

Overseas Anaesthesia Fund update



In 2006, the AAGBI started the Overseas Anaesthesia Fund (OAF), a charitable account which is part of our Foundation. This charity is probably unique as it allows individuals and organisations to donate directly to assist projects supporting anaesthetists in the developing world. From small beginnings, we are starting to see strong support for initiatives on behalf of our overseas colleagues.

Within the first few years we concentrated on literature distribution in sub-Saharan Africa and have supplied anaesthesia textbooks and other learning materials to anaesthesia providers in over 14 countries including Zambia, Malawi, Botswana, Ghana, Uganda, Nigeria, Kenya and also substantial numbers in Sudan, Ethiopia, Tanzania and the Gambia. We have received many letters of gratitude from these anaesthesia providers most of whom reiterate that they did not own a textbook until we began our program of support. An identified need in these countries is a specific Obstetric Handbook for developing countries. AAGBI Council member Paul Clyburn has agreed to edit a 170- page handbook which will be published by Oxford University Press. OAF will contribute to its development, while Dr Clyburn has already raised £5000 from the Obstetric Anaesthetists Association (OAA) towards

the project and the World Federation of Societies of Anaesthesia (WFSA) will also contribute towards the costs.

The OAF was approached by Dr Bruce McCormick who edits "*Update in Anaesthesia*", a free educational journal paid for by WFSA (with occasional support from other organisations, including AAGBI) aimed at anaesthetists in developing countries. This journal is translated into French, Spanish, Russian and Chinese and appears in both paper and electronic format. A frequent request is for basic science articles and Bruce hopes to put together a 200 page edition of *Update* with an extensive basic science content. It is anticipated that the articles will be translated and form a useful free library for anaesthesia trainees everywhere. The AAGBI, through OAF, has agreed to become a partner in this project, which we feel will improve the literature available to those who cannot afford to pay for it.

One of the main deficiencies in many developing countries is lack of medical anaesthetists. It is important for the development of anaesthesia services in any country that there are locally-trained doctors practising anaesthesia, providing leadership, and training other staff. OAF has sponsored two Ugandan anaesthetic trainees, Dr Daniel Apunyo in Mbarara

and Dr Arthur Kwizera in Kampala, and has recently agreed to sponsor a third. These doctors will undertake a three-year Masters programme in anaesthesia. If they can be supported and encouraged to stay in Uganda, we feel this would be one of the most meaningful long-term contributions that OAF can make.

Another initiative is the development of a well-equipped centre of excellence, which should have beneficial knock-on effects elsewhere in the area. We have identified a new hospital in Uganda which will be opening early next year and is being run by an AAGBI member, Dr Sarah Hodges. We are liaising closely with her with regard to equipping this. We believe that within the budget we have, this is a better approach than spreading our efforts more thinly. To this end six relatively new anaesthesia machines are being purchased from Great Ormond Street Hospital to send to Sarah in Uganda.

The AAGBI, through OAF, was a partner in the Global Oximetry (GO) project which was established to investigate the feasibility of introducing pulse oximeters in developing countries. The ultimate aim is to improve patient safety through sustained change in practice involving the universal, informed use of pulse oximetry as a standard of care in

anaesthesia. One of the four pilot sites was in Uganda and was run by AAGBI members. The pilot started in May 2007. We distributed *TruSat* oximeters, donated by GE Healthcare, to twenty anaesthetic officers, each of whom took personal charge of an oximeter, and all received the educational package accompanying the monitors. A questionnaire was completed at 12 months, seeking information about the hospital, hospital activity and the oximetry gap. The aim of this first phase of the GO project was to demonstrate the feasibility of changing practice in relation to the use of pulse oximetry during anaesthesia. In addition it aimed to obtain information about the important features required of a pulse oximeter to be used in difficult clinical settings with constrained financial resources, and about the barriers to the use of pulse oximetry generally. The data are primarily qualitative and the results from the four pilot sites are being collated at present.

A very exciting development has been the interest the World Health Organisation (WHO) has in the GO project. In the recently-launched WHO programme "Safer Surgery Saves Lives", WHO has bought into most of the GO objectives. The specific requirement of having a working oximeter attached to every patient undergoing anaesthesia now has the status of a global WHO guideline. WHO will meet with the GO strategy team in late 2008, but preliminary indications are that WHO may wish to support further work in the areas where we have done the pilot projects. It is very exciting and rewarding that an initiative supported by AAGBI since its inception may make a major contribution to patient safety throughout the developing world.

All these initiatives depend on your generosity. Funds raised for the Overseas Fund are always welcome – activities have ranged from a sponsored cycle



Daniel Apunyo, a Ugandan OAF fellow.

ride from Lands End to John O'Groats to attending a pharmaceutical seminar! AAGBI Council member Ranjit Verma ran a hog roast at his home last summer and raised £1900 for OAF. The more we raise, the more extensive our work can become. AAGBI can reassure donors that OAF is a registered charity and that every donation goes to an individual or a project that is personally known to us. This means not only are we a unique anaesthesia charity in the work we do, but we can also guarantee effective use of donations with no overhead costs! AAGBI can claim gift aid on donations, making them tax efficient. Our administrative costs are extremely low and are met by the AAGBI, so that all donated money goes to the projects we support.

OAF is gradually extending its remit, and the impact of its efforts is beginning to be felt among anaesthetists in many countries. I would like to thank all who have supported this initiative.

Ellen O'Sullivan
Co-ordinator, Overseas Anaesthesia Fund

If you would like more information about donating to the Overseas Anaesthesia Fund, please visit the AAGBI website at www.aagbi.org/oaf.htm, where you can download forms to donate in Sterling or Euros. Alternatively, contact Jane Messum at the Association of Anaesthetists on 020 7631 8814.