



THE GAMBIA SURGICAL TEAM

The Gambia Update

Nov. 2016

Medicos en Accion



We had another busy and successful trip to The Gambia in November 2016 with a great team.

We continued our work with the local staff to build a National Thyroid Clinic at Serekunda Hospital so that all patients in The Gambia with thyroid disease can be seen, assessed, treated and followed in one site. Thyroid disease is common in The Gambia and has been inconsistently managed in the past. By having one clinic that all patients attend, we hope to help the local health providers to be able to better manage these patients. We are working with the hospital and the Ministry of Health and Social Welfare to try to have better access to standardized

thyroid function tests and thyroid medications as well as to have a database to follow all of these patients. This also allows interaction between various visiting teams from different countries and appropriate referral for surgical management where needed. We have been able to make good progress but there is still work to do, particularly to assure consistent and accurate testing and access to affordable medications.

In addition to the patient management in the thyroid clinic, we also performed 14 thyroid operations for large thyroid masses, many of which were overactive. These patients often have many ongoing symptoms that are difficult to control with medications. There is also a lot of stigma attached to these large neck masses. Culturally, it is sometimes felt that they are the result of evil spirits or punishment for something bad the person has done. Removing these masses can not only improve their lives physically but also socially and emotionally.

One man had not been able to get work in his profession as a driver. He also had been forbidden to attend family gatherings in his village. Since his large goitre has been removed he has returned to normal and is very happy. He is working and is now accepted again in his village.

This young girl had a very large and hyperactive goitre. It not only was causing trouble with being teased at school, the hyperfunctioning nature of it was bad for her physical well-being and normal mental and physical growth. She has had an excellent outcome, is very happy and is developing into a very lovely young lady.



This man had a very large goitre (the largest we operated on this year) that was impairing him physically and socially. Dr. Fatou Samba, a young Gambian surgeon that has trained in Canada and continues to work in Newfoundland joined our team again and was able to help out in his surgery and that of all of the patients this year.



Dr. Marlowe Haskins returned with us this year and with some of our other team members helped establish an endoscopy clinic at one of the local hospitals. He trained one of the local physicians and the local staff in endoscopy skills as well as the proper cleaning and maintenance of the equipment. This re-establishes this service in the country that has only intermittently been available.



We did some further pediatric surgical cases this year. We also saw a number of previous pediatric cases back in follow-up. It is so rewarding to see these young children doing so well, thriving and able to get back to a normal life - playing, having friends, going to school and the ability to have a normal life.

One young boy had been diagnosed with Hodgkins lymphoma. This is a serious cancer that is uniformly fatal if untreated. With appropriate chemotherapy, the cure rate is over 95%. However, this is not available in The Gambia and too expensive for them to afford. We were able to bring chemotherapy and arrange for it to be appropriately given to him with excellent supervision and care. When we came back with the chemotherapy in November 2015, he had lost 25% of his body weight and we were concerned he might be too unwell for the chemotherapy. Fortunately he thrived and finished it successfully. He has now grown over 20cm and put on over 10kg!





These children had significant birth defects of the bowel. One had no anus and the other had Hirschsprungs disease (a motility problem of the colon). Both of these things cause fatal obstruction of the bowel in infants that can be relieved by colostomy (where the bowel ends on the abdomen). However, colostomy care and appliances are largely not available in The Gambia and these children become social outcasts, are often abandoned by family, don't have friends, can't play with other children and don't go to school. Through some complex surgeries, we are able to restore a more normal functioning bowel and get rid of their colostomies. They can then return to a normal childhood and life. We have done 10 of these cases over the last several years and most of the children have done very well. Two of the children from our last team trip in 2015 returned this year for follow-up and are doing excellent.



Thank you again for all of your support that allows us to do this life changing care and to help build medical and surgical care in The Gambia.

