



VISIT TO LAUTOKA HOSPITAL MAY 2008

JOHN TAWFIK (REGISTRAR)

I did not know quite what to expect when I went on my first Orthopaedic Outreach trip. The destination was Lautoka Hospital in Fiji and I accompanied Dr Stuart Myers, hand surgeon and team from Sydney.

I had spoken to many colleagues who had been on outreach trips and discovered that they all enjoyed their trips. They were all overwhelmed by the complexity and variety of the pathology, which they encountered and all had cherished the experience.

I arrived to Lautoka's Waterfront Hotel on Saturday and quickly settled in. Lautoka is not really a tourist area but rather quite an industrial area. Saturday night was the night of the Super 14 Final featuring the NSW Waratahs so I walked to the main street and watched the final with the locals in a local bar. It was a great night and it was my first insight into just how polite and friendly Fijian people are.

Monday was my first day of work. I accompanied the local Orthopaedic Team on their morning ward round which I found a real eye opener to say the least. I quickly realised how lucky we are in Australia in terms of resources and funding for healthcare. Over the next five days the clinics included patients with spinal cord injuries not receiving the specialised care you would expect in a spinal unit back home, elderly patients with fractured necks of femur who had been waiting over two weeks for their surgery. The delay was due to a shortage of anaesthetic medications, overbooked theatre times and one of the patients subsequently died.

A patient who had heard there was a visiting team from Australia, a 50 year old working man, snuck into the clinic hopeful that his arthritic hip secondary to avascular necrosis could be helped. Back home he would be a prime candidate for a hip replacement but joint replacements are not performed in Fiji and so I was unable to offer him the help he needed. I started to think this was going to be a long week. Between the ward round and this patient I was starting to feel helpless and way out of my league.

Clinics were long and extremely busy finishing about 6.30pm with some patients having waited since 8am but not a single one complained.

I was able to assist one patient with subacromial impingement and shoulder pain with a local anaesthetic and cortisone injection, which assisted him greatly after about 15 minutes, and he kept thanking me and shaking my hand. I felt less helpless and a little happier. This emotional rollercoaster not only continued for the rest of the clinic but pretty much my whole week.

My hotel phone rang in the early hours of Tuesday morning. It was Dr Myers saying there was an open fracture, dislocation of a wrist and fracture dislocation of the hip in a young patient and the local orthopaedic team had requested our help. He told me to meet him out the front in 5 minutes. I lay in bed for a second trying to come to terms with the fact that I have ended up unexpectedly on call... It feels the same wherever you are.

We had to perform an open reduction and fixation of a femoral head fracture which had a large fragment displaced from the femoral head and rotated inside the acetabulum blocking the reduction. I had to learn to think about fixation in terms of the devices and instruments available (no headless bone screws, no Image Intensifier picture despite the presence of an Image Intensifier machine).

The remainder of the week continued with long busy clinics, operating teaching and learning.

Friday consisted of a single operative hand case. It was excision of Chromomycosis (Don't worry I had no idea what it was either) and Skin grafting to the forearm. I was to then help with a trauma case in a young motor vehicle accident victim. He arrested in the theatre just before his operation. The rest of the operations for the day were cancelled. I accompanied the consultant as he spoke to the family.

I would just like to emphasise just how rewarding an experience this has been for me and wish to thank Stuart, Emilie, David, Veronique and Jennie for having me and I would also like to thank Stryker for their financial assistance via the Stryker Registrar Fund.