



TEAM VISIT

Rumah Sakit St Damian

Cancar, Manggarai, Flores

November 17 – 24, 2012

Team Leader's Report

Dr Mark Moore AM, FRACS

Plastic and Craniofacial Surgeon

Implementation of Dr John Hargrove's mission in East Timor and Eastern Indonesia:
providing a specialist surgical service to the disadvantaged where the service is not available
or affordable.

AIMS AND GOALS

1. The ongoing provision of a plastic and reconstructive / cleft lip and palate Surgical service to the people of Flores and the surrounding islands of Nusa Tenggara Timur (NTT), Indonesia.
2. To continue to work with our longstanding local counterpart medical, nursing and physiotherapy staff at Rumah Sakit St Damian and St Rafael, Cancar and assist them in developing their skills for the delivery of services to those patients with physical disability and deformity.
3. To support capacity building by providing skills transfer more widely in Indonesia by incorporating local specialist counterparts in the visiting team.
4. To continue to develop links with other charitable support services in Indonesia whose missions overlap and compliment that of OSSAA.

INTRODUCTION

The ever-evolving hospital and rehabilitation facility at RS St Damian has been receiving regular short term reconstructive surgical team visits from Australia since Dr John Hargraves first travelled there in 1993. Through all the intervening years Sr Virgula SSpS, who was instrumental in establishing St Damian has been there to facilitate and oversee our visits. Her final departure for Europe one year ago, and handing over the reins to the next generation has now been finalised, so that this visit represented an opportunity to assess how this transition has progressed, and if there would be any change in our relationship.

This year has also seen changes in the requirements in regard to medical registration for our teams in Indonesia, as well as an increased focus on skill transfer to local counterpart surgical, medical and nursing staff. With this in mind the coordination of our teams visit involved arranging the invitation and support from local health authorities and also facilitating an Indonesian Plastic Surgical specialist colleague to accompany and work with our team. This combination of teaching, skill transfer and clinical service provision is a challenging balancing act for all concerned.

OVERVIEW

The road much travelled between Labuanbajo and Cancar in many ways symbolises the challenges of our teams in their surgical visits to St Damian. The journey is long and tiring, but never uneventful, whether at the beginning, or at weeks end following a strenuous but fulfilling six days work. Over two mountain ranges, with frequent switch-back turns, the road throws up constant surprises – overloaded buses and trucks laden with produce being transported the length of the archipelago, children, adults and dogs going about their daily lives line the road's edge, construction gangs endlessly rebuilding and refashioning the road and water drainage channels which seek to divert the endlessly heavy rainfall each wet season. Each year since my first trip along this road in 2000 incremental changes and improvements are visible – sometimes dramatic and obvious, other times two steps forward and one back - the poverty and challenges of living in this the poorest province in Indonesia remain, but the population is growing significantly and the spread of the outside world into this area is reflected in the cries of “ tourist “ from local children as our team is driven by.

So with our team's arrival at St Damian, we are similarly greeted by familiar sights and sounds, the hospital structures and the smiling and cheerful faces of staff and patients we have known for years. Always something or somebody new introduces themselves, despite its relative isolation, it never stands still. The beauty and simplicity of the old world values, which permeate St Damian, intermingle with the advances of the modern digital age. Driving in the front entrance this time we are greeted by the old physiotherapy facility where our consultations occur, being redesigned and rebuilt.

After a quick settling in coffee and cake, the consultation clinic started –overseen by the two Ferdis and Tanti, our local long term nursing and physio counterparts. Between a late afternoon's start and our eight o'clock finish, 55 patients were assessed and the week's operating list developed. Good forward planning by the local staff ensured that those patients from afar, Bajawa, Maumere and points further east in Flores were screened first. The clinic resumed at 9 the following morning and continued into the early afternoon – by the finish about 125 patients had been seen. Again cleft lip and palate patients were the most frequent presentation, on this occasion there being some 57 clefts assessed or reviewed.

The prevalence of widespread smoking, malnutrition, and acceptance of intermarriage between cousins are seemingly among the factors contributing to the ongoing high number of cleft referrals in this region. The age of cleft presentation seems to be lowering – on this visit many cases planned for surgery were under one year of age – increasing the level of challenge for the team’s anaesthetist!! By the end of the visit a further 42 cleft procedures were performed – 32 cleft lip repairs and 10 cleft palates. This brings to 737 cleft surgical procedures by our teams since 2000.

With our team being accompanied by Dr Nova Primadina, a recently qualified Indonesian plastic surgeon from the Surabaya plastic surgical unit, it was pleasing to use these cases as a way of sharing surgical approaches for these cases, and discussing the advantages and disadvantages of various surgical techniques. Dr Nova having had her training in Surabaya was well versed in the “Djoh” technique for cleft lip repair – named for her former unit head and mentor Professor Djohanshah Marzoecki. Working with our team, she was shown approaches to the cleft lip nasal deformity which differ somewhat from her previous experience, and which she was able to implement during our time operating together. In the New Year she will likely transfer to Medan in Sumatra to commence as a specialist plastic surgeon.

A relatively small number of patients with burn contractures were reviewed on this occasion – one young woman with a major contracture of her anterior neck was a moderate intubation challenge for the anaesthetist. Careful planning and preparation saw the surgery successfully completed with resurfacing of her anterior neck using a large abdominal full thickness skin graft. Whilst her postoperative course was initially uneventful contact has been had from Cancar that she later had a bleeding episode 1-2 weeks later, this being sorted by the nursing staff and Sr Natalia. The team will review her when it returns in March 2013.

With the usual range of other skin lesions, cysts and lipomas as well as several limb and hand congenital anomalies requiring correction, the team was able to complete some 68 surgical procedures over 5 days. This would not have been possible without the excellent local theatre staff now headed by IbuSabina. Sr Regi, the long term director of the operating theatre is now back in Europe and the local nurses and staff have truly stepped up and taken ownership of the facility. The volume of cases meant long, almost 12 hour days early in the week, all of which were dealt with, with a smile.

The team anaesthetist was assisted by Mr Mus, the local anaesthetic nurse /technician, based in Ruteng – he spent several days with the team, and with his input we were able to open a second theatre in which some of the minor cases could be completed. This was another example of the opportunity for skill transfer to local staff – upgrading the experience of the only provider of anaesthetic services in the region.

The team was once again accompanied for most of the week by Ibu Nunuk from the Lions Club of Jakarta – she was joined by a colleague Ibu Nona, and both were there to assist and oversee the financial support of patients and the costs the hospital / facility generated. Both ladies, whilst spending their days around the wards, were fun to have around the team at days end, sharing many humorous stories with us.

The final night once again saw us share a farewell dinner with the SSpS sisters and local staff – over yet another wonderful dinner and after the speeches of thanks, we reflected on the privilege of being embraced into the wider family that is St Damian. Even Dr Nova, on her first visit with our team saw Dr Mark as father, Sr Margaret as Mother Damian, Dr Phil as Uncle, Anastasia as Aunty and Dr Vani as Big Brother!!!

Departure for Labuanbajo on Saturday was a little later in the day than usual – our travel commencing in the daylight hours for a change – despite heavy rains during the week and the unstable land all around, there were no road blockages even if rumours had suggested there would be. We even arrived sufficiently early to call around to see the residents at Binongko. This beautiful facility now boasts a fully equipped gymnasium with an exquisite mosaic tiled floor, and an immaculate swimming pool. Sr Virgula can be justifiably proud of her legacy that continues to prosper.

OSSAA Team:

Dr Mark Moore- Plastic Surgeon/ Team Leader

Dr Phil Blum- Anaesthetist

Dr Vani Prasad-Plastic Surgery Fellow

Margaret Maloney-Theatre/Recovery Nurse

Anastasia Stain-Interpreter

St Damian/St Rafael Hospital Counterpart:

Sr Tres Gudepun--Head of St Damian Hospital

Sr Natalia Maria Naki--Head of St Rafael Hospital

Dr Nova Primadina—Plastic Surgeon from Surabaya

Ferdi Jaleng-- Registration Nurse

Pak Mus—Anaesthetist assistant

Sabina-- Theatre Nurse

Erna--Theatre Nurse

Sr Mariana—Assistant Nurse

Ferdi Jelalu--Physio Therapist/Assistant Nurse

Donny--Assistant Nurse

Ponti--Orderly

Sr Hedwina-- The Cook

Mary , Veronika & Mus—Housekeeping

Tanti-- Patient Registration Assistant

Summary of Clinical Activities in Cancar
St Damian / St Rafael Hospital
17th – 24th November 2012

Total Patient Consultation: 129

Total Surgical Procedures: 68

| | |
|-----------------------------|----|
| Cleft Lip | 32 |
| Cleft Palate | 10 |
| Burn | 4 |
| Others | 20 |
| (14 with Local anaesthetic) | |
| (Lumps Bumps) | |

Total Cancelled 2 (1 unwell, 1 didn't show up)

Next visit (2013) to review 31

ENT to review 5

Orthopaedic to review 2

Dermatologist to review 3



The hands of three sisters with a variety of expressions of syndactyly.



Uni Lateral Cleft Pre Surgery



Uni Lateral Cleft Post Surgery



Uni Lateral Cleft Pre Surgery



Uni Lateral Cleft Post Surgery



Ibu Sabina and preop cleft baby.



Bilateral Cleft Pre Surgery



Bilateral Cleft Post Surgery



Great welcome!





Ibu Nunuk, Marg Maloney and Ibu Nona



Phil Blum and Ferdi (physiotherapist)



The surgical team at week's end.



Sr Maristella with Yanti (right) our old cleft and burn patient



Binongko – pool and gymnasium for the patient physiotherapy