

NEW SURGERY FOR Vanuatu

An attachment based in Geelong has widened the scope of surgery in Vanuatu

A former Rowan Nicks Scholar, general surgeon Dr Richard Leona, has become the first surgeon from Vanuatu to conduct Transurethral Resection of the Prostate (TURP) procedures for local patients following a 12-month training attachment under Urology Surgeon Mr Richard Grills at Geelong Hospital.

Between August 2013 and March 2014 the local team in Port Vila, led by Dr Leona, has conducted 29 TURP procedures using one of two Urology Endoscopic 'Towers' and endourological equipment donated by the Hamilton Hospital in Victoria.

According to detailed data sets maintained by Dr Leona, the patients had an average age of 69 years with prostate enlargement of up to 100gms.

Prior to Dr Leona's return from Australia and the arrival of the Endoscopic Urology equipment, such patients were either forced to undergo open surgery, seek treatment outside the country or wait for an Australian Government-funded Pacific Island Program (PIP) team visit.

Many such patients required in-dwelling catheters (IDCs) during their wait for treatment, which often caused personal distress, discomfort and social isolation, making Dr Leona's urology skills a great advance for the country and for his patients.

Dr Leona's data showed that of the patients he has so far treated, 23 of 29 had IDCs prior to surgery with an average IDC in place for three and a half months up to a maximum of eight months.

Almost all of his patients, 28 out of 29, were continent post-surgery with

the remaining patient experiencing intermittent continence.

Dr Leona described his ability to now conduct TURP procedures as being of great significance for the people of Vanuatu and the region and said he hoped to be soon training other surgeons in the technique.

"We have never before done TURP procedures here outside PIP visits since the history of surgery started in Vanuatu so this is of huge significance," he said.

"Until recently, we had to conduct open surgery for prostates and that is a big undertaking as there is an associated high morbidity and high mortality risk because prostate patients are mostly older and they've often got co-morbidities such as diabetes, high blood pressure or heart problems.

"Many had to stay in hospital for up to four weeks to recover.

"Now they stay in hospital only for four or five days which both frees up hospital beds for other patients and saves the patient's families a considerable amount of money getting to and staying in Port Vila.

"The patients I have treated are extremely happy that they no longer have IDCs in place for months. They enjoy their lives again and many have left my office with tears of joy on their faces."

In 2012, Dr Leona undertook a Urological Surgery specialist training attachment at Geelong Hospital under the supervision of Mr Richard Grills with funding provided by the Rowan Nicks Scholarship.

Such support did he receive there, that the hospital provided not only his accommodation but also agreed to bring

theatre and ward nurses from Vila Central Hospital to Geelong Hospital to learn the intra-operative and post-operative treatment of TURP patients.

Two theatre nurses from Geelong Hospital and two ward nurse have since held training workshops and performed exchanges at Vila Central Hospital.

Also during his visit, administrators of the Hamilton Hospital heard of Dr Leona's developing urology skills and the great need for such surgery in Vanuatu and donated Urology Endoscopic 'Towers' and complete sets of endourological equipment that were to be replaced and upgraded. The total cost of this equipment was around \$350,000.

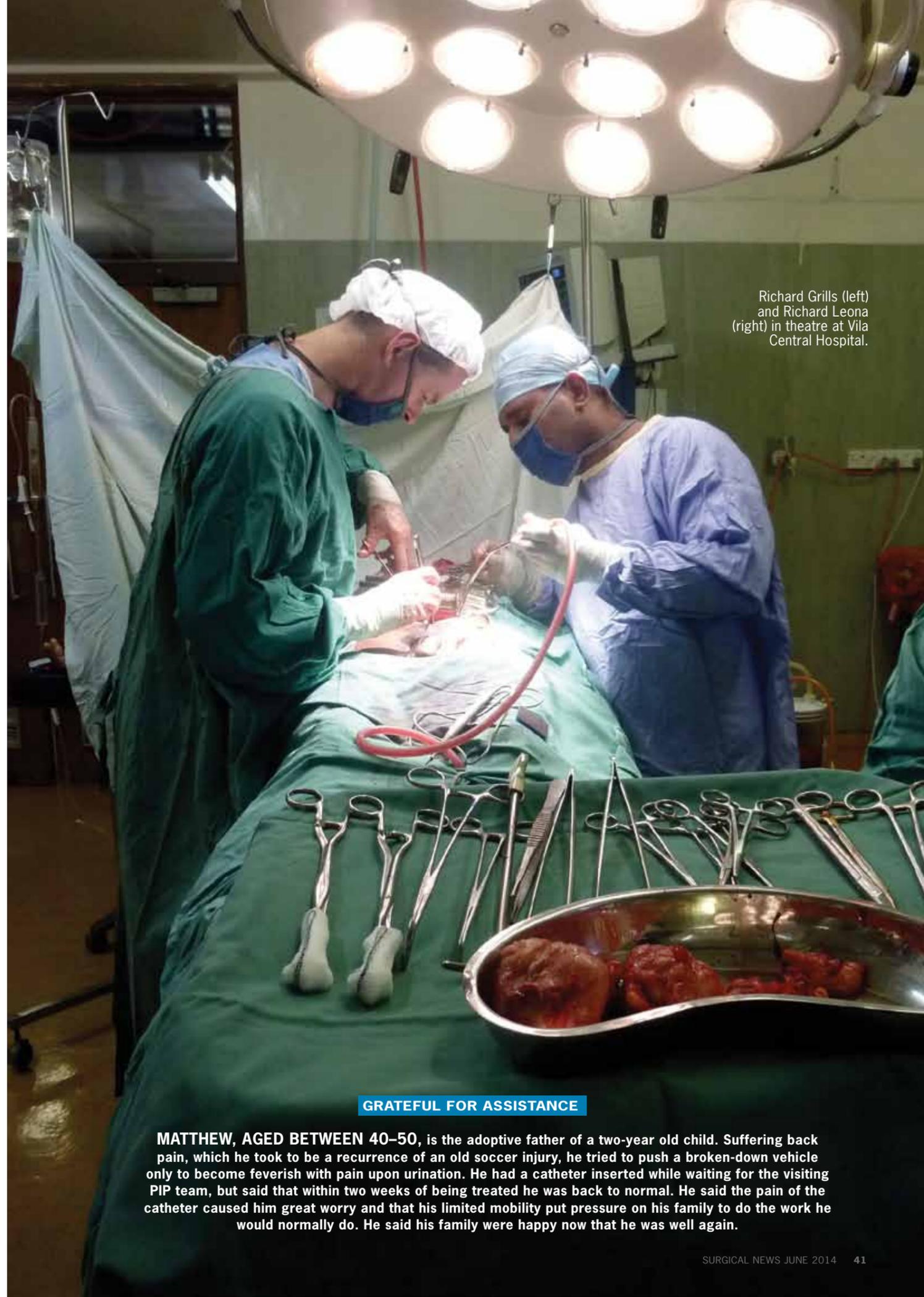
Dr Leona described the training provided to nurses, both in Geelong and by visiting nurses involved in PIP visits, as being a crucial component in the successful delivery of a urology service in Vanuatu.

"The nurses in Vila Central Hospital are now managing post-operative urology patients very well without too much supervision from me," he said.

"While visiting nurses taught them a lot, the training in Geelong has made a key difference because before that, there were a lot of problems with post-op care for patients who had TURP's simply because it was such a new procedure.

"But now they have really improved which is very important for me in my ability to provide the lower tract endoscopic urology service in Vanuatu.

"The nurses are also assisting me in theatre with confidence and there have been no problems so far. I haven't even been called at night for any post-op problems which is great." ▶



Richard Grills (left) and Richard Leona (right) in theatre at Vila Central Hospital.

GRATEFUL FOR ASSISTANCE

MATTHEW, AGED BETWEEN 40-50, is the adoptive father of a two-year old child. Suffering back pain, which he took to be a recurrence of an old soccer injury, he tried to push a broken-down vehicle only to become feverish with pain upon urination. He had a catheter inserted while waiting for the visiting PIP team, but said that within two weeks of being treated he was back to normal. He said the pain of the catheter caused him great worry and that his limited mobility put pressure on his family to do the work he would normally do. He said his family were happy now that he was well again.



Dr Leona using the new equipment.

Dr Leona described his time in Geelong as the best time of his training life overseas and thanked the College for awarding him the Rowan Nicks Scholarship.

He said he was looking forward to the next Urology PIP visit led by Mr Grills during which he hoped to refine his skills in upper tract endoscopic urological services such as percutaneous nephrolithomy (PCNL).

“The Rowan Nicks Scholarship was a golden opportunity for me to achieve the urological and surgical capacity to benefit Vanuatu,” Dr Leona said.

“I not only increased my surgical skills during my time in Geelong, I also learnt about different systems and approaches to problems which have helped shape me to be a medical leader in Vanuatu today.”

Mr Grills has participated in five PIP visits to Vanuatu with a sixth trip scheduled last month (May 2014).

He said that he had met Dr Leona during one of his early trips and when told of the Rowan Nicks Scholarship, he approached administrators from Geelong Hospital to find out if a urology training attachment could be arranged.

He praised the Geelong Hospital administrators, his fellow urological surgeons and nursing staff for the support offered to Dr Leona during his stay.

“To provide Dr Leona, and later the nursing team, with exposure to the cases that were needed to assist with their training required the support and co-operation of many departments within the hospital and that support was extraordinary,” Mr Grills said.

“All the urology consultants had to be involved to allow him to work on particular cases, rosters had to be changed, nursing staff gave of their time to train the visiting team in intra-operative and post-operative care of TURP patients and patient lists were altered to maximise the nurses’ exposure to TURP cases during their stay.

“Then, Hamilton Hospital generously donated all the equipment Richard would need upon his return which meant that we were able to provide an extremely valuable package including training Dr Leona, training the nursing staff and providing equipment.

“The Geelong Hospital Administration spent a great deal of time and effort to allow the visiting personnel to work and observe here which was wonderful to witness given that there was nothing in it for them apart from the altruist value.

“Budgets are tight, everyone has a full work load and just because developing

world surgery is a passion of mine, didn’t mean that everyone else had to get on board – but they did.”

Mr Grills said that now that Dr Leona could conduct TURP procedures, more complex cases would be chosen for treatment by the visiting PIP team in May, including patients requiring complex kidney stone surgery and those with urethral strictures

He said that the results of Dr Leona’s first year conducting TURP procedures were a testament to his skills, the training provided at Geelong Hospital and the on-going value of the Rowan Nicks Scholarships.

GRATEFUL FOR ASSISTANCE

PETER, AGED OVER 60, travelled for two days and one night from the island of Pentecost to Port Vila to be treated by the visiting PIP team. Seen by Dr Leona before the visit, Peter had blood in his urine and sufficient pain to limit his ability to farm, provide for his family and attend to some of his chiefly duties. While it took him some time to recover from the surgery, mainly due to co-morbidities, he can now work his subsistence farm once more, garden and attend his chiefly meetings, an important responsibility.

“Dr Leona is a paramount chief in Vanuatu, is very well known across the islands and knows how to get things done which is of great value when building medical systems in developing countries where making lasting change can sometimes be elusive,” Mr Grills said.

“When he speaks in Vanuatu, people listen and to have that standing in a health setting is a rare and very valuable commodity.

“The great value of the Rowan Nicks Scholarships rests in selecting the right people and then giving them access to networks and mentors who can help them build their own systems which links in perfectly with the Australian Government-funded Pacific Islands Program.

“We have a group of surgeons, anaesthetists and nurses in Geelong who feel a sense of commitment to Vanuatu and it would be ideal to get a second general surgeon involved in training to help Dr Leona build his country’s urological service.”

With Karen Murphy



FROM THE NATION’S CAPITAL

Progress on training and services

WENDELL NEILSON
CHAIR, ACT REGIONAL COMMITTEE

Hello all surgeons!

My name is Wendell Neilson and I’m a vascular surgeon and current chair of the regional committee for our College in the ACT.

I took office in July of last year as a two-year posting, having been on the committee for three years.

So what has been happening in Canberra and its surrounds?

I am very pleased to inform the surgical community that The Canberra Hospital has been made a primary allocation centre of surgical training as of next year (2015). We feel that the region as a whole will benefit from this decision. We feel that this will help us to nurture a stronger surgical base in the area.

Currently we only receive Trainees on secondment from Sydney, who rotate for six to twelve months. With The Canberra

Hospital being a primary allocation centre, and the centre for a training hub through our regional hospitals we can now train registrars from acceptance onto the program through to the completion of their Fellowship.

This will hopefully have flow on effects to the region’s hospitals as they will gain support through the allocation of registrars and the responsibility of training. The credit for this change should be given to Dr Frank Pisconeri and Prof Guan Chong.

At the October Council meeting I mentioned how we are hoping to move toward an Acute Surgical Service (as has been successfully implemented in some of the Sydney metro hospitals). I have met with the ACT Minister for Health about this concept, who was very receptive.

As a result we have had the appointment of a Cross Territory and Regional Liaison Officer who will assist in the logistics of setting up the necessary arrangements at the two public hospitals,

and the surrounding regional hospitals. These will be exciting times and should result in a more accessible urgent surgical service and a more efficient elective surgical process.

With this new acute surgical service we will also be able to push forward with the ACT Shock and Trauma Service, which currently is being stalled by the duplication of services at the two hospitals.

As with other States and Territories we are looking forward to our Annual Scientific Meeting to be held later in the year, and would encourage all Trainees to submit an abstract for review with the hope to present. This would also be a good opportunity to come and visit our nation’s capital.

I would also like to wish all the applicants for the SET program ‘Good Luck’, and maybe we will see you in the Canberra region as one of our Trainees next year

In the meantime, happy operating.