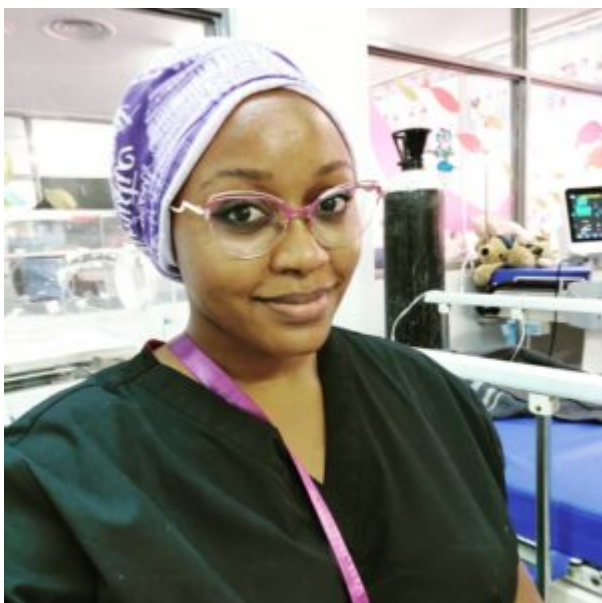


An Insight into Paediatric Anaesthesia Specialist Training in Zambia

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Written By Sompwe Mwansa, Paediatric Anaesthetist and Erica Morris, ZADP Senior Fellow | Read Time 6 mins

Dr Sompwe Mwansa is one of the two anaesthetists that make up the first cohort of Sub-Specialty Trainees in [Paediatric Anaesthesia](#) in Zambia. We wanted to find out more about her experience so [ZADP](#) Senior Fellow Erica Morris quizzed her on her Sub-Speciality Training Fellowship so far.



EM: What is Paediatric Anaesthesia Specialist Training in Zambia?

SM: It's a fellowship program for medical doctors who have a post graduate qualification in anaesthetics who would then like to further refine their skills and knowledge in the provision of anaesthetic care for children. The program is part of the Paediatric Anaesthesia Training in Africa ([PATA Fellowship](#)), which is a continent-wide fellowship that has faculty from five countries, these being Zimbabwe, Zambia, Uganda, Nigeria and the USA. The Fellowship is a collaboration, with partners from the [WFSA](#), [Society of Anaesthetists of Zambia \(SAZ\)](#), [Smile Train](#) and the [Vanderbilt University Medical Centre](#). Essentially, it's a collaborative effort to provide us Fellows with the knowledge and skills that we need to care for children in low and middle income settings. This includes ensuring best clinical practice and patient safety, in addition to understanding the spectrum of socioeconomic situations that our patients come from.

EM: Why is it important to have a Specialist Training Program for Paediatric Anaesthesia?

SM: Paediatric patients encompass a huge spectrum of development; we have children who are born prematurely and children who are on the cusp of adulthood. All of them have such different physiological and psychological requirements in addition to differences in their understanding of their illnesses and treatments. A child's understanding and perception of the peri-operative period can be made more complex by their diverse cultural and socioeconomic backgrounds. It's important to have a Specialist Training Program to provide anaesthetists with the skills to navigate these challenges. Finally, the Specialist Training Program

prepares Fellows to provide safe anaesthetic care in unfamiliar settings. For those children who are unable to reach our Specialist Children's Hospitals, we go to them, taking surgical teams to their local hospitals as part of outreach missions.

EM: What made you decide to specialise in Paediatric Anaesthesia?

SM: Paediatric anaesthesia is very mentally stimulating and very mentally challenging! There is no "cookie-cutter" approach to delivering an anaesthetic. Every child comes to you with a different set of problems and challenges that you have to overcome. You really have to exercise your mental muscle in order to provide the best standard of care.



SM: I also appreciate that working with paediatric patients naturally develops a physician's non-clinical skills. You begin to understand subtleties in patient behaviour. You start

to refine your approach to different patients in order to take into consideration factors like their physical and mental age and their understanding of their illness. These skills start to spill over into practice with adults. Essentially paediatric anaesthesia has a positive ripple effect on all other aspects of anaesthesia.

SM: Finally, I think this Fellowship is a really exciting collaboration. The program has given me the opportunity to do sub-specialty training in my home country. It means a whole lot to me that through my learning I will be able to positively impact children right here in Zambia.

EM: What is an average day like for a Paediatric Anaesthesia Specialist?

SM: It really depends on where I'm working! If I'm working in Lusaka at University Teaching Hospital (UTH) then my day starts at about 07:15. I find myself in theatre preparing for the day ahead. I review the operating lists to look at the number of major and minor cases. I also review the number of anaesthesia residents and non-physician anaesthetists who will join me and establish what supervision they will all need. Essentially the start of the day is all about strategising! The day then proceeds – a large part of my job is supervision and teaching but there is a fair amount of clinical work too. We carry on until the last case is done which should be about 16:00 but can be as late as 20:00 depending on the complexity of some surgical cases.



SM: We do occasionally have surgical outreaches to places like Kabwe or [Chitokoloki Mission](#) up in the North-Western corner of Zambia. On these missions my days are a bit different. On the first morning of our outreach the surgeons have a clinic then in the afternoon we start with some simpler, short cases. We then plan for the next couple of days of the outreach. Unlike working at UTH, where I usually have a resident or non-physician anaesthetist with me, on missions I'm typically by myself. As a result my focus is on clinical work with less focus on supervision, although this can depend on the staff present at the mission centre. Depending on the surgical caseload we can have 12-14 hour days as we bear in mind that we may have limited opportunity to return.

EM: What do you enjoy most about being a Paediatric Anaesthesia Specialist?

SM: I most enjoy the diversity of the patient group that I work with on a day-to-day basis. I also appreciate that my

impact extends far beyond my clinical work of providing children with safe anaesthesia. Supporting children through the perioperative period is a really fulfilling challenge.

SM: I also really enjoy working with the paediatric team and in the paediatric environment. Working in sync with a big team of individuals who are all passionate about delivering safe surgery and bettering the health of children is incredibly fulfilling, it really amplifies the enjoyment I get from my job.



EM: What are the biggest challenges for Paediatric Anaesthesia Specialists?

SM: I think the biggest challenge is that there are so few paediatric anaesthesia specialists presently employed in the ministry. There are currently two specialists and when my colleague and I finish our fellowship there will be four of us. Four specialists serving a population of approximately 10

million children! It's a huge number of children who need surgery and who need access to an anaesthetist with our level of training. We don't have the number of us right now to meet that kind of need. Even with our outreach work, there are still so many children that we are unable to serve.

SM: Another major challenge is trying to shine more of a spotlight onto safe surgery and perioperative medicine. There's a lot of focus on communicable diseases such as HIV, malaria and tuberculosis whilst perioperative medicine, safe anaesthesia and safe surgery frequently fall into the background. A huge part of the population loses access to the surgical care they need due to problems relating to lack of surgical equipment and drugs for anaesthesia.

EM: What's next after you finish your Specialist Training Program?

SM: After I finish my training program, I hope that I will be deployed to a place that I can have the most impact. Not every hospital in Zambia does paediatric surgery so I'll be most useful in a centre that does this. This will hopefully mean that I'll work in one of three Zambian paediatric surgery centres, either here at UTH, Levy Mwanawasa General Hospital or up in the Copperbelt region at Arthur Davis Children's Hospital.

EM: How do you become a Specialist in Paediatric Anaesthesia In Zambia?

SM: After completing specialist training in anaesthesia and critical care it is possible to apply for the Speciality Fellowship through the University of Zambia. There are two parts to the Fellowship, an initial 12 months component then

an additional 6 months component. On completion you are awarded an Advanced Masters of Science in Specialised Medicine in Paediatric Anaesthesia. Each year applications for the Fellowship open in April and close in May.

SM: The Fellowship is open to any physician who has a qualification in anaesthetics who would like to work with a patient population that frequently includes children, be it paediatric anaesthesia, critical care or trauma care. So many of the skills learned during this Fellowship are essential core skills for any anaesthetist. It's definitely something I would encourage anybody to do.

PATA is currently advertising two 12-month Paediatric Anaesthesia Fellowship posts in Lusaka starting in September 2023. Applications close on 15th May 2023.

[PATA APPLICATION](#)