

# An Anaesthetic Conference in Liberia



## AAGBI IRC Committee Funding Report

Compiled by Dr Zoë Smith  
On behalf of ACTS  
(Anaesthetic Conference Teams)

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## The ACTS Team

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## Monrovia, Liberia

The Republic of Liberia, is a country in West Africa bordered by Sierra Leone to its west, Guinea to its north and Côte d'Ivoire to its east. It has a population of 4.2 million and was subjected to 23 years of ruthless civil war leaving a fragile healthcare system.

In October, Dr Keith Thomson assembled a team of anaesthetists and midwives who travelled to the Liberian capital Monrovia to run a 3-day joint anaesthetic and midwifery conference. We arrived in Monrovia, via Freetown in Sierra Leone with an entourage of mannequins, dummies and medical training equipment and were greeted by 30-degree heat despite it only being early morning.

The conference was run at the JFK Hospital in Monrovia, and the team took the opportunity to explore the facilities and talk to medical, anaesthetic and midwifery staff prior to the conference start. We also visited the facilities at Redemption Hospital, which featured in the BBC 2 documentary "Toughest place to be a midwife".

ACTS members have found that this information gathering prior to the start of the conference to be critical to success. It enables teaching to be pitched at the correct level, in a manner that will be most useful to the recipients.





“Thank you in very special way for planning, organizing and conducting the past National Anesthesia and Midwifery Conferences in Monrovia. I graded it the best of all our conferences.”

J. Garrison Kerwillain, President of LANA (Liberian Anesthetic Nurse Association)

On Day One of the conference, we registered 36 nurse anaesthetists, 52 midwives, 2 obstetricians, 10 medical students and a large number of student midwives. Those nurse anaesthetists who did not already own a copy of the *Obstetric Anaesthesia for Developing Countries* book received one at registration. The first day focused on obstetric anaesthesia and was a multidisciplinary day comprising a series of lectures, workshops and animated role-plays. Dr Billy Johnson, a Liberian Obstetrician and JFK Chief Medical Officer gave an interesting talk on the management of maternal haemorrhage. A simulated station with varying quantities of blood, in which delegates had to guess the blood loss was very

well received. Delegates were extremely receptive to teaching and eager to learn. At the end of Day One, a quiz brought proceedings to a close and delegates were given the option of writing an essay on their experiences as an anaesthetist, and the chance to win a prize at the end of the conference. After this, the midwives separated and continued a separate midwifery led conference.

Day Two largely comprised critical care and trauma teaching and workshops, ranging from early warning scoring systems to the initial management of sepsis and major trauma. After a slight delay due to power failure the conference got underway.

## “Saving lives through safer surgery”



We were joined by two members from the “Mothers of Africa” team who had been working in Phebe Hospital. During our conference, they were able to collect further follow-up data regarding courses run in Phebe, and also on the Lifebox oximeters that had been distributed previously.





## Final thoughts...

The final day of the conference covered airway lectures and workshops including some paediatrics, and moved to Lifebox education and the WHO checklist in the afternoon. Some anaesthetists were already using the WHO checklist in their hospitals, which was encouraging. A further 12 Lifeboxes were donated to Liberian recipients at the end of the training. The essays were read and judged and the content made for some fascinating and very sad reading reflecting the resource-poor and unsupported settings in which most nurse anaesthetists work.

Once again, this conference was well received and the feedback was universally very good. During our stay we also had the opportunity to discuss with the CEO and the Minister of Health, the possibility of a more longstanding partnership between Wessex Deanery trainees and JFK Hospital. It is hoped that over time we will be able to establish a link for UK trainees to travel to Liberia on a rolling basis to work on education and anaesthetic training (for nurses, residents and students) for periods of up to 3 months. There is certainly a great need and a huge amount of enthusiasm for such an initiative.

Thanks go to the AAGBI IRC for their valuable support for this project, Dr Keith Thomson for inspiring so many of us, the ACTS team for all their time and hard work, and to the Liberian people for showing us such hospitality and eagerness to learn.



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