Improving Orthopaedics in Haiti

AAOS/PIH partnership focuses on surgical education

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ORTHOPEAEDICS AROUND THE WORLD

The rebuilding of Haiti’s orthopaedic infrastructure following the January 2010 earthquake has become a successful work in progress, due in large part to the continued involvement of AAOS and its members.

Despite its dense population, Haiti had few trained orthopaedic surgeons at the time of the quake. Strengthening its orthopaedic training program, therefore, has been integral to the rebuilding process. For the past 4 years, AAOS has worked with Partners in Health (PIH) to improve orthopaedic training in Haiti. Efforts have included establishing an orthopaedic educational curriculum and facilitating both training trips to the United States by Haitian orthopaedists and visits by U.S. and European surgeons to Haiti.

A significant initiative of the AAOS/PIH partnership has been the creation of the Haitian Annual Assembly for Orthopedic Trauma (HAAOT). “Although site visits are valuable, we recognized that a lot of important information could also be exchanged through a centralized format, such as a yearly conference,” said George S.M. Dyer, MD, who serves as orthopaedist-in-chief at The Montreal Children’s Hospital and as course director.

Following a successful inaugural meeting in 2013, the second HAAOT was held April 10–14, 2014, in Port-au-Prince. “HAAOT is the only high-level orthopaedic meeting that will be routinely held in Haiti,” Dr. Dyer said. “This year’s conference was attended by more than 100 international orthopaedic surgeons and scholars. Most of the participants were Haitian orthopaedic surgeons of all different levels. It was a wonderful meeting—a fantastic interchange of information that fostered a lot of ongoing partnerships.”

The 3-day program included paper presentations and panel discussions conducted in both French and English. The agenda was tailored to the specific clinical needs of orthopaedic practices in Haiti, according to Dr. Dyer, and included topics such as lower limb deformity, compartment syndrome, soft-tissue coverage, use of the SIGN nail, and pediatric reconstruction. “Much of the conference was geared toward dealing with trauma, posttraumatic reconstruction, or deformity reconstruction in a low-resource environment,” he said.

Meeting needs

The needs of HAAOT participants are methodically assessed—before and during the conference—to ensure that the conference is meeting expectations.

“Before setting the agenda, we ask participants what information they hope to gain from the meeting. New for this year, we used an electronic audience response system to poll audience members about whether the symposium topics were on target and to provide feedback on how well the topics were addressed,” Dr. Dyer said. “Participants also took a test to gauge their understanding of the concepts presented. For the most part, we found that the symposium’s stated objectives and the expectations of the participants were well aligned.”

Plans for next year’s HAAOT are already well underway. “The symposium is evolving. It is no longer simply a forum for Haitians to learn from foreign experts about how to manage things like open fractures, bone defects, and chronic infections. Now the playing field is much more level—learning has become a two-way street,” said Dr. Dyer. “Scientific precision and understanding the existing bone to fill the defect. That’s called bone transport, and the surgeons in Haiti are as good at bone transport as any surgeons in the world,” Dr. Dyer said.

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In addition to AAOS and PIH, sponsors of the HAAOT include SIGN Fracture Care International, Foundation for Orthopaedic Trauma, Project Hope, and USAID.

The 3rd annual HAAOT will be held in April 2015 in Port-au-Prince. For more information, email international@aaos.org.

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