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The inaugural visit of Chain of Hope representatives to Kampala: The beginning of a fruitful collaboration

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Currently there is huge inequality in healthcare delivery for, and research into, cardiovascular disease in children, which is a leading cause of death and disability worldwide. Attempts at addressing these problems requires the concerted, collaborative effort of all interested stakeholders [1].

In July of 2011, representatives from Chain of Hope¹ visited the Uganda Heart Institute in collaboration with the US charity, Gift of Life International², with additional support from Mending Kids International. The Chain of Hope team was made up of medical staff from Aarhus University Hospital and a multi-disciplinary team of doctors and nurses from hospitals in the UK, including the Royal Brompton and Great Ormond Street Hospitals. The medical team included Dr. Cleopatra Patterson, who just finished her training in London and was sponsored by Chain of Hope, before returning to her homeland in Jamaica, to take part in the newly established Jamacian Children's Heart Centre (another collaborative project).

The Uganda Heart Institute (UHI)³, is a semi-autonomous institution within the Mulago Hospital Complex. It serves as a centre for the provision of curative and preventive cardiovascular and thoracic medical services. It was jointly established in 1988 by four bodies: The Ministry of Health; Mulago National Referral and Teaching Hospital; Makerere University Medical School, and Uganda Heart Foundation (a non-governmental organization composed of well wishers like Rotarians).

During the visit, the surgical list was formulated by the local team, who took into consideration medical priorities as well as training purposes. A total of ten patients underwent surgical intervention: four VSD closures, two ASDs, one bi-directional Glenn, one resection of the sub-aortic membrane, one TOF correction (infundibular resection and VSD closure). The final case involved a rheumatic patient, a little girl suffering from severe aortic regurgitation and mild mitral regurgitation resulting from the unchecked development of rheumatic fever into rheumatic heart disease. The ages of the patients ranged from one year to 15. The children were coming from across Uganda, from all walks of life (Fig. 1).

The primary purpose of all Chain of Hope overseas visits is to cultivate skills-transfer and knowledge-exchange programmes over a sustained period of time. This inaugural mission was the first in a line of cardiac training visits that are planned for the future, in conjunction with Gift of Life International. The UHI professional staff were matched to the visiting team so as to enable adequate transfer of skills. In the future, Chain of Hope representatives are committed to training an intensivist to manage the Pediatric Intensive Care unit at Mulago Hospital for the safe care of the children post-operatively.

The Makerere University post-grad students rotating in cardiology had the opportunity to witness complex open-heart surgery and understand the principles of cardiopulmonary bypass and its physiology. Teachings were also given in trans-oesophageal echocardiography by Dr. Gavin Wright.

¹<http://www.chainofhope.org>.

²<http://www.giftoflifeinternational.org>.

³<http://www.mulago.or.ug/heartinst.php>.

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Figure. 1 Showing a small selection of the patients treated at the Uganda Heart Institute during the visit by Chain of Hope and Gift of Life International.

The use of telemedicine meant that the doctors and nurses could additionally view the procedures in the conference room outside the operating theatre, enhancing the pedagogical environment.

The UK doctors will continue to work in partnership with Gift of Life International and with the Ugandan teams for the care of these children. They hope to build on this partnership for the future development of local services in Kampala. The final aim is to render self-sustained cardiac services, performed by the local team over the long-term future.

References

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