

Korle Bu Teaching Hospital and Nsawam Government Hospital

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Plastic Surgery and Paediatrics in Ghana

I decided I wanted to do my elective in the two specialities of Plastic Surgery (specifically Burns) and Paediatrics due to my interest in the two fields. In addition of doing an elective in these specialities I had always wanted to do my elective in an African country to experience a healthcare system completely different to that in the United Kingdom. When researching areas of Africa that could provide the desired elective on the website electives.net. The Korle Bu Hospital Burns and Reconstructive Surgery Centre to do Plastic Surgery and the Nsawam Government Hospital to do paediatrics both in Ghana seemed to have provided valuable experiences to previous students on the websites previous student reports. Many of the reports also held strong recommendations that organising the elective with the company Elective Ghana ran by a Ghanaian called Sefa was in providing a stress free organisation of the elective and ensured a safe and fun time while you were out there.

Elective Ghana was able to organise with both hospitals the elective required and provided the necessary forms to fill out and returned the confirmation letters. The company also organised the accommodation that was very close to the hospitals. The costs of elective Ghana was \$180, 4 weeks of elective at Korle Bu was \$500, 2 weeks at Nsawam was \$80, accommodation over the 6 weeks was \$400. The things I had to organise was my visa (£60) and flights £500. I would advise organising your visa as early as possible, I would say at least 3 weeks in advance to allow time for your passport to return in time and the possibility of having to resend the application.

After a delay in my flight from Manchester which nearly caused me to miss my connection flight, I arrived in Accra the capital of Ghana and was picked up and taken to my accommodation by Sefa from elective Ghana and introduced to the other students and taken into the city to have dinner. I would advise arriving a couple of days before you are due to start the elective to allow you to settle in to new culture and get your bearings of the area.

My first 4 weeks of elective was with the plastic surgery team led by the first Ghanaian Plastic Surgeon at the Korle Bu Teaching Hospital in the National Reconstructive Surgery and Burns centre. While there I spent my time between clinics, theatre, ward rounds, presentations and with the on-call team. In the clinics I was able to develop my history and examinational skills and experienced communications between clinicians and patients of very different backgrounds to the United Kingdom. During the clinic I saw patients with post-burn contractures, keloid scars, haemangiomas, rhabdomyosarcoma, hand trauma and various other Plastic Surgical problems. The highlight of being in clinic was seeing a case of a man who had been working in a recycling plant who suffered a complete hand amputation after getting his hand stuck in one of the machines. The team had managed to replant his hand and in clinic he was able to pick a toothpick off a table and put it into a sponge with the replanted hand.

While doing on call I saw various referrals and admissions including burns, road traffic accidents, ulcers and traumatic lacerations. I was able to see the staff's resourcefulness with a patient who had suffered a facial laceration from a road traffic accident and was able to pay the costs of using the plastic surgery theatre so the team used the treatment room to perform the suturing so the patient was able to have the wound closed. This however does bring into question when does cutting costs for the patient to be able to have the required treatment put safety on the line. An ethical dilemma that made me realise the benefits of having a health care system where the patients treatment is not determined by their financial status.

In theatres, I was able to develop surgical skills and observe complex surgical cases. Cases included skin grafts from burns, flap operations and excisions of skin lesions. The most interesting case was a post electrical burn nasal reconstruction using a forehead flap and cartilage from the ears for the reconstruction. Spending time on the wards I was able to see many heartbraking cases of burns such as an acid attack on a young girl, and young infants suffering burns over 80 per cent of their body from falling into fires.

For the final 2 weeks I was with the paediatric team at Nsawam Government Hospital, a rural hospital with only 5 doctors in the entire hospital. Here I spent my time on ward rounds, clinics and at caesarean sections. I was able to see tropical diseases not seen during my time in England such as malaria. I was able to experience the difference in education of patients in the rural places and the detriment this has. During a preterm/ low birth weight clinic a mother thought that she had to only feed her premature and Very low birth weight baby only twice a day in her first week of life. Furthermore I also saw 2 burn cases of infants that had a lack of home safety and parent awareness.

This elective has been a very valuable experience for me, seeing lots of cases I would not see in England and an understanding of working in a different health care system. I experenced an easy organisational process of my elective from academic staff