community and country. The INORMUS Project Group is working to expand INORMUS into Mexico, Central, and South America in 2012. We believe by 2015 we will have a global fracture registry which will help identify shared problems in trauma care as well as problems unique to low and middle income countries which incur 90% of the trauma burden. I want to thank the McMaster Department of Surgery that helped make my project possible.


GUATEMALA: Dr. Carolyn Levis

Guatemala Healing Hands Foundation (GHHF) was founded in 2004 by an American hand therapist (Lynn Bassini) originally from Guatemala. GHHF is dedicated to improving health care for children in Guatemala through education, surgery and therapy. The group specializes in the treatment of congenital hand anomalies, burns and other traumas to the hand and upper extremity. Volunteers include plastic and orthopedic hand surgeons, anaesthesiologists, hand therapists and nurses, mostly from the US with a two-person Canadian contingent! I joined the group in March 2012 for a 12-day mission to Guatemala City that began with a one day workshop followed by a community development project in the small village of Chichoy. **We reviewed more than 200 children.** Sixty-one surgical cases were completed.



Guatemala is beautiful and the people are kind and gracious. It was a tremendously rewarding experience. [photo—CL]

**KENYA: Julia Pemberton MSc
Developing Disability Weights for Congenital Anomalies in Kenya**


[Mt Longonot, Kenya—JP] I recently had the privilege of traveling to Kijabe, Kenya, located on the lip of the beautiful Rift Valley and home of Bethany Kids in Kijabe Hospital, our partnering institution for this **research project funded by Surgical Associates**. I worked with ISD visiting professor Dr. Dan Poenaru, a pediatric general surgeon, and Brenda the local Research Coordinator, to determine Disability Weights from a Kenyan perspective for 15 different health states associated with pediatric congenital anomalies. Disability Weights are used to quantify the number of Disability Adjusted Life Years (DALY's) averted by surgery. We recruited 71 study participants for the focus groups, including nurses, social workers, therapists, and doctors. Next we plan to compare the derived Disability Weights in Kenya with those from focus groups in Canada and, ultimately, the DALY's averted in each setting.

NEPAL: Dr. Jessica Westerholm

I just arrived in Tansen after 5 ½ months of language study in Kathmandu. Tansen Mission Hospital is a 165-bed hospital established in 1959. There are 2nd year Nepali GP residents preparing to work in remote areas, who rotate through our surgical department to learn basic surgical skills, such as C-sections and appendectomies. The cases here include routine appendectomies, hernias and laparotomies. We have a basic laparoscopic set-up that works some of the time, for straightforward cholecystectomies. There is tons of urology, especially stone disease, and plenty of C-sections, orthopedic injuries, and burns.

Major road traffic accidents occur often. Tansen has a very narrow winding road leading up to it. All kinds of vehicles travel along that road, including old, rickety buses, filled to overflowing with passengers. There is a steep drop to one side, and no guardrail. Need I say more? The learning curve for me is quite steep at the moment, but there is a great surgical team and I feel well-supported. Check out my blog: driessicain-nepal.blogspot.com. Also, we are looking for a good cystoscopy set here, so if anyone has any idea where we could get one, please let me know.

Department of Surgery
June 2012
Upcoming Events
October 17-18th

International Conference on Surgical Education (Ottawa)

October 19-20th:

3rd Annual Conference on Healthcare Collaboration in Uganda (Hamilton)

October 21-24th:

Canadian Conference on Global Health (Ottawa)

May 10th-12th, 2013:

Bethune Round Table (Vancouver)


Oct 19-20th in Hamilton

Last year 85 participants including 10 from Uganda, took part in the 2nd annual Conference on Surgery & Anesthesia in Vancouver to address this question:

How can we partner with surgical colleagues in Uganda to build clinical and academic capacity, in cooperation with other North American centres so that we don't duplicate efforts?



The St. Joseph's Health System and partners at McMaster University are hosting an expanded conference in 2012. In partnership with our Ugandan colleagues and numerous academic hospitals in North America, it is our goal to help build capacity within the Ugandan healthcare system. We aim to provide Ugandans with the opportunity to guide our work so that we achieve common goals, avoid duplication, and establish partnerships across institutions and borders.

If you would like to help with the conference, contact the ISD.

Guyana: McMaster partnership expanding

Dr. Karen Bailey: Pediatric Surgery and Trauma Team Activities in Guyana. It is an exciting year as we look forward to seeing the fruits of our ongoing collaboration with the Guyana Public Hospital Corporation (GPHC) and McMaster University. Since the last visit in November 2011 we have been mentoring a young surgeon Dr. Ravi Motilall via Skype. He has expressed interest and a commitment to develop additional surgical skills to meet the Pediatric Surgery needs in Guyana. An enthusiastic group of 5 McMaster medical students in collaboration with the MPSRC are planning to perform a learning needs analysis of the trauma team in Guyana. This is part of the next steps identified during our successful CIHR funded planning meeting with our colleagues in Guyana. The needs identified will help mold and guide the curriculum of the upcoming courses and simulation education efforts in Guyana. We also are preparing to launch a Problem Based Learning pilot project and learning styles analysis of surgical clerks at GPHC to help the medical school faculty design educational activities geared to meet the needs of their students.



[Dr. Motilall and Dr. Bailey—BC]



[McMaster team with CNIS President Dr. Ron Lett in Guyana-BC]

Dr. John Miller: Thoracic Surgery. I joined a McMaster team to participate in the Guyana Medical Scientific Conference in Nov 2011. We met with surgical educators and conducted two practical education programs 1) the Essential Surgical Skills Course (ESS) and 2) the Trauma Team Training (TTT) Update. The Guyanese medical community includes a group of vibrant, bright, and active young surgeons keen to advance medical practice by designing educational and clinical programs that will enhance the standards of care for the citizens of Guyana. The University of Guyana has developed a Post-graduate Diploma in Surgery program which leads to certification to practice surgery in Guyana. There are several young general surgeons who are now keen to enroll in surgical subspecialty programs. As a Program Director of Thoracic Surgery at McMaster University, it is my hope that we can support the development of a training program for Thoracic Surgery in Guyana that could potentially include academic courses and clinical rotations at McMaster University. Guyana is fortunate to have several bright and creative young surgeons able to carry out complex surgical practice with the bare minimum of basic medical resources. I see we can learn from the other, with McMaster offering access to our resources and expertise in our residency training programs, and the physicians from Guyana sharing their experience and expertise in resourceful healthcare delivery. I look forward to the next opportunity to visit Guyana and our continued discussions on ways to support promote this international relationship.

Dr. Anne Wong: Anesthesia. In Nov 2011, Dr. Alez Dauphin and I visited Guyana in order to better understand their anesthesia training needs and how our department can assist. A country of 750,000, Guyana has only 9 certified anesthesiologists, 4 of whom work in Georgetown. We were struck by the beauty of the country and the warmth of its people. We were treated with utmost hospitality by the Chief of Anesthesia Dr. Alexandra Harvey, the members of the Department of Anesthesia and staff at the GPHC. We also had meetings with the Director of the Institute of Health Sciences Education, the CEO of GPHC, and the Minister of Health. We visited a regional hospital (New Amsterdam) and participated in teaching the Trauma Team Training Course to hospital staff. The potential to contribute to anesthesia care in Guyana is great. With institutional and national Canadian Anesthesia Society support, we hope to continue to formalize our collaboration to develop anesthesia residency training in Guyana.

Pediatrics in Guyana

The first pediatric postgraduate program at GPHC in collaboration with the University of Guyana & McMaster Children's Hospital was launched in October 2011. This is a 3 year training program (Masters degree), certified by the University of Guyana & recognized by the Guyana Medical Council. The purpose of the program is to train consultant pediatricians capable of providing optimal care for children within an evolving resource setting in Guyana. To date 6 Guyanese participants are in training.

For further information please visit:

www.guyanapediatrics.com or contact the Canadian external Program Director Dr. Andrea Hunter (hunteaj@mcmaster.ca)

Improving the Pediatric Ward in Guyana



If you've been reading the Hamilton Spectator over the past couple of months, you may have seen several articles about the visit of Hamilton Ticat Ryan Hinds to his original home in Guyana. With McMaster faculty, Ryan is leading an effort to raise money for the new Pediatric Ward in Georgetown Guyana. Recently the ISD organized a dinner to introduce the charity Guyana Help the Kids and raised \$1500 as an initial contribution to the project. You can donate at:

www.guyanahelptekids.com



International Surgery online

- ◆ UBC Branch for International Surgery is adding 2 more online accredited postgraduate courses; **Global Disabilities: a Surgical Care Mandate, and Surgical Care Issues in Humanitarian Disaster Response**. These two courses are in addition to the innovative Surg510 course.
- ◆ Global Partners in Anesthesia and Surgery is a multidisciplinary, multinational collaboration focused on healthcare capacity building in resource-poor settings.

GPAS
Global Partners in Anesthesia and Surgery

International Surgery Desk Contacts

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Bethune Round Table 2013

The ISD was well represented at the recent 12th annual Bethune Round Table in Toronto Canada. The conference is dedicated to international surgery and global partnership, with a major focus on representation from both the global north and south. A total of 9 participants, from three departments (Orthopedics, OB/GYN, and Surgery) where from McMaster University including a Ugandan resident who is currently on elective in the Department of Obstetrics and Gynecology. In total McMaster was listed on three Podium presentations and five Posters.

Podium Presentations:

- Dr. Dan Poenaru (presenter), Dept. of Surgery "Quantifying the burden of pediatric surgical disease due to delayed access to care."
- Dr. L. Elit (co-author), Dept. of OB/GYN "Implementation of Oncology Surgery in Western Kenya"
- Dr. Brian Cameron (co-author), Dept. of Surgery "An evaluation of the exam for the university of Guyana Diploma in Surgery."

Poster Presentations:

- Dhillon S (BHSc MPSRC Intern), Pemberton J, Hoit, G, Bailey, K, Rambaran N, Cameron BH. Trauma Team Training: A pilot and evaluation of the TTT Update Course in Georgetown, Guyana
- Larouche P (Ortho PGY 4) Rambaran M, Pemberton J, Cameron BH. Evaluation of Trauma Team Training in the Accident and Emergency Department in Georgetown, Guyana: A Pilot Study.
- Pathy R (Ortho PGY3) , Unwaha J, Ferri B, Wong I. Orthopaedic Trauma Care in Nigeria: Current Practices and Needs Assessment.
- Pathy R (Ortho PGY 3), Kitemagwa D, Naddumba E, Pirani S. Caregiver Perspectives on Poseti Bracing in Uganda.
- Farrokhyar F (Dept. of Surgery), Amin N, Dath D, Kolkin A, Gill-Pottruff C, Klie J, Mitchell C, Skot M, Bain J, Reid S. Evaluation of surgical research methodology (SRM) program of surgical foundations: preliminary results



[Dr. Pathy and Dr. Farrokhyar—BC]

McMaster Brock Global Health Forum

Organized by the Canadian Coalition for Global Health Research (CCGHR), McMaster University and Brock University, and co-sponsored by the ISD, the 2nd annual McMaster-Brock Global Health Research Forum was held on March 22 and 23, 2012 at McMaster Innovation Park, Hamilton, Ontario. The theme of the forum was entitled, "Thinking Globally, Acting Locally: Canada's Role in Global Health". The organizers selected this theme with the goal of generating discussion and interaction about local challenges and Canada's role in the larger global context. Seventy-five people, including guest speakers and workshop facilitators, participated in the event.

The Opening Plenary, "Global Health and Local Places: What are the Relationships?" was delivered by William Coleman, Professor, Director of Global Governance Programs, CIGI Chair in Globalization and Public Policy, University of Waterloo. The Forum's keynote presentation by Jeffrey Reading. Reading was also a member of the Expert Panel on Canada's Strategy Role in Global Health in the fall of 2011. His theme on "Canada's Role in Global Health" focused on both local and global indigenous health research.

Ugandan Surgeon Visits Hamilton



[Dr. Sister Margaret—BC]

Following the Bethune Round Table meeting, a few McMaster faculty met with Ugandan colleagues who will be attending the SideBySide conference in Hamilton in October 2012, including **Dr. Sister Margaret Ajiko from Soroti, Uganda**. Here is a part of her story:

Uganda does not pay doctors well and many leave to practice elsewhere. Those who stay are overworked and underpaid. With extreme poverty and cultural superstitions, many postpone seeing a doctor until their case is severe. Sister Margaret's surgical skills were quickly put to the test, routinely dealing with cases doctors in the West don't often see, including vaginal fistulas, ruptured uterus, gangrenous organs, amputations, complications from typhoid, malaria, and uncontrolled diabetes... However, no amount of training prepared Margaret for the conditions she faced ... in her home town of Soroti, where she now serves... The single operating theatre has cracked, broken floors, making it difficult to clean; the roof leaks, causing shocks when operating in the rain. There is no running water for scrubbing in theatre. Operating tables are non-adjustable; supplies and theatre instruments are limited. When patients require surgery, the family must purchase all required supplies, based on a list provided by the doctor, including sutures, rubber gloves, and medicines, which are carried in a bag into surgery with the patient. There is one single light in the operating theatre and no stand-by generator. Due to power load sharing, the electricity goes off regularly without warning, at times resulting in the loss of lives. Margaret recalls surgeries performed with a flashlight or even by the light of a mobile phone. There is no blood bank, incubators, Cat scan, little lab equipment, or any of the machinery so heavily relied upon in North America. A shortage of X-ray films and chemicals renders the X-ray machine ineffective. A manual auger is used to drill into the skull for brain hemorrhages; razor blades are split in two to share; remnants of sutures are saved as they are precious.... Sister Margaret performs her medical/surgical duties, all the while teaching new interns. Her reliance upon God and her desire to help those in need, keeps her going. With each realization that she has helped to save a life, Margaret says "it gives me such joy; it makes me so happy". [Source: The Afro News July 8, 2010 (theafronews.ca)]

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McMaster University-Dept. of Surgery ISD Annual Report 2011 Highlights

The inaugural vision of the ISD is:

"To facilitate international surgery activity within the Department, including an educational component in all projects, and collaborate with like-minded disciplines and colleagues within the McMaster University and Canadian surgical communities."

The International Surgery Desk pursues activities in **D**evelopment, **E**ducation, **S**ervice, and **K**nowledge.

DEVELOPMENT

The McMaster ISD is a member of the Canadian Network for International Surgery (CNIS - www.cnis.ca/) and is represented on the CAGS International Surgery Committee and the CAPS Global Committee.



The ISD continues to work collaboratively in Guyana, Haiti, and Uganda

EDUCATION

- **Dr. David Sigalet** from Calgary, vice-president of the World Federation of Association of Pediatric Surgeons, spoke at the International Surgery Surgical Chair's Rounds in June.
- **Dr. Dan Poenaru** from Kenya has joined the ISD as a Visiting Professor and will be collaborating with global health initiatives at McMaster.
- Surgical residents doing international electives this year included orthopedic residents **Dr. Rubini Pathy** (Uganda), **Dr. Patricia Larouche** (Guyana) and **Dr. C.J. Foote** (India).
- **Dr. Jola Omole** won the prestigious 2-year Paul Farmer Global Surgery Fellowship, and will be developing surgical education programs in Rwanda working with faculty in Boston.
- **Dr. John Miller** and **Dr. Brian Cameron** taught Essential Surgical Skills at a postgraduate Global Health course in Toronto. Dr. Cameron also taught locally at the International Pediatric Emergency Medicine Elective for international medical students.

SERVICE

- **Dr. Samir Faidi** volunteered for 2 weeks in Misratah, Libya during the recent conflict.
- **Dr. John Harvey** visited Bolivia on a short term Ophthalmology missions with Medical Ministry International.
- **Dr. Carolyn Levis** visited Guatemala on a Plastic Surgery trip.
- Recent surgical graduate **Dr. Jessica Westerholm** has taken a 2 year surgical posting with the Tansen Mission Hospital in Nepal. Her blog is at: <http://drjessicainnepal.blogspot.ca/>

KNOWLEDGE

- Orthopedic resident **Dr. C. J. Foote** (PGY3, Surgical Scientist Program, Orthopaedics) is doing his M.Sc. research project in India with **Dr. Mohit Bhandari**, initiating The INternational ORthopaedic MUticenter SStudy in Fracture Care (INORMUS).
- The ISD is a member of the **Canadian Coalition for Global Health Research** (CCGHR), and is developing further collaborations within the university through the **McMaster Global Health Office**.



ISD Scholarship-Call for Proposals is Open!

The ISD is proud to present the **International Surgery Scholarship**. This scholarship is funded by the ISD and is awarded to a surgical resident or fellow who is embarking on an international surgery clinical or research elective in a low resource region. Further details include:

Eligibility: McMaster surgical residents and fellows

Funding: \$2,000

Deadline: June 30, 2012

Application Checklist:

- Cover letter including name, resident year, program
- Applicant CV
- Proposal (including location, local supervisor, learning objectives, research question)
- Letter of support from your Program Director
- Budget and elective timeline



Submit all complete applications to ISD c/o
Kathy Wilson, kawilso@mcmaster.ca