



SWB

Specialists Without Borders
meeting needs through medical education

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In Brief.



Chair's Report: September 2015

Specialists Without Borders has continued to grow as an organisation this year. The original aim almost 10 years ago was to provide the highest quality medical education in developing countries, which began with specialists surgical teaching in Rwanda. Teaching capabilities now range across other disciplines including radiology, neonatology, paediatrics, psychiatry, urology, anaesthetics and intensive care. The continued development of SWB, is due in no small part to the enthusiasm of the national executive, and a very committed and an enthusiastic Junior Doctor affiliate. As a not-for-profit organisation we are totally reliant on the commitment of people such as these, who share the vision to give something back. I would like to take this opportunity to personally thank them, and offer a special thanks to Megan Copeland, who has been our dedicated program director,

but has unfortunately had to resign her position. She has been a wonderful mainstay of the organisation, and without her we would certainly not be in the position of growth that we now find ourselves in.

It would also be remiss of me, not to thank all of those who provide us with financial support, especially the major sponsorship that comes through from Carlo Montagner and Bozena Zembrzusi at Specialised Therapeutics Australia.

The SWB teaching faculty has just returned from very successful postgraduate and undergraduate teaching seminars in Malawi and Zimbabwe. This year we were delighted to have a nursing education program associated with our medical education program which has been highly commended; 84 nurses turning up to our seminar in Zimbabwe which nearly overwhelmed our capabilities! We were also able to run a successful Junior Doctors program in Malawi, where some of the top junior doctors

in Australia, under the supervision of specialists, taught clinical methods to the Malawian medical students and clinical officers. The success of all these programs is a reflection of the quality of teaching and innovative teaching practices, which have been developed by the SWB executive in conjunction with Don Bramwell at Flinders University in South Australia.

Finally, my grateful thanks to all those who so willingly give their time to teach, the success of this organisation is due to your altruism and teaching skill. My grateful thanks also to the dedicated group that make up the national executive and the board of SWB, especially Associate Professor Kate Drummond who has led the group in my absence wonderfully. Special thanks also to the other executive members, Kathryn Edyvane, Brad Hockey, Antony Tobin, Professor Suren Krishnan, Professor Jegan Krishnan and Don Bramwell.

Dr Paul Anderson
Chairman

WHAT WE DO

[www.
specialistswithoutborders.org](http://www.specialistswithoutborders.org)

SWB is an Australia-based non-profit organisation working to enhance the sustainability of medical service provision in developing countries.

SWB co-ordinates an international group of volunteer medical specialists, delivering specialist-led training programs for medical personnel in partner countries. For more about our projects and our volunteer teams of specialists, please visit our website.

The Specialists Without Borders model for medical education

Specialists Without Borders believe that the best learning takes place when instructors match the delivery of theoretical information

with practical, interactive workshops to ensure that attendees are able to put their new knowledge into action. Our Education Programs are designed to reflect this philosophy and are planned through collaboration between SWB volunteer consultants and consultants based at the hospitals where SWB programs are held. General topics are delivered as introductory lectures by the

SWB team, which are followed by small group, interactive Structured Clinical Instruction Modules (SCIMs). A number of SCIMs on different topics are run simultaneously giving attendees the opportunity to take part in those which will best contribute to their area of specialty or interest.



Med Student profile Bridget Bishop

The Specialists Without Borders Teaching Seminars trip to Malawi and Zimbabwe this year was my first ever experience volunteering overseas! I truly saw this Seminar as a real opportunity to effect tangible change, because despite my keen interest in Global Health, I had been disillusioned by "voluntourism" previously. To me, the philosophy of this trip was something that I truly believe in, and quite like the saying goes "Give someone a fish, and you feed them for a day. Teach someone to fish, and you feed them for a lifetime!".

Fresh from attending the Australian Medical Students' Association Global Health Conference 2015 in Perth, I was so excited to join SWB in Malawi and Zimbabwe. As medical students, we were responsible for the logistics

of the seminars – from registering applicants and dividing them into groups, to coordinating the flow between sessions and helping serve lunch. To do this effectively, we had to be organised, have initiative, and work well as a team.



2015 SWB Medical Education Programs in Malawi and Zimbabwe

The SWB team, comprised of 21 volunteer consultants, nurses, junior doctors and medical students recently carried out medical education programs in Malawi and Zimbabwe. Consultation between the SWB team and in-country partners resulted in the planning and delivery of seminars and SCIMs in areas including anaesthesia, neurosurgery, general surgery, orthopaedics, paediatrics, cardiothoracic surgery and intensive care medicine. There was a strong emphasis on trauma and emergency management of the deteriorating patient, which is due, in part, to the high number of patients presenting with trauma induced injuries from motor vehicle accidents and assaults.

In Malawi the SWB team conducted programs at Kamuzu Central Hospital, Lilongwe and Queen Elizabeth Central Hospital, Blantyre.



Malawi, with a population of over 16 million, spends 8.3% of their GDP on health (Australia spends 9.4%). Malawians have average life expectancies of 58 and 61 years for males and females respectively. Major challenges faced by Malawi's health sector include HIV/AIDS, premature births and a lack of resources to meet basic health care. Significant health sector improvements have been made in line with the Millennium Development Goals. These improvements include

reductions in child and maternal mortality rates, HIV/AIDS related deaths and deaths attributed to tuberculosis.

In Zimbabwe, the SWB team conducted a program at Parirenyatwa General Hospital, Harare. Zimbabwe has a population of 14.15 million and life expectancies of 56 and 61 for males and females respectively. A significant proportion of disease burden comes from HIV, tuberculosis and malaria.

Know Your Executive Committee

Anthony Tobin

From an early age I wanted to do medicine and moved from country Victoria to the big smoke to study medicine at the University of Melbourne. Undergraduate medicine was fairly uninspiring for me, but after some self doubt about my choice I became an intern at St Vincent's Hospital Melbourne where I realised that I had the best job in the world!

I eschewed surgery for medicine early on and following basic physician training, went on to train in respiratory medicine. Unfortunately, on completion of my respiratory training I realised I had not yet found my niche in

medicine. At a loss as to how to proceed I returned to St Vincent's for a year of intensive care medicine. Fortunately for me intensive care medicine provided exactly what I was looking for – a broad spectrum of medical and surgical problems, satisfying patient and family interactions and a supportive collegiate working environment. I completed training in intensive care medicine in 1989.

Having completed the formal part of my training I did piece work in respiratory medicine, general medicine and intensive care for 12 months before it was time to see the world! I followed my wife

to Hong Kong where through lucky connections from the respiratory world, I got a job at a University Hospital working as an intensivist for 2 years. The final 6 months of our stay coincided with the SARS outbreak which was a valuable lesson in medicine, psychology, mask wearing and hand washing.

In more recent years I have become more involved in medical education, especially spending more time teaching medical students. It was through a meeting with one of these medical students, Kim Yeoh, that I was recruited to SWB and I took my first trip to Africa with SWB. Despite some nervousness about being a physician amongst surgeons, it was a great experience being part of the SWB team. It taught me a lot about teaching as well as being an opportunity to provide educational expertise to people that really appreciate and need it. I was subsequently hooked and join SWB on their yearly teaching trips whenever possible as well as being a member on the executive.



Nurse Midwife profile

Kate Thorson

Volunteering with SWB was an amazing experience I feel very fortunate to have taken part in. This was something I had never done before on a professional level and I thought the opportunity was something far too good to pass up!

Feedback from last year's Nursing Program included the need for obstetrics and neonatal to be covered, so I came on board as a Midwife. I have been nursing since 2005, have postgraduate diplomas in Midwifery and in Family, Child and Community and am a qualified Maternal and Child Health Nurse.

Leading up to departing for Africa our Nursing team had meetings to plan for our program. The four other nurses in the team had all been on the previous SWB trip so I was very lucky to be able to be guided by them on how the program would be run. Prior to departing, it was difficult to know what topics would be most relevant to the attendees. Facilities, drugs, equipment and access to services are incredibly limited. After the first day of teaching it became apparent that getting to theatre if you're bleeding could take anywhere from ten minutes to two days, there are no forceps, limited oxytocics, limited resus equipment for babies...the list goes on.

The midwifery topics covered included PPH, difficult deliveries and neonatal resus, which tied in well with the nursing program to combine with Basic Life Support and The Deteriorating Patient. Our teaching needed to be adaptable and appropriate so the nurses and midwives could return to their respective wards and work with what they had – not what we had back home in our hospitals.

Aside from mentoring students and new colleagues, I had never

taught in this teaching format so it was a steep learning curve for me. The amount of personal and professional growth I received from this trip was invaluable. Seeing the hospital wards was very confronting but also gave me a better understanding and appreciation of the conditions the nurses and midwives were dealing with on a daily basis. We were there to teach but I also learnt a great deal from the Malawian nurses.



A huge thank you to the Surgical Students Society of Melbourne

SWB was the fortunate recipient of a \$3,500 donation from SSSM earlier this year. The funds were raised through the sale of The Royal Melbourne Charity Calendar, which for 2015 was titled 'The Early Years'.

The calendar featured Royal Melbourne Hospital consultants channelling their younger selves.

For the past 5 years SSSM have produced entertaining and practical calendars to help you keep track of your schedule and generously donated the proceeds to SWB. SSSM will have another fantastic calendar for sale very soon. You will be able to find details on our website shortly.



You Can_Help.



Visit our website or join our Facebook group for more.

1. Join our Database of Volunteers

Please contact us if you are a medical specialist, nurse or allied health representative interested in volunteering your time to join us on a trip to a developing country to share your skills. We are always looking to expand our database of volunteer instructors.

2. Make a Donation

Whilst all the specialists involved in the training seminars fund their own flights and accommodation for workshops, general donations are invaluable to our work. Your donation can fund a developing country doctor to attend a seminar, or be used towards the provision of much-needed resources in developing country hospitals and clinics.

3. Become a Member

Help grow SWB by joining our membership, which is entirely free of charge. As a member you can provide input and feedback into the policies and direction of the organisation, attend SWB's Annual General Meetings and all members receive regular updates on our work.



**Specialists Without Borders
(SWB)**

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