Building Confidence In Kenya One Surgical Case At A Time

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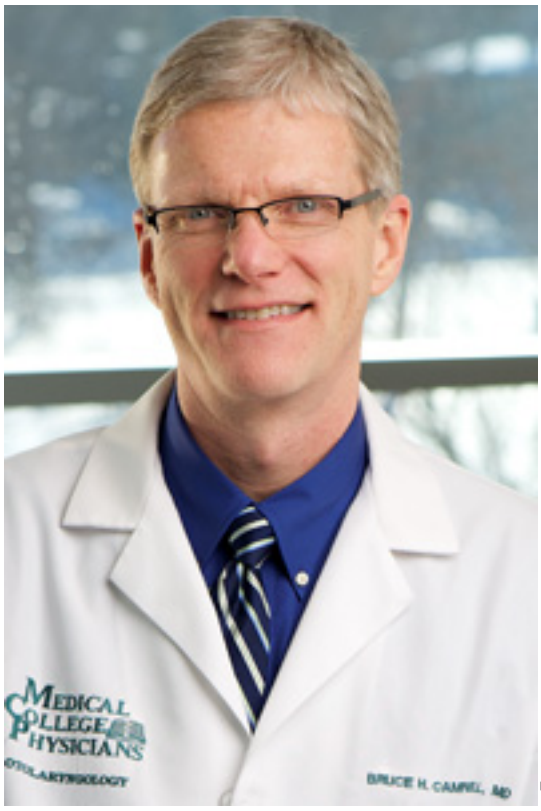
"Confidence is contagious.
So is lack of confidence." –Vince Lombardi



"So, can you leave this here with us?"

I was part of a group of U.S. surgeons traveling to Eldoret, Kenya, seeing patients and helping the Kenyans ENT surgeons learn surgical techniques. Our two-week mission allowed us to work across the table from Kenyan colleagues, discussing surgical approaches, demonstrating techniques, and reviewing all aspects of surgical care.

"I have never seen such a thing!" my young Kenyan colleague said. "Explain again how the device seals blood vessels without the need to tie them."

Because of differing practice patterns and a lack of experience with larger surgical cases, the Kenyan ENT surgeons rarely perform thyroid surgery. Thanks to the generosity of US surgical supply companies, I was able to bring along some technology that I use regularly at home.

I explained how one particular device seals and cuts the vessels. "Here," I said.

"Grab the vein carefully right here then squeeze the blades tightly together and pull the ring on the handle. Let the device do all the work."

“That’s remarkable!” he said. “And you don’t you have to go back and tie all of the vessels at the end?”

The device did its job, sealing the large thyroid vein then cutting it. The edges of the vein fell away without spilling a drop of blood.

"There is no need to tie off all of the veins, although I still tie a few of them. The vessels almost always seal permanently."

Over the next hour, we dissected out the massive goiter, one of the largest I had seen, cutting some of the veins with the device, tying some, dividing some with a bipolar cautery, and discussing the advantages and disadvantages of each technique. We talked about the high numbers of patients in Kenya with enormous goiters. My young colleague gained confidence as we continued, finding all of the important surgical landmarks and protecting each one. I was impressed with his technique. Soon we were done.

"This device is wonderful!" he said again as we placed the skin sutures.

"Yes, it helps," I told him, "but you certainly could have done the case the old-fashioned way just as easily. You did just fine."

"Yes, but the surgery went so much more quickly this way! We cut many vessels with the device. If we had tied off each of the veins, it would have taken a long time and would have slowed us down." He was correct and I sensed that he was enamored with the technology. He was smiling behind his surgical mask. "So, you will leave the machine here with us, right?"

"Unfortunately, no," I told him. "Not this time. I only borrowed it. I can’t leave it here."

“Maybe next time? You will leave it then?”

While preparing to visit Africa, I knew we would face more cases than we could possibly complete during our stay and that the more efficient we were, the more patients we would be able to see. Despite this, I had been hesitant to bring along the technology because the surgeons there do not have access. Would using the devices make them less confident in performing the procedures after we were gone? On the other hand, would the devices increase their confidence levels by allowing them to concentrate on the procedures rather than the process of tying off dozens of engorged veins common in a large goiter?

My Kenyan colleague pulled off his gloves and gown, then helped settle the patient on the transport cart. “Next time? When you come back next year, you will leave it then, right?” he asked again, smiling.

“Sure,” I said. "I'll try." Honestly, I had made no plans before I left home to acquire one of the devices permanently for the Kenyans but his enthusiasm and newly-formed confidence were impressive. I shook my head and grinned. “Absolutely I will try. Next time, you will have one of your own.”

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