

TRAINING OF LOW AND MIDDLE INCOME COUNTRY (LMIC)

TRAINEES WITHIN THE REGION

BACKGROUND

The Lancet Commission on Global Surgery meeting held in April 2015 informed us that five billion people in the world do not have access to surgery. More than 50% of these unmet needs are in children and one third of these children will require a surgical procedure. One billion babies are born with congenital abnormalities that require surgical intervention. The pivotal unmet need is the lack of trained personnel. This is reflected in all low and middle income countries. (LMIC)

JUSTIFICATION

Following the Lancet meeting, Global Initiative for Children's Surgery (GICS) was established to bring together surgical staff from low income countries to come together and brainstorm their needs at a meeting held at the Royal College of Surgeons of England in May 2016. The main request from the LMIC region was short term training in surgical specialities in a better established region in LMIC. Emphasis was on regular short term training to allow for short term absence from the home country and avoid loss of trainees to better resourced areas within LMIC.

The Hugh Greenwood Children's Research Fund has supported such a venture in the past in supporting John Sekabira from Uganda to train in paediatric Surgery in Durban, South Africa.

PROJECT DESCRIPTION

1. LMIC countries will identify the children's surgical training needs via the local institution or via their local colleges (African Colleges, Pacific Colleges Asian Colleges South American Colleges, South East Asia Colleges) e.g. PAPSA for Africa
2. South African Teaching Hospitals under the co-ordination of Professor Jerome Loveland based at Witwatersrand University in Johannesburg has already established a training hub for Africa and Professor Vrisha Madhuri at Velore (India) for Asia and South East Asia. This is not restricted to South Africa and India. For example training for cleft lip and palate can be done in Kenya and Tanzania for African trainees.
3. Trained personnel will receive three month training in specialist children's surgical skills e.g. neurosurgery, cleft lip surgery, club feet etc. This may be extended to three monthly training annually over two to three years if needed.
4. This would be different to the Hugh Greenwood fellowship awarded via the British Association of Paediatric Surgeons which is targeted training in one particular skill such as cancer surgery, key-hole surgery etc.
5. Aiming at two trainees per year.
6. Five-year project.

References:

1. Lancet Commission for Global Surgery
www.thelancet.com/commissions/global-surgery
2. Global initiative for Children's Surgery
www.globalsurgery.org/global-initiative-childrens-surgery-gics-2016