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Original article

An academic year in Sub-Saharan Africa: The clinical experience of a British Urology Registrar

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KEYWORDS

Urology;
Surgical training;
Reconstruction;
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Clinical experience;
Networking

Abstract

Introduction: ‘Out-of-programme year for clinical experience’ (OOP-E) is an option available to all the urology registrars in the United Kingdom (UK) as part of the specialty’s training curriculum, in recognition of the holistic benefit of such a year to a surgeon’s in-training professional life.

Objectives: Being interested in reconstructive urology, I organised an academic year as a registered volunteer resident in two of Sub-Saharan Africa’s (SSA) main academic hospitals, known for their heavy workload in the particular field.

Subjects and methods: The personal logbook and diary of operations and clinical activities kept over this period of twelve calendar months was retrospectively studied in order to assess the overall benefit of this exercise.

Results: Apart from highlighting the significant breadth and operative load of surgical exposure offered in SSA training schemes, this summarised report also gives a comprehensive account of all aspects of a surgeon’s working life, during this overseas clinical attachment.

Conclusions: Working in different countries as a surgeon improves one’s perception of the diseases’ spectra of manifestation and management, while enabling participation to surgical activities nowadays seldom in the West. The holistic benefit of such a year, to a surgeon’s in-training professional life cannot be over-emphasised; both on the grounds of experiencing different surgical realities and building upon professional skills, but also in cultivating an international network.

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Introduction

In Great Britain, ‘Out-Of-Programme year for clinical Experience’ (OOP-E) is a professional opportunity, integrated in the Urology Training Programme and is open to all the senior registrars of the specialty. Being interested in reconstructive urology, I organised an

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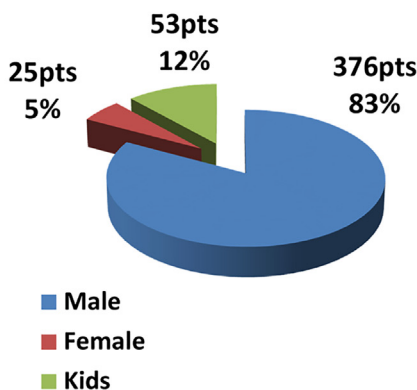
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Tanzania KCMC

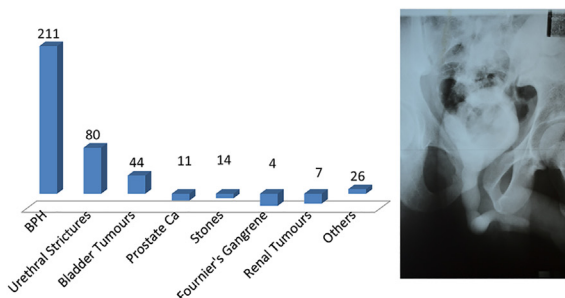
Inpatient Demographics



Urology Resident Team



KCMC- Adult Pathologies



KCMC- Paediatric Pathologies

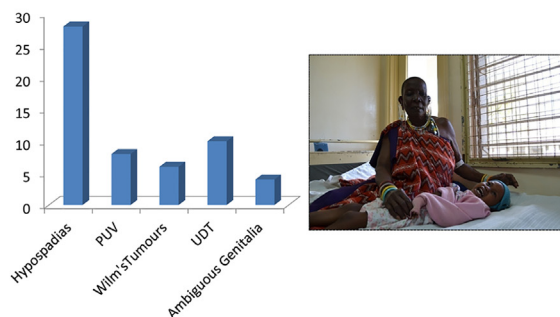


Figure 1 Kilimanjaro Christian Medical Centre, Moshi, Tanzania graphs.

academic year as a registered volunteer resident in two of the main academic hospitals in Sub-Saharan Africa (SSA). Both establishments are well known for their heavy workload in the particular field. I decided to split this academic year in two parts. I spent six months in Tanzania at Kilimanjaro Christian Medical Centre (KCMC), in Moshi, with a focus on urethroplasties and six months in Senegal at Hospital General De Grand Yoff (HOGGY), in Dakar, focusing on fistulae repairs.

Preparation

My application, for an academic year dedicated to accumulation of clinical experience, once approved by the regional programme director for training in Urology, had finally to be authorised by the Postgraduate Dean.

This approval allowed the subsequent registration with the medical bodies in the two countries of interest, namely the Tanzanian Medical Council (TMC) and the Senegalese Medical Body (Ordre des

Medecines de Senegal). Liaising with the British General Medical Council (GMC) was extremely important for organising leave for a year and for re-joining the British practice upon return.

Multiple appointments at the Tropical Medicine Clinic were required to ensure all vaccinations and prophylactic measures were taken, as twelve months in SSA as a healthcare worker differ to those offered for shorter visits.

Tanzania

The urology department in Moshi is a unit offering fifty inpatient adult beds and ten paediatric beds. The urology team is made up of three consultant surgeons and many Tanzanian and other SSA-East trainees. Two interconnected operating theatres were running on a daily basis, one of them equipped primarily for endoscopic operations. Outpatient clinics were also run daily.

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