

EMERGENCY MEDICINE EDUCATION IN AFRICA

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My work in the last year includes continuing to advocate for the specialty of Emergency Medicine in Africa to ensure that anyone with an acute illness or injury may find skilled treatment when arriving at an emergency center. In August 2016, I was invited to lecture on “Models of Training in Emergency Care,” at the first Rwandan Emergency Care Association (RECA) national congress. We discussed the variety of models for working with national governments, ministries of health, universities and private hospitals to determine locally appropriate training programs and schemes for ongoing human resource retention and remuneration once emergency care providers are established. We discussed the challenges of ensuring that newly trained providers will find jobs with pay commensurate to their training context of the government or private hospital ability to pay, retention of skilled workers, and assessing the level of training that should be provided in district and national hospitals and a variety of other factors during the session.

During the meeting, I was honored with an award for “Outstanding Support to the Development of the Rwanda Emergency Care Association.” The conference, attended by physicians, nurses, and ambulance personnel from the region as well as Europe, North America, and Southeast Asia was a smashing success. So much so, that RECA was chosen to host the African Congress on Emergency Medicine in Kigali in November 2018. This year will be dedicated to cultivating a robust scientific program as RECA hosts over 1000 emergency care specialists from all over the globe just months after graduating the first class of Emergency Medicine specialist physicians. RECA also hosts an “Emergency Medicine in the Tropics” course for health professions students from Europe and North America to introduce them to the medical system in Rwanda and to specific medical conditions unique in presentation to East

Africa. I provided two lectures for the course and Andrew Martin MD, a senior EM resident from UF Jacksonville travelled to Kigali in April 2017 to participate in point-of-care ultrasound training at the national teaching hospital.

Ongoing work with the African Federation of Emergency Medicine facilitated my participation in the *African Journal of Emergency Medicine's* Author Assist program. Through the initiative, experienced authors are paired with authors of a manuscript submitted to the journal to develop ideas to fully published peer-reviewed works. In December 2016, I worked with a team of Ethiopian pharmacy faculty from Gondar University, including the PI, Getnet Adinew. Together, we published, “Poisoning cases and their management in emergency centres of government hospitals in northwest Ethiopia” in the *African Journal of Emergency Medicine* in June 2017. It was a privilege to mentor the team of Ethiopians in describing the epidemiology of acute care visits for poisoning.

This retrospective review provided insights to differences in epidemiology in the North Gondar Zone versus other studies in Ethiopia. The incidence of intentional poisoning appears to be higher than that of prior studies in Addis Ababa with up

to 1% of Emergency Department visits related to poisoning whether intentional or unintentional. Women accounted for 60% of the poisonings reviewed and young people 15-24 years old accounted for 55% of these presentations. Organophosphate and bleaching agent poisonings comprised most cases (35% and 25% respectively). While patient management is generally appropriate, clinicians lack specific treatment guidelines and protocols that could improve management. This study identified opportunities for improvement in standardized management. Further, the study identifies that young women are at highest risk of self-harm. Increasing public awareness of safe handling of chemicals and medications as well as improving access to mental health services were also identified as opportunities to optimize outcomes by practicing primary prevention.

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