

## Written report NFOG Fund 2017 (Grant number NF 17013)

Life Support Foundation is an international, independent, medical organisation aiming to prevent deaths due to acute, life-threatening conditions in low-income countries through improving the access to and quality of basic life-saving interventions. During this trip, I contributed as a teacher in the course in “Obstetric anaesthesia” at Amana Hospital, a referral regional hospital with 24 000 deliveries annually. The teacher team from Sweden was composed by a senior consultant in obstetrics and gynaecology, two senior consultants in anaesthesiology, one intensive care nurse, and me.

### Activities during the week:

#### **Saturday 6th May**

Late arrival do Dar es Salaam

#### **Sunday 7th May**

Course preparations: individual presentations and lectures.

#### **Monday 8th May**

Meeting with local course facilitators at Amana hospital and visit at the Maternity department. Course preparations together with the teacher team (scenario training and final preparations of the schedule). Review of the participant list.

#### **Tuesday 9th May**

First day of the course! We started with a pre-course test, thereafter I had a lecture on “Why do mother die? A global perspective” and “Emergency Obstetric Care” including communication and team-work. We also had lectures on “ABC” (Airway-Breathing-Circulation), group discussions where all group members shared a case of a maternal death they had been involved in, and scenario training using the ABC-approach for obstetric emergencies. We finished they day with ten minutes reflection and gave the participants the opportunity to write down a question or “Muddy point” they wanted to the discuss the following day. The participants were also encouraged to write an essay during the course, focusing on different topics related to maternal mortality. The best essay would be rewarded with a price on the last day of the course.

#### **Wednesday 10th May**

After starting with a recap, lectures followed on “Special considerations for the obstetric patient”, “Preoperative assessment”, “General and spinal anaesthesia”, “Prioritising” and “Neonatal resuscitation”. There were a lot of discussion on different guidelines on neonatal resuscitation; for example the Swedish guidelines are not coherent with the “Helping Babies Breathe” (HBB) concept. Unfortunately time ran out, so we had to postpone the neonatal resuscitation training to the next day. Also this day was rounded up by ten minutes of reflection and writing down muddy points.

### **Thursday 11th May**

We started out with a recap, this time facilitated by me, and went through (quite many) questions that remained from the day before. Thereafter, lectures followed on “Pulsoximeter”, “Recovery room”, “Pain relief” and “Checklists”. We also arranged the neonatal resuscitation training and all participants got the chance to practice ventilation and chest compressions on a “Neo-Nathalie” doll. After the training, participants did a Post-course test, and while they were having their lunch we went through all the test in order to give the participants feed-back on their improvements. Following this, the winner of the essay competition was announced and we finished the course with certificates and group photos.



### **Friday 12th May**

On this last day, we joined different course participants in their daily work in order to provide bedside teaching. I joined one of the other teachers to his hospital Mwalayamala hospital, a regional hospital with 12 000 deliveries every year and two employed specialists in obstetrics and gynaecology. During my visit, I stayed in the labour ward and helped out with the examination of mothers in labour, normal deliveries, vacuum extraction and a neonatal resuscitation.

<http://www.lifesupportfoundation.org/news/intensiva-och-interaktiva-kursdagar-pa-amana-hospital/>

Helena Litorp

MD, PhD, Specialist Obstetrics & Gynaecology, Uppsala University Hospital, Sweden