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Opposite page: Watching John Dunbar as he performs surgery; Drs Viet and Nhan looking pleased having survived a scenic flight with John Dunbar; Drs Viet and Nhan, assisted by John Dunbar in the operating theatre at the old Rehabilitation Hospital.
Below: Qui Nhon. Drs Viet and Nhan looking at x-rays with Allan Panting.



Helping old friends

An ongoing bond between New Zealand and Vietnam is assisting in building skills

A cross-cultural bond forged during the tumult of the Vietnam War between local people and New Zealand medical teams sent in to help provide medical and surgical services in the midst of the violence has, decades later, resulted in a recent visit to New Zealand by two Vietnamese surgeons.

Earlier this year, Orthopaedic surgeons Dr Viet Vo Van and Dr Nhan Phan Tran Dai spent six weeks attending theatre and consultations in cities and towns across the country including Auckland, Nelson and Dunedin.

The visit by the two Vietnamese surgeons accompanied by an interpreter was supported and funded by a Surgeons International Award through the RACS Foundation for Surgery. The RACS Foundation for Surgery has agreed to fund a planned visit later in 2011 for two NZ orthopaedic surgeons to the Quy Nhon Rehabilitation and Orthopaedic Centre.

The visit was co-ordinated through the New Zealand Viet Nam Health Trust (NZVNHT), an organisation established during the 1990s to assist the re-building of health care in Binh Dinh province, Central Vietnam.

Since 1990, the Trust which until recently had been funded predominantly by NZAID,

has provided equipment, support and surgical team visits to the regional town of Quy Nhon and Bong Son, where the NZ medical teams had been stationed during the war.

The team visits have covered a range of specialties including paediatrics, medicine, orthopaedics and trauma, obstetrics, cervical cancer screening, urology, general surgery, anaesthetics, nursing programs including infection control, laboratory training and the establishment of a Blood Bank service.

With the Quy Nhon Rehabilitation and Orthopaedic Centre now in the process of being rebuilt, the recent six-week exchange program was designed to give the surgeons exposure not only to complex orthopaedic procedures but also to the organisational structure and professional inter-relationships of modern western health facilities.

The trip came at the request of the Director of the Rehabilitation Centre, Dr Cuong Phan Canh, who visited NZ in 2007 and wanted the same experience for members of his surgical team.

From February to April, the two visiting surgeons were hosted and supervised by Mr John Dunbar in Dunedin, Mr Allan Panting in

Nelson, and Mr David Morris in Auckland and Middlemore Hospitals.

According to a report written by the surgeons following the visit, the procedures of most interest included joint replacement surgery, anterior cruciate ligament reconstruction, arthroscopy, fracture and trauma management, particularly involving the use of intra-operative X-ray imaging, and the role of physiotherapy in rehabilitation.

As one of the few hospitals outside Ho Chi Minh City and Hanoi that provides a paediatric orthopaedic service, other than for acute trauma, the surgeons from Quy Nhon also spent time at Auckland's Starship Children's Hospital investigating Ponseti casting in the treatment of club foot, the management of developmental dysplasia of the hip, and femoral osteotomy for children with cerebral palsy.

Mr Dunbar, an orthopaedic surgeon with a paediatric subspecialty, who has visited Quy Nhon regularly in recent years to teach and operate, said the trip was of particular value given that the Rehabilitation and Orthopaedic Centre was now at the threshold of a major advance in its ability to provide care to millions of people in the provinces of central Vietnam.

He said that until now, surgeons at the Centre had been limited in what they could do by many factors including the lack of adequately sterile operating theatres, the lack of surgical equipment and intra-operative radiology and by the limitations placed upon them and allied health professionals in their ability to gain global exposure.

“The standard of surgery in Vietnam is pretty good and the surgeons are very capable and resourceful, but they are limited by equipment and knowledge and in many cases have been trained by surgeons who have also had limited exposure to the developments taking place around the world,” Mr Dunbar said.

“The rebuilding of the hospital gives them a great opportunity to overcome some of these problems particularly after seeing how our hospital systems work in terms of patient flow, in-patient and out-patient care, the use of diagnostic tools and post-operative care.

“That was one of the reasons that we chose to host them in Dunedin and Nelson because the hospitals here are similar in scale.

“That to me was the most significant aspect of this visit, not just transferring skills and knowledge, but giving the surgeons the opportunity to see what's possible, to give them a vision and a pathway to follow in advancing the care of patients in Vietnam.”

Mr Dunbar will visit the hospital when it is fully operational next year.

He praised the efforts of Mr David Morris in setting up the Health Trust and described

it as unique, in that it had not grown through government initiatives, but simply through the empathy felt by doctors for the suffering of the people of Vietnam in the now widely discredited geo-political conflict.

“There are still some older people in Quy Nhon who hold New Zealanders in high regard for the assistance offered them during the war, particularly because the New Zealand teams treated all victims equally, including members of the Viet Cong,” he said.

“I think a number of people in the western countries involved in that conflict feel a degree of guilt about what happened to the people of Vietnam and it is a privilege to be in a position to help them now.”

Orthopaedic skills vital

Mr Allan Panting who, along with his wife Sunny, hosted the surgeons for two weeks in Nelson in March, said that while the standard of health care in Vietnam still lagged behind that offered in western countries, the strengthening economy and greater openness to the outside world were now spurring rapid advances.

He said that while Vietnam was listed as the second most dangerous place to drive after China, the work of the new Quy Nhon Rehabilitation and Orthopaedic Centre was of great importance.

“One of the really positive aspects of this visit was the opportunity for the surgeons to see how our hospitals work while they are

in the process of designing their own new hospital,” he said.

“Because they work in a regional centre they have more autonomy than perhaps do those surgeons in the major metropolitan centres in Vietnam so they will be able to make changes which could then spark further change in terms of post-operative care, for example, and patient flow.

“Acknowledging that Nelson and Vietnamese hospitals differ greatly in the facilities provided and the style of practice, we considered it important that our visitors had the opportunity for wide exposure to the environment as well as orthopaedic surgery.

“Arrangements were made for the visitors to spend an unrestricted amount of time in the theatre sterilisation unit, recovery, intensive care and the emergency department where staff made them welcome and spent time discussing how each of these units functioned most effectively to support patient care.”

In the report written upon completion of the visit, Dr Viet and Dr Nhan described the experience as being of great value.

“We hope to translate most of what we have learnt in New Zealand into our practice in the clinical setting of the new hospital for the benefits of the people in central Vietnam,” they wrote.

“When the new hospital goes into good operation and new equipment is available, we wish to gradually start surgeries such as head of femur, femur osteotomy, ACL reconstruction using hamstring tendon graft, external fixation and hip and knee replacements.

“This was a very valuable time because we were fortunate to experience and learn in modern and well-organised hospitals with experienced and passionate surgeons. We appreciate so much their enthusiasm in teaching us about standard, sophisticated and advanced orthopaedic techniques and procedures.

“We also greatly appreciated the opportunity to experience beautiful nature, interesting culture and to meet with the friendly people of New Zealand.”

With Karen Murphy