

Australian ENT Overseas Outreach Activities 2004 – 2010

A. Royal Australasian College of Surgeons International Projects

All are managed by RACS with funding from AusAID (Australian Government agency) on a contract basis.

1. Pacific Islands Project (PIP)

Starting in 1995 and successfully completing 2 two-year and 1 three-year contract. Negotiations are currently under way for a further contract but visits are presently continuing pending negotiations.

Originally providing services to **Solomon Islands, Vanuatu, Fiji, Tonga, Samoa, Federated States of Micronesia, Marshall Islands, Cook Islands, Kiribati** and **Tuvalu** . A short separate program to **Nauru** has been subsumed by PIP, which now services all these 11 countries, whose populations range from about 10,000 to about a million.

From 2004 to 2010 there were, to all these countries under the PIP program:

42 Visits

129 Team members involved
(Otolaryngologists, anaesthetists, nurses, audiologists)

7179 Consultations

1428 Operations

2. Australian –Timor Leste program of Assistance for Specialist Services (ATLASS)

ENT visits to Timor Leste (East Timor) began a few years after independence but lapsed due to civil unrest and lack of requests from local health authorities. Hence the small number of visits during the reporting period. However, there has been resurgence in interest in receiving ENT visits and it has been suggested that we ultimately supply 7 visits a year (1 to the capital, Dili and 6 to the provinces). There was one visit last year, the first for 5 years and two are scheduled for June 2010.

2004 to 2010:

3 Visits (2 in 2004,1 in 2010)

11 Team members

556 Consultations

52 Operations

3. Papua New Guinea (PNG)

PNG is one of our oldest endeavours with earlier programs going back many years. These figures are a little misleading as the main efforts have been concentrated in the capital Port Moresby helping to train and examine local doctors for several years, to the point where PNG is now quite well supplied with locally trained ENT surgeons, although they are very short of equipment, in the provinces especially.

These figures refer to visits in the field (provinces) 2004 to 2010:

6 visits

10 Team members

14 Consultations (refers to only one visit-others not stated)

40 Operations

4. Nusa Tenggara Timur (NTT) - Island of Flores, Republic of Indonesia

Only one visit made in 2006 in association with a General Surgical Team.

1 Visit

6 Team Members

112 Consultations

21 Operations

Management and Philosophy of the RACS Projects

- All team members are unpaid volunteers, receiving air travel, accommodation and meals
- Teams comprise one or more Otolaryngologists, anaesthetists, one or more nurses and usually (now) an audiologist.
- Visits usually one or two weeks' duration. Most countries get one visit per year although Timor Leste is set to receive multiple visits.
- Countries receive visits only at the request of the country's health authorities. ENT is consistently in the top three surgical services requested.
- Involvement of the local health workers and skills transfer at all levels is regarded as of utmost importance in the program.

Training of In-Country Personnel

Training and skills transfer is regarded as of fundamental importance.

It is unlikely that the smaller nations will have their own Otolaryngologists in the foreseeable future. PNG has produced several through the University department at Port Moresby, with considerable input from Australian (mainly Queensland) Otolaryngologists who have taught and examined.

There is currently a Solomon Islander doctor training in ENT in PNG who hopefully will return afterwards. Previously a young SI General surgeon was given some ENT training both in-country and in a short Australian attachment and proved very competent. Unfortunately he left during the civil unrest and although now returned, is unable to work for health reasons.

An East Timor doctor has been put forward for training in the speciality but this is yet to commence.

In view of the above we believe that the backbone of a country's Otolaryngology program must be the ENT Nurse (sometimes called the Ear Nurse and analogous to the Eye nurses used to deliver services in many countries).

These nurses carry out simple treatments (notably ear toilets) do simple audiograms, are trained to fit hearing aids (although often lacking resources) and triage patients for specialist team visits.

This has been outstandingly successful in Solomon Islands and Vanuatu where there have been active nurse practitioners for over 15 years. Unfortunately we have failed to identify suitable individuals to date in the other Pacific Island countries.

One of our members carries out a regular training program for ENT nurses in Vanuatu open to nurses from other countries.

We have suggested to the Timor Leste health authorities that a program of regular Australian ENT visits must be accompanied by a program to train ENT nurses.

Audiology, Deaf Teaching and Hearing Aids

These have lagged far behind the provision of surgical services. Such hearing aids and rehabilitation as existed were provided ad hoc by organisations such as Red Cross. Australian Audiologists have become interested in providing Outreach services in recent years and several individuals have become very committed to the programs. Audiologists now accompany most teams and take a variety of (usually) donor hearing aids. The RACS has also become aware of the importance of this and is happy to fund audiologists.

An audiologist was funded to visit Timor Leste last year, preceding the surgical team, to carry out screening of school age children and was able to show the Timor Leste health authorities that a significant proportion of school age children in the district had hearing loss.

In 2008 the RACS sponsored an Australian audiologist to live in Honiara, Solomon Islands, for 2 months to teach the local disabilities workers and nurses testing, rehabilitation and hearing aid fitting. She will return with the team this July and a volunteer (self funded) Speech Pathologist will also accompany this team

B. Non RACS Supported Activities

Kevin Holwell of Albury has been running a program of ENT service and teaching to Vietnam and Cambodia for nearly twenty years, with the help of other Australian otolaryngologists. These visits do not receive government or RACS funding although it is understood there has been some support from an overseas mission. Largely this has been self-funded by Kevin, however.

Figures for this program are not available.

It is believed there have been some sporadic visits to other countries in the past (eg Nepal by the author some years ago, India by other individuals) but there are no figures or other details for these.

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