

ADAM JONES' TRIP TO KISIIZI HOSPITAL, UGANDA

**RE: Report on UROLINK sponsored trip to Kisiizi Hospital
2nd to 6th June 2014**

I would like to thank again Urolink for its very generous support of my trip. Kisiizi Hospital was started just over 50 years in the South West tip of Uganda. The hospital developed on that site because it had a reliable hydroelectric powered mini generator from the waterfall very close to the site. This has now been improved to also provide electricity to the wider local area.

The hospital has a catchment area of approximately 400,000 people and has approximately 250 beds. There are two qualified general surgeons, one obstetric and gynaecology surgeon and two physicians. The hospital staff are complemented by several medical officers. It is partly funded by charitable donations from abroad and from within Uganda and also patients technically have to pay for their treatment. Some of the local population belong to an insurance scheme which will pay for emergency care and 50% of elective surgical costs but a number of patients have their costs met directly by the hospital's own charitable funds.

This was my fifth visit to Kisiizi Hospital for a week. The trips have been designed to be predominantly TURP camps with other elective surgery put on hold, but I do get involved with other emergency surgical cases. Since my last Urolink supported visit to Kisiizi in 2011, a lot of improvements have occurred. There is a new medical director, Dr Ian Spillman who is a retired UK paediatrician who spent a few junior doctor years at Kisiizi in the past. He has introduced better governance systems, uptake of WHO checklists and arranged a joint project with Johns Hopkins and 5 other pan African hospitals on surgical safety. He has increased to nearly universal uptake the very low cost insurance scheme for the local community to help cover treatment at the hospital. A "laying in wait" ward has been built for heavily pregnant women who live a long way from the hospital and a second general surgeon has been appointed. There is definitely a general sense that the hospital is on the up.

During this trip, 25 TURPs/optical urethrotomies were performed and the emphasis was on training the new second surgeon, Dr Robert. His surgical training which was more recent than the senior surgeon, Dr Okumu did include some endoscopic urology so his progress was especially impressive. Both the two surgeons are now competent at BNIs and small TURPs. Dr Okumu has been made deputy medical director and in time when Dr Spillman retires he will take over. He will be very popular and competent in that post, so bringing Dr Robert up to speed is very useful. Dr Okumu came to the UK last year and we hosted him at the Royal Berkshire Hospital for 2 weeks before he went on to spend 2 further weeks in Chester (where Kisiizi also have links). It was a real pleasure to have him with us.

The urology equipment that Kisiizi has is a mishmash of old Storz equipment and before this trip I thought we were going to struggle because some of it is beyond repair and I contacted Suzi Venn about possibly loaning some from Urolink. But in the end we managed to “acquire some from dubious sources –less said about that the better” and I didn’t need to borrow anything. My next visit is already planned for next year and I am taking the family so that should be an eye-opener for them!

Once again can I thank Urolink for its very generous support.

Best Wishes.

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Consultant Urologist