

# Volunteer's Report for Trip to Uganda: 21st September 2009 to 4th October 2009

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Five persons travelled to Uganda from the UK. These were:

Vikram Devaraj (VSD) Consultant plastic and reconstructive surgeon

Jo James (JJ) Consultant anaesthetist

Neil Tarn (NT) Plaster technician

Alex Devaraj (AD) Vikram's son / runner

Martin Leeson (ML) Jo's Partner

VSD, NT and AD arrived in Kampala on 21st September

VSD commenced a 'Hand Course' on the Tuesday which ran for 4 days and was a great success

JJ and ML arrived on 23rd September.

JJ spent time in theatre doing some cases, teaching the anaesthetic officers and speaking to various staff in CoRSU about matters relevant in her role as trustee of Interface Uganda

Whilst in Kampala the party stayed with the Hodges.

On Sunday 27th September the party travelled to Kumi in the CoRSU bus driven by Fred, a CoRSU driver.

Additional members were Robin, a Canadian Plastic surgeon working at CoRSU, and Dr Martin, a Ugandan Plastic surgery trainee.

It was envisaged that patients would be selected on the Monday and four full days operating would take place Tuesday to Friday on two operating tables, with VSD operating on one and Robin on the other. John Baptiste (JB) the anaesthetic officer, was available to assist all week.

The party visited the hospital on the Sunday and were able to see several patients informally who had collected there.

The formal clinic was held on the Monday and all the 'kit' was moved into the theatre and set up.

Operating began on the Tuesday. There was plenty of work to fill both tables for the full four days. Surgery began fairly promptly at 0900 and continued with a short break for lunch. It was not possible to extend the day beyond 1700 as the nurses had to finish then.

The team stayed at the 'Greentops' Hotel in Kumi town. Fred drove the bus to and from the hotel to the hospital.

The party finished their work on the Friday evening and returned to Kampala on the Sunday, stopping over in Jinja on the Saturday night.

Areas to be commended:

- Robin worked very hard and contributed greatly to the week's work
- The theatre staff were most welcoming and went out of their way to help the team. Lunch was plentiful and delicious
- JB was particularly helpful, not only providing excellent anaesthesia but collecting patients and helping ensure the lists ran smoothly
- Neil Tarn provided an excellent and invaluable service in and out of theatre providing splints and casts of various types, improving the outcome for the patients
- AD and ML provided useful roles as general 'runners', list co-ordinators, photographers and numerous other 'jobs'
- Three medical students from Brighton were very helpful as they were familiar with the wards and the running of the hospital. They came to theatre every day and took advantage of the varying teaching opportunities
- The team were most impressed by the work done by the consultant orthopaedic surgeon who acted as director of the hospital, and other surgeons, who undertook complex work in a very difficult environment. He is clearly proud of his achievements and rightly so
- Fred was a first-rate driver who was prompt, safe, helpful and very polite

Areas which could be improved:

- The standard of nursing care in theatre was relatively good; recovery care was probably the weakest area
- The post-operative care on the wards leaves a lot to be desired. There were real problems getting the nurses to give adequate analgesia, antibiotics and simple wound and dressing care, all which would have a deleterious effect of outcome for the patients. This situation was not a 'one-off' but is apparently a long standing problem
- Lack of post-operative physiotherapy and rehabilitation is obviously a problem which may affect long term outcome
- 'Greentops' was adequate but there was frequent cessation of any water supply whatsoever, usually in the morning when it was needed most. Future teams might want to consider staying at the 'Kumi Hotel' which was slightly dearer but much more comfortable with better facilities all round

Areas for discussion/reflection:

- There was much discussion about the poor postoperative care. VSD and JJ felt that some sort of arrangement for following up patients in the long term would be useful as the results of surgery may influence the initial choice of procedure. It was acknowledged that this could be difficult to arrange both logistically and financially but even a small number of follow-ups might prove useful
- NT's contribution was felt by all to be invaluable, and it was felt that a training programme for this craft, using Plaster of Paris and other inexpensive materials, would be very useful
- There was some confusion over who was paying for what. Suggestion is that a suitable proforma could be designed about how specific items with a trip should be funded – ie by the individuals, the charity or by volunteer fund raising – 'a kitty' held by one key member?
- There were a number of issues which arose following JJ's discussions at CoRSU which will be raised at the next AGM
- It appears to policy that CoRSU drivers are used on the trips and this was agreed to be a wise and safe option
- There should be consideration for a report to be produced by a key member of the team at the end of each trip

In conclusion it was a most useful and successful trip enjoyed by all. Members of the team would especially like to thank Andrew, Sarah and their family for their unwavering hospitality and kindness.

Funding for the Trip:

All five UK members self funding.

Dr Martin and Robin funded by CoRSU

Bus and driver funded by CoRSU

Smile train donated \$1000 to VD's work

NT raised £700 towards the trip on a sponsored cycle trip, for which the charity is very grateful

Jo James

October 2009