GHANA

One month clinical rotation at Komfo Anokye Teaching Hospital (KATH) in Kumasi, Ghana

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Ghana: “Africa for Beginners”

- Official language: English
- Recognized national languages: 19
- Size: slightly larger than Kansas (92,000mi vs 82,000)
- Government: presidential constitutional republic
- First African country to gain independence (from Britain in 1957)
- Religion: 77% Christian, 16% Muslim, 3% traditional
- Life expectancy: 62.74 yrs
KATH: the KUMC of Ghana

Goals: compare the facilities, teaching methods, and patient care between KUMC and KATH in surgical, emergency, and outpatient settings

- Anesthesia: OR, ICU, and clinic
- Trauma/orthopedics: OR and clinic
- Emergency: mid- and high-level acuity units
Facilities

- 1,000-bed hospital with inpatient, outpatient, surgical, emergency, and subspecialty services
- Lots of modern equipment, though much was broken
- Only paper charts
- Large range in OR quality between different buildings of the hospital
- 3 ED units: low, medium, and high acuity
- Clinic: generally one room with 2 physicians, patients all arrived in the morning and waited outside to be called
- Wards: ~40 beds per ward, minimal partitions
- Minimal, if any, contact precautions

Cotton-candy hallways

Outpatient imaging centers intermixed with small street shops
Teaching methods

- Medical students observed rounds but did not participate in care
- Weekly lectures and case-based learning led by residents
- More "pimping" based teaching
- Residents had more autonomy
- Path to become a doc:
  - 6 years of medical school
  - 1-2 years as a house officer (act as interns)
  - Residency

Waiting for an anesthesia morning report case presentation
Patient care: barriers

- Few providers outside of Accra (capital) and Kumasi
- Patients must pay up-front, even for emergency treatment
- Much care not covered by national health insurance
- Low doctor/patient ratio; less time for patient education
- Facility limitations (ex. broken equipment)
- Inadequate organization, allocation of resources
- Political, hospital corruption

Discussing patient images with the residents
Patient care: lessons learned

- Renewed appreciation for KUMC nursing staff
  I was often the first to notice new onset respiratory distress, patients falling out of bed, even a child coding.

- Slipping through the cracks
  Patient care often significantly delayed due to lack of physician staffing, lack of finances, equipment malfunction, etc. A head-injury trauma patient was at KATH for 5 days without physician treatment.

- Finding a work-life balance
  Americans value productivity and long hours, Ghanaians prioritize maintaining community at work and leaving time for family.

- Importance of informed consent
  All surgery patients go to anesthesia clinic for pre-op evaluation
  One patient with a complicated thoracic infection was scheduled for surgery that day, she didn’t know what she was there for. This is not uncommon.
Voices of KATH: interviews with residents

- Upper-level resistance to change
  - Foreign students/residents often suggest changes that residents have been fighting to implement unsuccessfully
  - What we perceive as callousness in many situations is a learned coping mechanism

- One resident steals drugs for her patients who can’t afford them

- Efficiency is not as prioritized as in the USA, the hospital work environment is very friendly

- Pain management is not a priority, there is a cultural component to this

Watching a tunnel catheter placement performed without sedation
Culture

- Lake Bosumtui
- Bonwire weaving village
- Batik workshop
- Kumasi Market (largest outdoor market in West Africa)
- Cape Coast, former slave trading post
- Kakum national park with canopy walk
- Public transport with en-route preacher/herbalist
- Local food (fufu, banku, red red)
- Home stay
Impact on a future global health career

- Confirmed future goals to practice sustainable global and public health medicine
- Emphasized need for teaching, collaboration, and exchange opportunities during training
- Change must come from within

“Respect your doctor”

Thank you, Aidoo family!