

Surgical conditions in Africa are given low priority despite causing death and disability

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Two surgeons are calling on the international health community to recognize that surgical conditions account for a huge burden of disease in the developing world, and that the human right to health must include access to essential surgical care.

Writing in this week's PLoS Medicine, Doruk Ozgediz (University of California San Francisco, USA) and Robert Riviello (Harvard University, Boston, USA), say that surgical conditions account for 11% of the total global burden of disease, and they disproportionately affect the world's rural poor in low income countries.

The burden is particularly enormous in sub-Saharan Africa, due to high rates of injuries, obstetric complications, cancers, birth defects, and problems affecting the mother or child around the time of birth (perinatal conditions). In men aged 15–44 years, for example, the predominant economically active segment of the population, only HIV takes more lives than road traffic crashes, and for every death from a road crash, dozens are left with temporary or permanent disabilities.

Despite this burden, say the authors, Africa faces an acute shortage of surgically trained health professionals. "The development of human resources for surgical services and perioperative care has been neglected," they say, "and innovative strategies addressing clinician migration and capacity building are needed."

In addition, while there has been an explosion of donor aid to support

infectious disease control, there has been little donor support to improve basic, essential surgical services, even though providing such services is an extremely cost-effective way to improve public health.

Borrowing from successful approaches of neglected tropical disease initiatives, Ozgediz and Riviello propose a variety of mechanisms that could stimulate efforts to improve delivery of surgical care in Africa, including donation programs and public-private partnerships aimed at providing basic surgical supplies. "Existing surgical supply donation programs have been primarily led by humanitarian groups and are difficult to sustain," they say, and private–public partnerships could be an innovative solution to develop mass-produced “generic” surgical toolkits.

The authors also call for trauma training programs, and the development of organized local and national systems for dealing with trauma. Such trauma systems can reduce medically preventable deaths from injuries by 50%, yet most African countries have no organized trauma system.

"Patients with untreated surgical conditions," say the authors "as well as the local clinicians struggling to care for them, must gain greater recognition by the global public health community."

Source: Public Library of Science

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