Report Facilitators Meeting

Joint WHO and Department of Health (DoH) Meeting on WHO Integrated Management for Emergency and Essential Surgical Care

Cairo, Egypt
29 - 30 September 2009
Background

Egypt is located in North Africa, bordering the Mediterranean Sea, between the Libyan Arab Jamahiriya, Sudan, Israel and the Gaza strip. The total area of the country is 1,001,450 km². The country is predominantly desert, and the climate has hot, dry summers with moderate winters. Egypt is the second most populous country in the WHO Eastern Mediterranean Region after Pakistan. Its population at end of 2003 was 70,6 million. Egypt is a lower middle-income country. Its economy relies mainly on four sources of income: tourism, remittances from Egyptians working abroad, revenues from the Suez Canal and oil\(^1\).

Age-standardized mortality rate for injuries in 2002 was 35 per 100,000, the infant mortality rate for both sexes in 2006 was 29 and maternal mortality ratio per 100,000 live births in 2005 was 130\(^2\).

Objectives

- Organize a Joint WHO-MoH (Ministry of Health) and Global Academy for Tropical Health (GATH) meeting on Emergency and Essential Surgical Care (EESC).
- Review of WHO EESC-linked algorithms in the Integrated Health Technology Package (iHTP) for resource planning and costing of a health care system.
- Introduce and demonstrate the applicability of the WHO Integrated Management for Emergency and Essential Surgical Care (IMEESC) toolkit for teaching, training and reference material, jointly with iHTP resource planning methodology.

Discussion

Joint WHO and MoH Facilitators Meeting

GATH was established to highlight the need for capacity building in emergency and surgical care and research in developing countries. The issue of Rural Health care delivery in Egypt was important to address for a strong health system to avoid unnecessary death and disability as a result of injuries and pregnancy related complications. Capacity building for resource planning and adapting a generic package to specific country needs was needed.

\(^1\) http://www.who.int/countryfocus/cooperation_strategy/ccs_egy_en.pdf, 2006

The iHTP can be adapted and a training workshops would be necessary to train MoH and appointed officials in using the tool. Concrete application of iHTP in Egypt was debated to study resource needs for introducing simple surgical procedures at first referral health facilities. Currently, surgical interventions are being associated with major operating rooms at hospital level only. Whereas life-saving and disability-preventive surgical interventions, such as resuscitation, bleeding and airway control, chest tube in fractures, cuts and wounds, pus abscess drainage, unsafe abortion, male circumcision are performed by non specialist doctors, nurses and paramedics (frontline health providers) in health centres. The WHO IMEESC toolkit is a comprehensive package for Primary Health Care and a teaching tool for medical and nursing schools. Participants (surgery and anesthesia experts) reviewed the surgery iHTP algorithms which were developed for resource planning purposes. Any incongruences in the algorithms were modified during the plenary session. Additional comments were noted and modifications will be incorporated by a iHTP consultant.

**Recommendations and Action Plan**

- Support with IMEESC training and research tools.
- Organization of the GATH congress in 2010.
- Draft project document for resource needs study in Egypt in collaboration with WHO country and the regional office.
- iHTP training session in Egypt.
- The WHO manual Surgical Care at the District Hospital can be made available at low cost printed version for countries of EMRO (Eastern Mediterranean Regional Office).

**Conclusions**

Members of WHO, MoH and GATH were brought together for a facilitators meeting on surgical and intensive care, anaesthesia and obstetrics in low and middle income countries. The IMEESC-toolkit was considered as an important tool for integration in planning and training of GATH-programmes, along with the iHTP resource planning technology.

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