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Surgery in South Asia

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Surgery in South Asia
A private complication of a public problem

It is difficult to write about surgery in South Asia with any sense of pride. In most of the region health care, and especially surgical care, is concentrated in major hospitals in big cities. In villages and small towns the health infrastructure exists on paper, but even minor procedures are not carried out because equipment does not work, and surgeons are reluctant to undertake operations for which they are not well trained.

In a community survey of surgical emergencies in the northern areas of Pakistan, the incidences of acute abdominal, trauma, and obstetric emergencies therefore far exceeded the rates of acute surgical intervention. In rural areas of Pakistan the overall rate of surgery was 124/100 000 patients per year compared with 825/100 000 in the United States. Death rates were correspondingly high. Even in city hospitals the situation is not much different. The few public hospitals that carry out complex surgery have to cope with a huge influx of poor and malnourished patients, in the late stages of disease. The consequences are long waiting lists, staff hand-hygiene, unhygienic wards, and corruption.

The inadequate response of the public sector to the demand for surgical services—which account for about 10-15% of all hospital admissions—has resulted in major growth of the private sector in the past 10 years. Small private hospitals and clinics have proliferated in cities and small towns. These establishments have low overheads, marginal support services, and offer services to a patient not covered by the public sector. The private hospital that is the main vehicle for delivery of health care, are dealt with compassionately. Another model is the autonomous public institute supported by philanthropy. One such is the Tata Memorial Hospital and Cancer Research Institute in Mumbai, South Asia's leading cancer institute, where 24 000 cancer procedures are performed annually, with good outcomes.

Another is the Sindh Institute of Urology and Transplantation in Pakistan, which does 110 renal transplants annually with internationally comparable results. The Aga Khan University in Karachi is a not for profit private teaching institution, which provides surgical training and publishes research of high quality.

These successful institutions have a sense of mission, a vision, and leadership. Autonomy is coupled with accountability, organisational ability to manage resources efficiently, and a willingness to learn from experience. The credibility of these institutions must be replicated, especially in the public sector. For it is the public hospital that is the main vehicle for delivery of efficient, innovative, and effective surgical care to the vast populations of South Asia.

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