

Primary trauma care in Myanmar

The College is helping to train instructors to allow local doctors to run future courses in primary trauma care

In the week before last year's Conjoint Annual Scientific Congress (CASC) held in Hong Kong, South East Asia was hit by the devastating Cyclone Nargis. Myanmar bore the brunt of the storm when the cyclone first made landfall there in early May. There was a lesser impact in the other Southeast Asian nations, with severe flooding and landslides across ten districts in Sri Lanka.

Now known to be the nation's worst natural disaster in its recorded history, Cyclone Nargis demolished whole towns and villages in Myanmar, killing over 140,000 people and leaving hundreds of thousands injured, homeless or without livelihoods, while 75 per cent of health facilities in the affected areas were destroyed or severely damaged, together with around 4,000 schools; an impact comparable to the Indian Ocean Tsunami in Indonesia in 2004.¹

As surgeons gathered in Hong Kong from around Australasia and the world for the Hong Kong CASC, many approached Burmese-born and Hong Kong-based surgeon Mr James Kong to determine if, and what assistance could be offered to the devastated nation. After much discussion it was found that local and international relief efforts were providing immediate assistance but that sustainable engagement between the College and local medical groups could be of great value.

Following consultation with the Myanmar Medical Association (MMA), the national organisation which provides continuing medical education, Mr Kong advised the College that the most pressing medical need as listed by the MMA was for help in assisting Myan-

mar establish a comprehensive trauma system including widespread education for first responders and clinicians.

Now the first phase of that engagement has been completed following a five day Primary Trauma Care (PTC) Course funded by the College and designed and delivered not only to teach primary trauma care skills but to train instructors to allow local doctors to run future courses.

From 28 March to 1 of April this year, an international team of eight instructors from Australia, Hong Kong and East Timor supervised and led the PTC program at the MMA headquarters near Kandawgyi Lake. The international team comprised Melbourne emergency physicians Dr Georgina Phillips, Course Director, and Dr Antony Chenhall, Dr Eric Vreede, an anaesthetist currently working in East Timor, and from Hong Kong Professor Sydney Chung, surgeon, Dr Anthony Ho, anaesthetist/intensivist, Dr Tsun-Woon Lee, anaesthetist, Dr Tai-Wai Wong, emergency physician, Dr James Kong, surgeon.

The five-day program was divided into an initial two-day participant course followed by a one-day instructor course which was in turn followed by two days in which those doctors who had undertaken the instructor course taught new participants under the supervision of the international faculty. In particular, the course focused on methods of triage, resuscitation, the physical movement of patients to limit further injury and the design of patient flow systems.

In her report to the College following the visit, Dr Phillips wrote that while much international aid and attention had been focussed on tackling key diseases in Myanmar such as malaria, tuberculosis and HIV/AIDS, attention to trauma had been lacking even though trauma was now emerging as a key cause of mortality and morbidity.

"The Primary Trauma Care course was developed with the support of the World Health Organisation to train health care providers to prioritise and treat severely injured patients quickly and systematically, thereby reducing death and disability," Dr Phillips wrote.

"Overseen by a not-for profit Foundation, the PTC course is run at no charge and is designed specifically for resource-poor environments; emphasising flexibility and quality early trauma care within local limitations.

"With the emphasis on a basic systematic approach and the longer term aim of devolving responsibility for co-ordinating and teaching courses to local clinicians, the PTC program was immediately attractive to the senior Myanmar doctors."

Dr Phillips reported that almost all of the teaching equipment was brought in by the visiting team with the underlying principle of the PTC course of not depleting the host country of limited resources. Large items such as airway mannequins were borrowed from hospital facilities in Hong Kong and Melbourne while the College funded the purchase of one adult airway training mannequin which was donated to the MMA as a gesture of goodwill and to help in the provision of future courses.

Smaller items and consumables such as oxygen masks, intravenous cannulae and cervical collars were left behind with the MMA for re-use in future courses. Dr Phillips reported that the program had proven very successful even though the course instructors had not met or worked together before arriving in Myanmar.

"It is a testament to the experience, professionalism and enthusiasm of all the instructors that the planning and implementation of the PTC program was smooth and uncomplicated. All instructors had extensive PTC experience in China, Vietnam and the Pacific region and in particular had rich expertise in teaching through adult learning principles and skills training," she wrote.

"Discussions within the team on the day before the PTC program began, were robust without rancour and added to the energy and success of the course and while there were some minor language issues, there are now plans to translate all of the PTC teaching material into Burmese for future courses."

In her report, Dr Phillips recommended that a second course be planned to occur before the end of this year with a further two

“The success of this visit is not only a testament to the team of instructors but to the great enthusiasm of the local doctors.”

courses in 2010 and 2011 to involve a mix of visiting and local instructors and to be held in a mix of major urban centres. She said future participant courses should be restricted to 20 participants, that the Myanmar clinicians be encouraged to adapt the PTC course to local environments taking into account local equipment issues and local language requirements and that secure funding be found.

Burmese-born surgeon Mr James Kong – who had originally been tasked by the College to liaise with the MMA to find out how the College could best help Myanmar in the wake of Cyclone Nargis - said the initial course had been a great success. He has urged the College to help source funding to continue the education program until Myanmar had enough trained trainers to continue the work themselves.

“(It is clear) that an ongoing program should be established. This program should consist of visiting international faculty who will supervise the local partners with the primary aim to establish a core of experienced local PTC instructors with the enthusiasm, skills and the leadership ability to establish a nationwide PTC Myanmar program within the coming two and a half years,” he said.

The College’s Director of External Affairs, Ms Daliah Moss, accompanied the international team during the March visit to assist with logistics and administration and as a representative of the College. She said the success of the organisation of the PTC course was due largely to James Kong. The initial PTC course visit cost \$20,000 which the College had agreed to fund out of monies overseen by the International Committee in accordance with its principles of building professional networks, capacity and improving the skills of doctors in the Asia-Pacific region.

“Given the success of this inaugural course, the College will now approach AusAid and other donors for funding for the on-going

training of local Primary Trauma Care instructors. The success of this visit is not only a testament to the team of instructors but to the great enthusiasm of the local doctors. We thought language could be a significant issue given that all the courses were presented in English but we did not need translation,” Ms Moss said.

“All the instructors simply made a point of speaking and enunciating clearly and limiting the use of jargon and this, along with the fact that they were presenting to highly skilled doctors, meant that ideas were rapidly absorbed.

“Their enthusiasm was a great highlight of the visit. Everything worked like clockwork and the local doctors showed great interest in gaining input from Australian, New Zealand and Asian doctors and surgeons.”

References

1. Post-Nargis Joint Assessment;” Tripartite Core Group; July 2008; UN, ASEAN, Government of Union of Myanmar

-
1. Daliah Moss leading the PTC class in aerobics after a strenuous morning and substantial lunch
 2. Dr TW Wong & Dr James Kong both from HK, TW demonstrating neck immobilisation on a drowsy 'accident victim';
 3. Professor Sydney Chung, College volunteer extra-ordinaire providing anatomical landmarks for the local candidates
 4. Dr Eric Vreede, Consultant Chief of Anesthesia, Dilli (centre) observing the Myanmar candidates practicing airway management skills on the Adult Airway Trainer -donated by the College to the Myanmar Medical Association. The Paediatric Airway Trainer (further down on the bed) has been brought on loan from Melbourne by Dr Antony Chenhall, one of the other visiting facilitators;
 5. Dr Antony Chenhall, Emergency Physician, Melbourne assisting the newly qualified local PTC instructor at the Intra-venous Access Management station using locally purchased chicken thighs to practice intra-osseous access
 6. Professor Kyaw Myint Naing, President, Myanmar Medical Association presenting the honorary membership of MMA to Dr Anthony Ho, Anesthetist, Hong Kong for his contribution to the PTC Myanmar 2009 Program

