

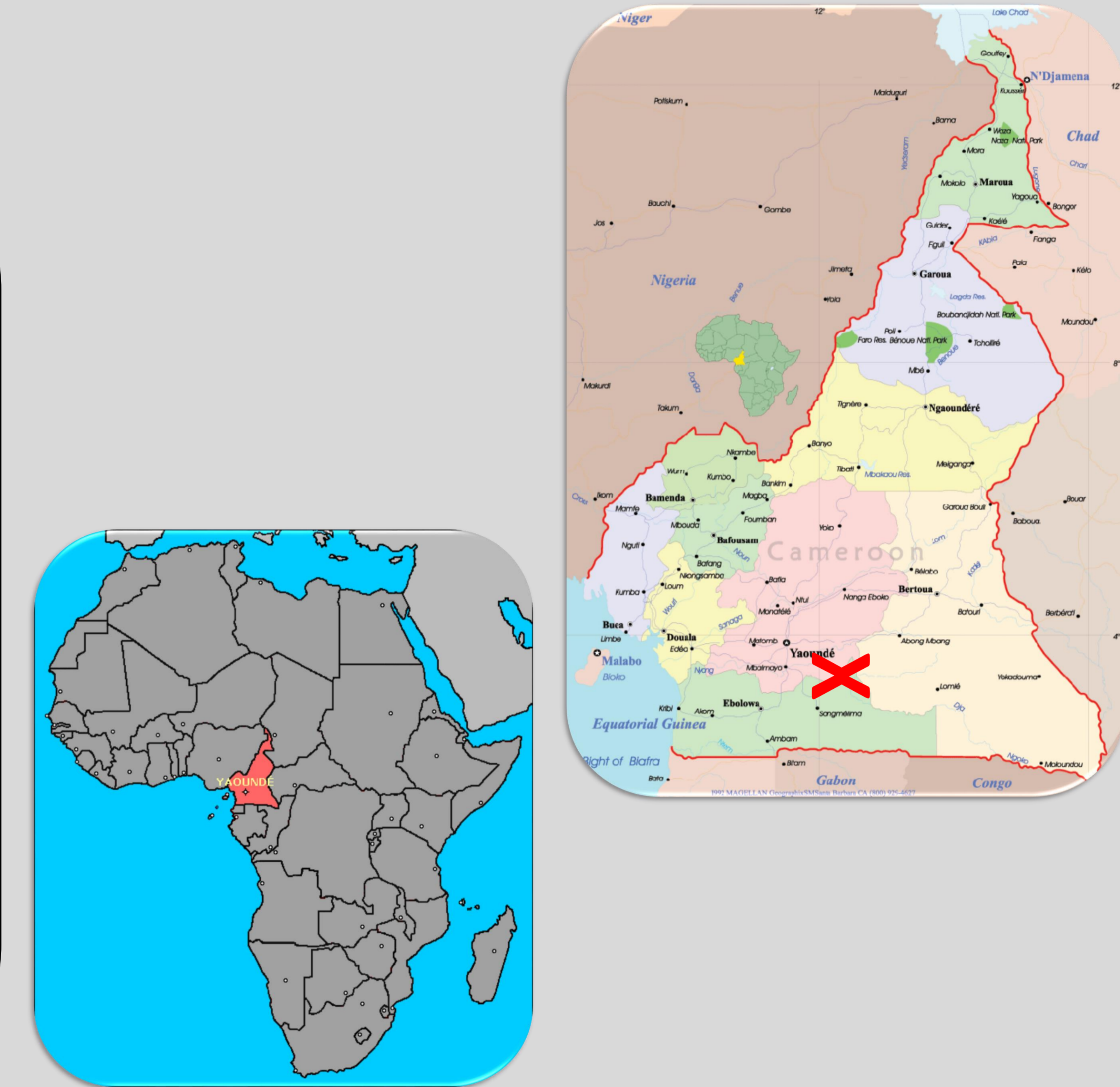
Modern wound care in a country with limited resources: teaching, state and prospects in Cameroon

Marie Thérèse Ngo Nsoga¹, Franck Wanda², Jeanine Meke², Jules Ze³, Armel Tassegning², Earnest Njih⁴, Albert Samé-Ekobo⁵, Anne Bisseck⁶, Alfred Njamshi⁷, Eric Comte^{2,8}, Hubert Vuagnat⁹

(1) Infectious diseases division - University Hospitals of Geneva, Akonolinga district hospital - Cameroon (2) International Centre for Research, Education and Care in the tropics, Akonolinga - Cameroon; (3) Akonolinga health district, Ministry of Public Health - Cameroon; (4) National Leprosy, Yaws, Leishmaniasis and Buruli Ulcer Control Program, Ministry of Public Health - Cameroon; (5) University hospital center, Yaoundé, Cameroon; (6) Division of Operational Health Research, Faculty of Medicine and Biomedical Sciences, Ministry of Public Health - Cameroon; (7) Faculty of medicine and Biomedical Sciences, Ministry of Public Health - Cameroon; (8) Institute for global health, Geneva, Switzerland; (9) Centre for woundcare, Geneva University Hospitals, Switzerland

1. Introduction

- ✓ Cameroun is a middle sized, central African country.
- ✓ Chronic wounds are found in great numbers and have a large socio-economic impact.
- ✓ Their management was found to be an often neglected but a major public health challenge due to their high prevalence and their often underestimated the severity.
- ✓ Among treatments, many use either traditional pharmacopoeia or dry gauze dressings.
- ✓ None of them being entirely satisfactory.
- ✓ Furthermore, along the Nyong valley, where the cities of Akonolinga and Ayos are settled, Buruli ulcer is highly endemic. This infectious neglected tropical disease due to *Mycobacterium Ulcerans* leads to devastating lesions.
- ✓ Modern adapted woundcare can lessen the burden of these wounds.



Institutional partners



Funding: University Hospitals of Geneva, Swiss association for wound care

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ngonsoga2000@yahoo.fr

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2. Objectives

- ✓ **Knowing:**
 - ✓ Basic skin histology and physiology.
 - ✓ Etiologies of common wounds.
 - ✓ General health conditions affecting wound repair.
 - ✓ Wound repair mechanisms.
 - ✓ Efficient simple dressings.
 - ✓ Basic treatments of general affections

- ✓ **Through the WAWLC® 6 basic principles® :**
 1. Diagnose and treat causative + systemic conditions.
 2. Maintain a moist wound environment.
 3. Protect wounds from trauma.
 4. Promote a clean wound bed, debride, control infection.
 5. Control peri-wound edema and lymphedema.
 6. Prevent disability.

- ✓ **Teachers team:**
 - ✓ Woundcare specialists.
 - ✓ Generalists, Dermatologists, Surgeons, Anesthetists.
 - ✓ Nurses, Psychologists, Physiotherapists.
 - ✓ Other relevant therapists.....

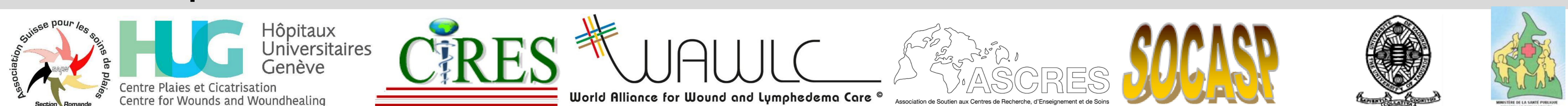


Participants during theoretical and practical phases



Multiprofessional and Multidisciplinary approach

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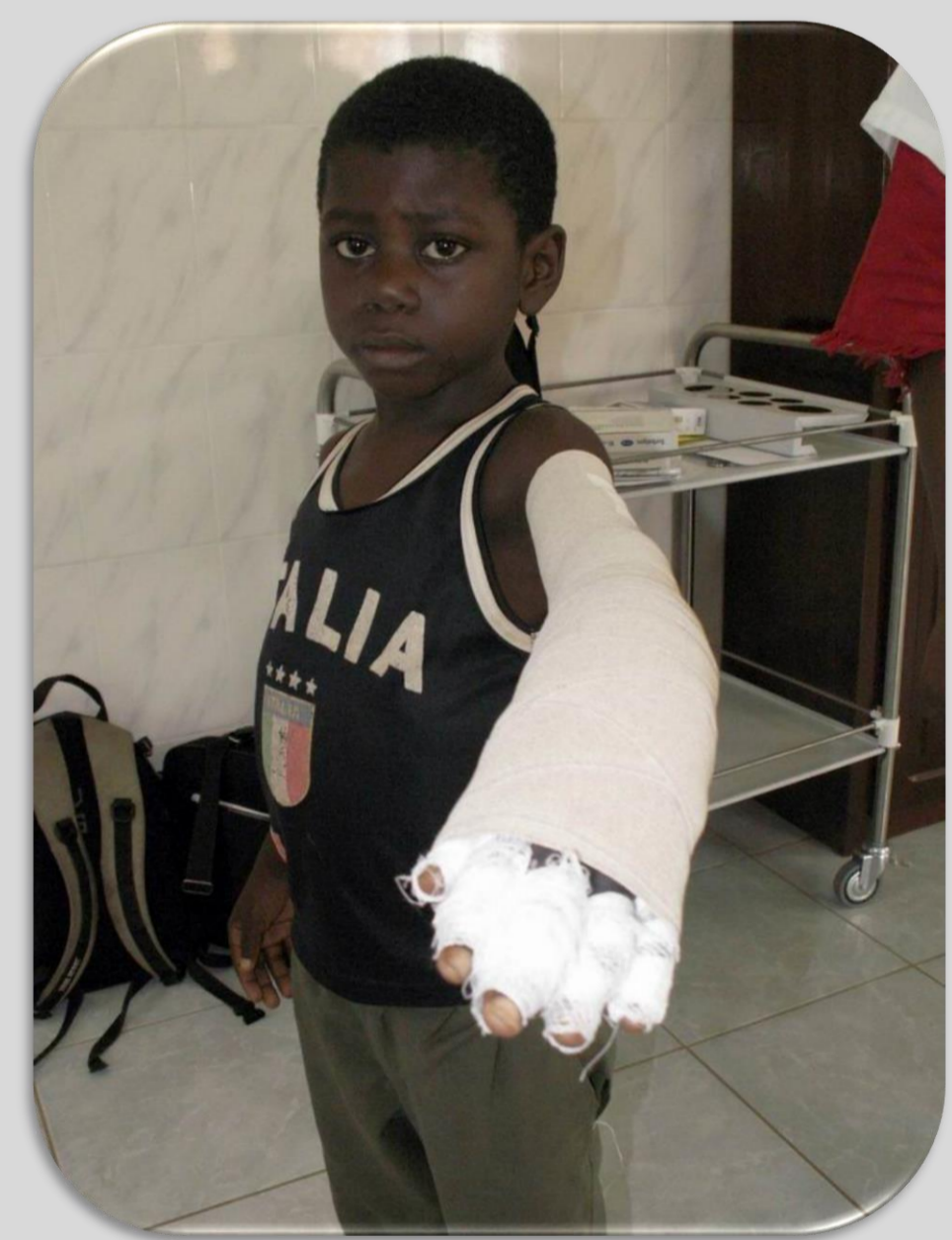
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3. Methods

- ✓ As stated before, modern adapted woundcare, even in absence of modern dressings, can lead to better healing.
- ✓ 10 days courses, based on wound bed preparation and moist environment wound healing were proposed in Yaoundé.
- ✓ Under woundcare specialists supervision, these courses were designed and mostly taught by local teachers.
- ✓ These 10 days courses included all theoretical basic's in wound healing, practical workshops and bedside teaching.
- ✓ The theoretical courses were delivered in Yaoundé, bedside teaching took place in Akonolinga hospital chronic wound ward.



Global patient management



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4. Results

Period	Students number	Participants Profile	Theoretical phase	Practical phase	Duration
2013	27	- Medical doctors (specialists and generalists), - Nurses - Physiotherapists - Paramedical staff - Students of medicine - International participants: Ivory Coast, Togo, Senegal	Yaoundé (Faculty of medicine, Mvolyé)	Akonolinga (District hospital) except in 2015	5 days theory + 5 days practice
2014	28				
2015	24				
2016	30				
2017	29				



- ✓ Global satisfaction was high.
- ✓ Participants considered changing their techniques based on high disinfectant use and dry gauze to:
 - ✓ Less disinfection use
 - ✓ Clear water or saline rinsing
 - ✓ Debridement
 - ✓ Homemade moist dressings
 - ✓ Taking care of perilesional skin
 - ✓ reducing edema
 - ✓ Being attentive to possible induced disability
- ✓ These techniques, through different records and studies in the field, have been proven to be efficient.



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5. Perspectives

- ✓ Implementing modern adapted woundcare in low resource settings is feasible and positive.
- ✓ Adequate teaching is essential for modern adapted woundcare.
- ✓ Adapted from our art, it must be adapted and delivered by local teachers.
- ✓ In this context, it's important to develop local resource-based initiatives for appropriate woundcare.
- ✓ Providing decentralized grass root training for health practitioners is essential.
- ✓ Incorporating traditional, ancestral care, is also valuable.
- ✓ Due to the paucity of caregivers, self-care must be thought of.



The road is still long, but with some help, we'll manage to reach our goal.



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