

Arrival was on 3rd June 2014 and the visit started with the Bethune Round Table conference with the following highlights

- Comparing notes with colleagues from low resource countries through well presented and relevant papers
- Well chosen guest speakers who were tackling pertinent issues in surgical practice in low resource countries.
- Networking and forming links with other colleagues to further our academic and clinical skills
- Re-igniting previous links e.g. with the Egyptian Society of Laparoscopic Surgeons through Dr Mohammed Youssef
- Trauma training course at the end of the conference
- Well organised social activities especially the day trip to Niagara Falls, the welcome dinner, dinner with Dr Vic Neufeld

Observership at Juravinski hospital

This started on 10th June and was under the supervision of Dr Michael Marcaccio who heads the hepatobiliary unit at the hospital and carried out the first laparoscopic cholecystectomy at this hospital. The highlights of this period were

- Opportunity to observe several hepatic resections, laparoscopic cholecystectomies, colorectal surgeries, ERCPs
- Presented at the surgical chair rounds and attended them weekly
- Attended hepatobiliary rounds, residents rounds, and was able to meet with the surgical residents.
- Networked and met surgeons willing to participate in the collaboration between McMaster and Makerere in hepatobiliary and colorectal surgery

Laparoscopic surgery bootcamp 2nd - 4th July

This was carried out at St Joseph's Hospital for the dry skills and at Hamilton General for the wet skills lab. It was well organized by Ms. Arlene Morgan and the facilitators Dr Cadeddu, Dr Hong, Dr Gmora and Dr Amin were very helpful. The skills taught were

- Intracorporeal suture techniques
- bowel resection and anastomosis
- low anterior resection
- use of haemostats
- proper use of harmonic scalpels and endoscopic stapling devices
- endoscopic mucosal resection

All the above were done in collaboration with pharmaceutical companies mainly Ethicon, Covidien, Pentax and Olympus.

Partnership meetings

Several meetings were held with various surgeons working in the Juravinski Hospital, McMaster Children's Hospital, Hamilton General hospital and St Joseph's Hospital. This resulted in surgeons expressing interest in collaborating with Makerere in areas of research, teaching some tutorials, teleconferencing, consultations, surgical skills transfer, library resources, training of fellows/residents .

- Juravinski hospital - Dr Michael Marcaccio, Dr Stephen Kelly, Dr Marko Simunavic, Dr Pablo Serrano, Dr Shawn Forbes
- Hamilton General - Dr Kahnamoui, Dr Susan Reid, Dr Brad Petrisor
- McMaster - Dr Brian Cameron, Dr Karen Bailey
- Niagara hospital - Dr Peter Kagoma
- St. Joseph's Hospital - Dr Peter Lovrics, Dr N Amin, Dr Finley, Dr Anvari

A meeting was held with partners in the International Outreach Programme during which fellows from Uganda were able to share their experiences and the challenges of the training program which included

- Getting officially registered is easier for a resident as opposed to a fellow and could take a year, Canadian visa application is lengthy
- Adjusting to the winter
- Acquiring skills that would be applicable back home, Lack of financial support from the Ugandan institutions

Minimal Access Surgery Bootcamp July 2nd - 4th

The bootcamp involved both dry and wet skills lab sessions held at St Joseph's Hospital and at the Hamilton General Hospital respectively. Sessions consisted of didactic lectures, surgery videos and hands on skills sessions using models and pigs. The facilitators were Dr Cadeddu, Dr Gmora, Dr Hong and Dr Amin. There were presentations by Covidien, Ethicon, Olympus and Pentax who provided equipment with which training skills were offered. The skills demonstrated and practiced were

- intracorporeal 2 hand suturing and knot tying techniques
- laparoscopic small bowel anastomosis using Echelon endoscopic bowel stapler
- endoscopic submucosal injection
- haemostasis techniques with sealants and haemostats.
- laparoscopic gastric by pass bariatric surgery, low anterior resection
- proper use of harmonic scalpel

Each of the 6 participants was able to get one -on-one interactions with the facilitators and the overall organization of the workshop done by Ms Arlene Morgan was excellent. Linkages were also made with the pharmaceutical companies to help in providing equipment for skills training e.g endoscopy tower, laparoscopic surgery consumables in a low income setting.

Hospitality

I was welcomed and made to feel at home through several dinners and social outings and I thank all the following for welcoming me into their homes: Dr Brian and Pat Cameron; Dr Michael and Sandy Marcaccio, and their children James, Andrew and Alexandra; Dr Peter and Sandra Kagoma and daughter Imma; Dr Tim O'Shea and his family; Dr Vic Neufeld and his wife

Accommodation

The accommodation during my observership was at the Rose Arden B & B which was comfortable and very conveniently located within walking distance to the Juravinski hospital. It was also very easy to move around Hamilton through the organized and easy to use bus transport services.

Challenges

- High cost of day-to-day expenses for meals and transport
- Inability to be allowed to carry out any patient care or assist in surgeries

Overall experience

This was a great opportunity to meet colleagues from Canada and other low income countries to interact and form links which hopefully will continue to strengthen the collaboration between the departments of surgery of McMaster and Makerere University College of Health Sciences. I have learnt that

- A good teacher allows freedom of expression and open lines of communication between him and his students as exemplified by all the surgeons I met with their residents.
- In spite of our varied levels of resources and working environment, inherently we face similar challenges and similar goals and that is to give the best care available for our patients and to make sure that our successors continue to do so and even better than we have done.

I believe that a seed has been planted at McMaster for Makerere and vice versa and it is upto us to nurture this collaboration for it to bear fruit for the future. Finally I have been deeply moved and humbled by the generosity and welcoming nature of all the surgeons and their teams both at work and in their homes and look forward to having them visit Makerere in the future.

Key areas to start collaboration

- Minimally Invasive surgery skills curriculum for dry and wet skills lab
- Assist in curriculum development for the future 4 year General Surgery program
- Identification and linkages of preceptors in McMaster to key people in Makerere/Mulago in the following areas - breast surgery, colorectal surgery, hepatobiliary surgery, surgical education, minimal access surgery, surgical skills lab so as to identify their specific needs and collaborations in these areas
- Identify trainees among surgeons and support staff in laparoscopic surgery i.e. nurses, biomed technicians to consider training in a year or so.
- Identify tutorials/ lectures which could be provided by faculty from McMaster within the Makerere surgical residents' program
- Plan for a laparoscopic skills workshop
- Identify research collaborations and enhance online journal access.
- Consider starting surgical rounds within each unit on a monthly basis for complicated cases which could be co-ordinated with McMaster through teleconferencing.
- Development of minimal access surgery curriculum/ training sessions.
- Incorporate laparoscopic skills sessions in the postgraduate curriculum.