

Chapter Connection

11th Issue - July 2010

Chapter Board 2010-2011 - Dr I. Swaminathan, A/Prof Cheah Wei Keat, Dr Chia Kok Hoong, Dr Vijayan Appasamy, Dr Chan Hsiang Sui, A/Prof Pierce Chow, Dr Foo Chek Siang, A/Prof Jimmy So and Dr Tan Kok Yang

Chapter Connection is a newsletter specially brought to you by the Chapter of General Surgeons under the purview of the College of Surgeons, Singapore. The Board of the Chapter of General Surgeons is well represented with members from different institutions and this would mean that you could find the latest happenings of the general surgery community of these institutions in this newsletter. This newsletter is published quarterly and will be distributed to the Members of the Chapter of General Surgeons. On the goodwill of the Chapter Board, this quarterly newsletter will also be distributed at no cost to the Trainees and Fellows of General Surgery in various public hospitals.

Message from Chapter Chairman

Dear surgical colleagues,

It is with pleasure that I announce the formation of a Surgeons-In-Training (SIT) Committee. This committee comes under the Chapter and has an advisor, Dr. Vijayan and an assistant advisor, Dr. Ranjiv. Our Chapter is the first in the College of Surgeons to form such a committee, and members are all trainees from the various Hospitals. We have ensured equal representation of all restructured hospitals, and have also worked out the terms of reference. Office bearers have been elected and they will be in touch with the general body of trainees soon, informing you of their plans for the future. Several ideas were discussed and I am sure they have their work cut out for them.

The SIT Committee held its inaugural meeting on 2 June 2010 and it was well attended. Indeed, it was heartening to see so much spontaneity and eagerness to participate. I am confident that the SIT Committee will grow in the years ahead and raise further the profile of our General Surgeons.

I also had the pleasure of representing the President of the College of Surgeons Singapore at the recent Annual Scientific Meeting of the College of Surgeons, Academy of Medicine, Malaysia, in Malacca. Please feel free to email or call me if you would like to know more. Alternatively, you may access the College of Surgeons' website at www.css.edu.sg under "Other Medical Events" and click on the trip report that is tagged to the meeting title. We really should build up our relationships with fraternal colleges in ASEAN.

Finally, our Exit Exam Preparatory Course is just round the corner, and I wish the participants a fruitful learning journey.

Warm regards,

Dr Swaminathan I.
Chairman, Chapter of General Surgeons
College of Surgeons, Singapore



**Wishing everyone
Happy Holidays on:**

**9 Aug 2010 (Mon) – National Day
10 Sep 2010 (Fri) – Hari Raya Puasa**



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**Contribution of any interesting news & articles from Chapter
Members are welcome for consideration to publish in
*Chapter Connection.***

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News to share with your peers in the Gen. Surg. community? Share it in "Chapter Connection"! Email your news to css@ams.edu.sg now!

**NEWS
FLASH!**

Surgeons-In-Training Committee

The Surgeons-In-Training (SIT) Committee was formed on 27 April 2010 and it was formalised at the 4th Chapter of General Surgeons' Annual General Meeting. The current SIT committee members are Advanced Surgical Trainees (ASTs) being nominated from Changi General Hospital, Jurong General Hospital, Khoo Teck Phuat Hospital, National University Hospital, Singapore General Hospital and Tan Tock Seng Hospital. Project plans for the SIT Committee were discussed at its first meeting held on 2 June 2010. Main objectives of the SIT Committee is to serve as a feedback channel directly from the trainees and residents on current / forthcoming training programmes and systems of training as well as looking into education and training that facilitates undergraduate and postgraduate training.

3rd Exit Examination Preparatory Course – 29 June to 3 July 2010

It is the 3rd year that the Chapter of General Surgeons is organising the Exit Exam Preparatory Course, and with the positive feedback given by past ASTs who attended the course as well as the continued support received from the invited faculty who are all very experienced surgeons in their field of practice, this course has grown to set foot as one of the core projects of the Chapter in pursuit of its objectives. Appointed organising committee of each year's preparatory course ensures that the course will remain relevant to the current training programme and exams, and will improve the course contents where necessary. The aim of this course is to offer a platform for all ASTs to exhibit their knowledge and competence with guidance from the invited faculty in preparation of their exit exams.

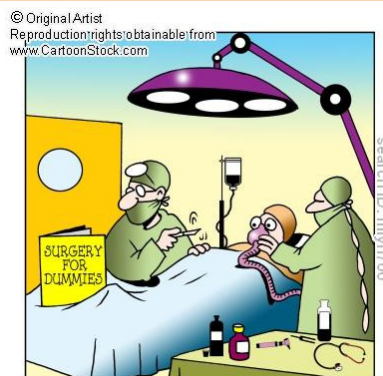
In conjunction with the preparatory course, it is a practice that an informal dinner will be organised to provide a networking opportunity between practicing surgeons and the trainees for social catch-ups and/or sharing and exchanging of experiences / knowledge of the profession.

A post-event report will be published in the 12th issue of this newsletter in due course.

COLLEGE OF SURGEONS DINNER 2010

This annual dinner of the College provides a platform to host the Named Lectureships and the College's awards as well as an event to refooster rapport between all surgeons across all surgical specialties. The College Dinner 2010 will be held on Friday, 29 October 2010 at The St. Regis Singapore. So, do remember to mark this date and join us for a social and academic evening, where surgeons from different specialties comes together to enjoy an evening of comradeship.

Please look out for more information about this event in the 12th issue of this newsletter.



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SPECIAL FEATURE ARTICLE

ON THE MEDICAL FRONTLINE

Authored by: Mr Dick van der Tak, Médecins Sans Frontières Hong Kong (Doctors Without Borders)

In March 2010, the College of Surgeons Singapore and the international medical humanitarian organization, Médecins Sans Frontières (MSF) signed a Memorandum of Understanding to work together in responding to urgent medical and humanitarian needs all over the world. This article explains the main principles and activities of MSF.

MSF was founded in 1971 to provide emergency medical assistance and to speak out about the plight of the people it assists. In 1999, MSF was awarded the Nobel Peace Prize in recognition of its work to alleviate human suffering and save lives.

MSF works in Africa, Latin America, Asia and Europe where it has found health services inadequate to meet the populations' most urgent medical needs. This may be because of conflict, natural disaster, population displacement or a chronic lack of essential healthcare. Today, more than 20,000 doctors, nurses, logisticians, water and sanitation experts and other medical and non-medical professionals, work annually in MSF's projects to provide essential healthcare services to people caught in crises.

In natural disasters such as floods and earthquakes, like the 2004 Indian Ocean tsunami or more recently the earthquake in Haiti, a rapid response is vital. Emergency medical teams are always on stand-by. Over the years MSF has developed medical and technical kits that allow emergency teams to set up field hospitals and clinics, and safe water supplies within a matter of hours of days.

MSF will also immediately respond whenever conflict erupts. Teams of doctors, surgeons, anaesthetists, nurses and logisticians are immediately sent to the crisis area. They will be equipped with all the necessary materials to establish operating rooms and clinics, providing essential healthcare, and train local medical and support staff. Nutrition services and epidemic control programmes are often an essential part of MSF's life-saving services provided to people trapped in conflict or displaced by the fighting.

MSF believes that everyone has the right to basic medical care. In countries with collapsed or chronically disrupted healthcare systems, MSF works with the local authorities to rehabilitate health services. MSF also works in developed countries if there is a particularly marginalized group, for example illegal immigrants, street children or prisoners, who are excluded from medical services and support.

MSF's decision to intervene is solely based on an independent assessment of people's medical and humanitarian needs – not on political, economic, or religious interests. MSF is an independent, neutral organization and does not take political sides or does not intervene according to demands of governments or warring parties.

All MSF staff share a commitment to not only provide vital medical assistance, but to speak out about the causes of their patients suffering. Where MSF field teams witness gross injustice, violations of basic rights to access healthcare or breaches of international humanitarian principles, MSF feels it has the responsibility to raise these concerns in the most appropriate way by addressing governments, the general public, international bodies like the United Nations or with the media.

To maintain its independence and flexibility, MSF relies on the general public around the world for more than 80 percent of its operating funds. The remaining 20 percent of funds come from international agencies and governments.

MSF does not have an office in Singapore. The closest MSF offices are in Hong Kong and Sydney, from where it has developed fundraising, human resources, communication and operational support activities. However, MSF has medical projects in a large number of Asian countries like China, Philippines, Thailand, Myanmar, Bangladesh, India and Sri Lanka.

Members of the College of Surgeons Singapore who want to know more about MSF, or who are interested in joining the organization, can access www.msf.org.hk for further information.

☺ **A Note of Thanks to Mr Dick van der Tak, Executive Director of MSF Hong Kong for contributing this article.**

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43271 - (Ethiopia, 2008) © Fastxmsf
Over 16,700 severely malnourished patients, mostly children, have been cared for so far in MSF programmes in Oromiya and SNNP regions. Among them, 2,071 children suffering from medical complications have been admitted to five stabilisation centres where they receive 24-hour medical attention. Another 14,700 severely malnourished children have received nutritional treatment and food rations on an ambulatory basis in a network of 44 outpatient therapeutic programmes (OTP). Supplementary food rations made up of a corn and soja blend with oil and sugar have also been provided to 1,700 moderately malnourished children and their families.

MSF Facts – Do you know that:

- MSF is in urgent need of surgeons, anaesthetists, nurse anaesthetists and operating theatre nurses to join its medical humanitarian mission overseas?
- the duration of being on a mission with MSF for the medical professionals is normally between 1 and 6 months?
- until 12 May 2010, MSF did 7,677 surgical interventions following the Haiti earthquake last January?
- surgical aid is more and more becoming an integral part of the humanitarian mission and continues to evolve, adapting to new field realities?
- you can check www.msf.org.hk to learn more about going on a field mission with MSF?



45345 – (DRC, 2008)
© Sven Torfinn

MSF started a cholera treatment centre after cholera was diagnosed in the local health centre. Because of the new influx of displaced people after the recent fighting, the Kibati refugee camp is now overcrowded and water and sanitation situation is deteriorating. A cholera outbreak could further threaten many lives. Inside the centre, people receive rehydration fluids. Some patients are also contaminated with worms. MSF-H, Cholera Treatment centre, Kibati refugee camp, DR Congo, North Kivu, Goma, November 2008.



44731 – (DRC, 2008) © Roger Job
MSF mobile clinic in Rubare, two hours drive from Goma in North Kivu. Thousands of IDPs live in the area, in churches, at families and in school buildings. Tens of thousands have fled their villages and towns the last two weeks due to heavy fighting between rebels and the Congolese army. Many of the displaced ends up in the huge camps outside Goma, which is already filled up with refugees.



52638 – (Haiti, 2010) © Julie Remy
MSF provides emergency medical service to the earthquake victims in Haiti.

Source of photos from MSF Hong Kong

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