



## **ELECTIVE REPORT**

### *Surgery in Remotest Ecuador*



Eight week elective placement with  
the Cinterandes Foundation

by  
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## **Background**

In April and May 2015, I travelled to Cuenca, Ecuador to undertake an eight week medical elective placement with the Cinterandes Foundation, a not-for-profit organisation whose goal is to deliver free, safe and effective healthcare to remote and rural populations in Ecuador. Ecuador is an incredibly diverse country, home to Amazonian rainforests, snow-covered Andean mountains and high-altitude cloud forest; as a result of this, access to and provision of healthcare to isolated communities is a major problem. Many of those in poorer and remote areas are unable to seek medical attention in larger cities, with the cost of travel and the difficulty of leaving work and families being very prohibitive.

The charity began work in 1993 with a mobile operating theatre built in a van, and since then over 7,500 surgeries have been carried out by the program.<sup>1</sup> Despite the limited impact that the mobile surgical program has had on the overall quality of healthcare in Ecuador, it has provided a means to gain confidence, trust and acceptance from remote communities who are often distrustful of nationalised programs which are usually delivered externally. The standard of surgery is excellent, and the unit's complication rates are comparable to most tertiary surgical centres in the developed world.<sup>2</sup>

## **Experience**

The elective placement consisted of an eight week attachment based primarily in Cuenca, Ecuador under the supervision of Ecuadorean doctors. During this time, one week was spent performing surgery with the mobile unit in a remote coastal area of Ecuador, whilst the remaining seven weeks were spent in hospitals and health centres within the Cuenca area.

The week spent performing surgery in the mobile van was undoubtedly the highlight of the trip. During this week, we travelled to the remote coastal town of Palmar, a seven hour drive west of Cuenca on the Pacific coast. The team carried out a total of sixteen operations over two days in the van. Most patients had common simple surgical conditions such as gallstone disease and inguinal hernias; all of the operations went smoothly with no major complications, and the majority of the patients were well enough to be discharged on the same day.

During this week, I had many opportunities to help and observe the anaesthetist who volunteered with the Cinterandes Foundation. I was very impressed by the huge range of anaesthetics performed for different types of surgery, which included general anaesthetics with both simple IV

induction and with gas induction for children, regional blocks and spinal anaesthetics. The spinal anaesthetics were particularly impressive considering the setting - when the anaesthetist was ready to administer the spinal the scrub nurse had to guard the steps into the van to prevent anyone from rocking the 'theatre' as they entered! After assisting the anaesthetist during surgery, I was responsible for post-op monitoring and care, which was also very rewarding. The patients were very grateful to have a familiar face there before and after their operation.

## Reflections

Relative to the UK, Ecuador is a poor country and as a result has more limited healthcare resources. I noticed a stark contrast in the private hospitals which are exclusive to patients who are employed and pay for private health insurance; there appears to be a much larger divide in the quality of healthcare in the public and private sectors in Ecuador compared to the UK. Relative to the quality of healthcare in the public hospitals, the quality of care delivered in the mobile surgical unit was extremely good, and patients were extremely happy with the level of care and quality of surgery delivered in the mobile unit.

## Conclusion

I hope to return to South America in the future to volunteer for medical charities. Both the surgical missions with the mobile unit and the clinical placements in Ecuador were an incredible experience, and will contribute significantly to my future career decisions. I feel very fortunate to have been involved in the work of the Cinterandes Foundation and hope to be able to return to volunteer with them in the future.

## References

1. **Cinterandes Foundation.** Main page. Available at: [<http://www.cinterandes.org/index.php/en/>]. Accessed on: 30/05/2015.
2. **Rodas E, Vicuna A and Merrell RC.** (2005). Intermittent and mobile surgical services: logistics and outcomes. *World J Surg.* **29**(10): p1335-9.