

**Need for
Surgical Care**

The burden of
surgical disease in
Uganda

The Impact

The effect of
Kyabirwa Surgical
Center

**Now Offering:
Minimally
Invasive Surgery**

A new way for rural
Uganda

YEARS 2019-2022
ISSUE 1

**Bringing
Innovation to
Global Surgery**

Meet Our Staff

A closer look at the
Ugandan team

Dare to Dream

Next steps for the
Center

**KYABIRWA
SURGICAL
CENTER**

ANNUAL REPORT



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Letter From

The Surgeon-In-Chief of Mount Sinai Health System & Director of Kyabirwa Surgical Center

Dear Readers,

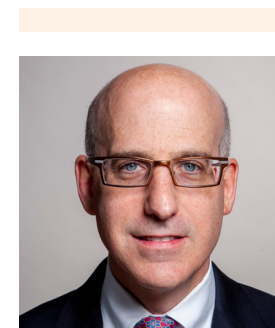
From the creation of Kyabirwa Surgical Center in 2019 to now, the team has been working hard to serve the local community, providing lifesaving surgeries to individuals who would otherwise lack access. Our aim is to not only provide high quality surgical care, but also to incorporate innovative strategies to further our shared knowledge in global surgery.

We are tremendously proud of our team and excited to share with you all that we have accomplished in these past three years.



Anna Turumanya Kalumuna, MBA

Director, Global Surgical Initiatives Inc. & Kyabirwa Surgical Center



Michael L. Marin, MD

Chair, Department of Surgery
Icahn School of Medicine at Mount Sinai
Surgeon-in-Chief, Mount Sinai Health System

Founder, Global Surgical Initiatives, Inc

The Need for Surgical Care

30% of Global Burden of Disease are Due to Surgical Conditions

There is a paucity of surgical resources worldwide, as evidenced by the 5 billion people who cannot access safe and affordable surgical and anesthesia care. Surgery, a necessary tool to treat various diseases and injuries, is often considered either too expensive or logistically impossible to provide in rural areas. So, in 2019, we set off to dispel those misconceptions and established Kyabirwa Surgical Center, a physical manifestation of what is possible.

UNMET NEED

It is estimated that 143 million additional surgeries are needed each year to meet the surgical need in low- and middle-income countries. Even when surgical and anesthesia services are available, they are often unaffordable for patients. The direct cost of these services is catastrophic for 33 million individuals each year.

SURGEON TO PATIENT RATIO

There is less than 1 surgical provider per 100,000 population in Uganda, in comparison to 55 providers per 100,000 people in the US. Most of these surgeons are located in urban areas (90% are in the capital city of Kampala), while 84% of Ugandans live in rural areas.



Dr. Moses Binoga
Bakaleke and Nurse
Sandra Nambi
working together in
the OR

AMBULATORY SURGERY AS A SOLUTION

Despite established safety and widespread use of ambulatory surgery facilities in higher income countries, this approach of providing outpatient surgeries is still underutilized in lower-resource settings. Global Surgical Initiatives is committed to bridging the gap in surgical care by establishing a freestanding ambulatory surgery center in Uganda.

KYABIRWA SURGICAL CENTER

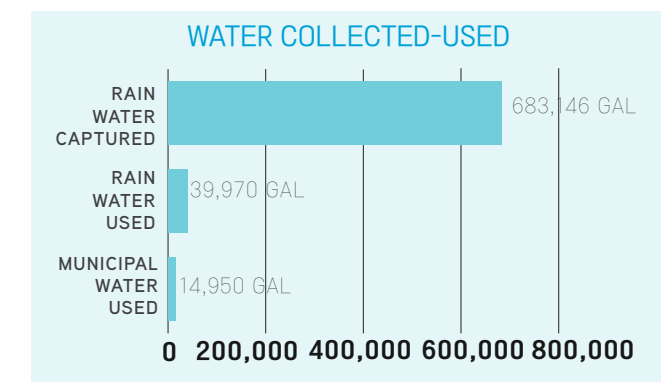
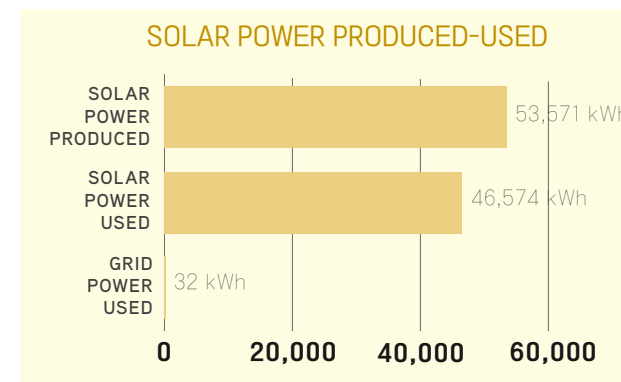
Kyabirwa Surgical Center provides high-quality ambulatory surgery to a rural region of Eastern Uganda, about 5 miles north of the closest city of Jinja. It provides accessible, affordable, and much needed surgical care for the most common and basic surgical diseases to a catchment area of 570,000 Ugandans.



KYABIRWA SURGICAL CENTER

Established 2019

Kyabirwa Surgical Center was funded by generous philanthropic donations from the Mount Sinai Hospital Department of Surgery. The award-winning center is designed as a **replicable, self-sustaining** surgical facility. It generates all its own power through solar panels, collects and stores its own water for use, and manages its own waste.



BUILT BY UGANDANS

Collaborating with regional architects and employing local contractors during the building process ensured compliance with local customs, laws, and health regulations, while also supporting the local economy by providing jobs. There are two operating rooms and seven recovery beds at the center, along with a chemistry laboratory and an imaging room equipped with a diagnostic ultrasound and an x-ray. Construction of the facility was completed in July 2019, and the first surgical cases were performed in September 2019.

RUN BY UGANDANS

The 33-person staff is composed entirely of local Ugandan health care providers and administrators, with one head surgeon, two anesthesiologists, two medical officers, and nine nurses providing direct patient care. Medical records are maintained using ClinicMaster, a cloud-based electronic medical record developed by a Ugandan-based software development company.

SURGICAL CARE FOR ALL

Patients are charged a nominal fee for surgical procedures. No one is refused surgery based on their ability to pay, and surgery is provided at no cost for those who cannot afford to pay at all.

SHARED KNOWLEDGE

Physicians at the Mount Sinai Hospital in New York City supplement the care provided at Kyabirwa Surgical Center with periodic consultation and surgical guidance during live complex surgeries. There is also collaborative learning between the institutions through discussion of uncommon cases and shared surgical knowledge.

Quality Surgical Care

Built by Ugandans | Run by Ugandans

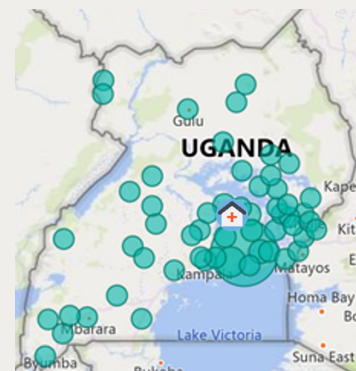
THE IMPACT

2019-2022

Over the past 2 years, Kyabirwa Surgical Center has already made significant impact in the surgical care of the region. The center has seen 7,620 patients, conducted 4,224 diagnostic imaging tests, and performed 1,383 surgical procedures. These critical improvements in surgical care have made significant advancement in the overall health of the surrounding population. The overall impact, both in terms of increasing quality of life and having a positive economic impact, indicates that surgical treatment can be successfully delivered in an ambulatory surgery setting in Uganda’s rural areas.

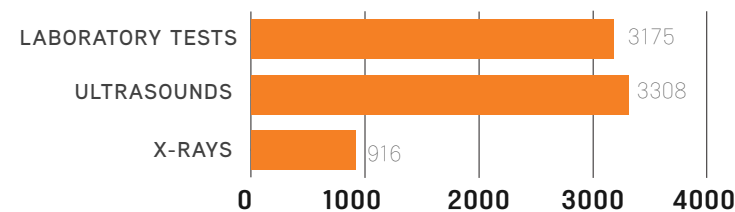
REGIONS SERVED

While many patients visiting Kyabirwa Surgical Center are from the surrounding 10-mile radius of Jinja region, patients have come from all areas of Uganda, as shown on this map. Some have travelled riding on the back of hired mopeds, some have gotten a car ride from a friend or neighbor, and some have had to simply walk. After surgery, patients who do not have a ride home will be driven home by the Center’s ambulance.



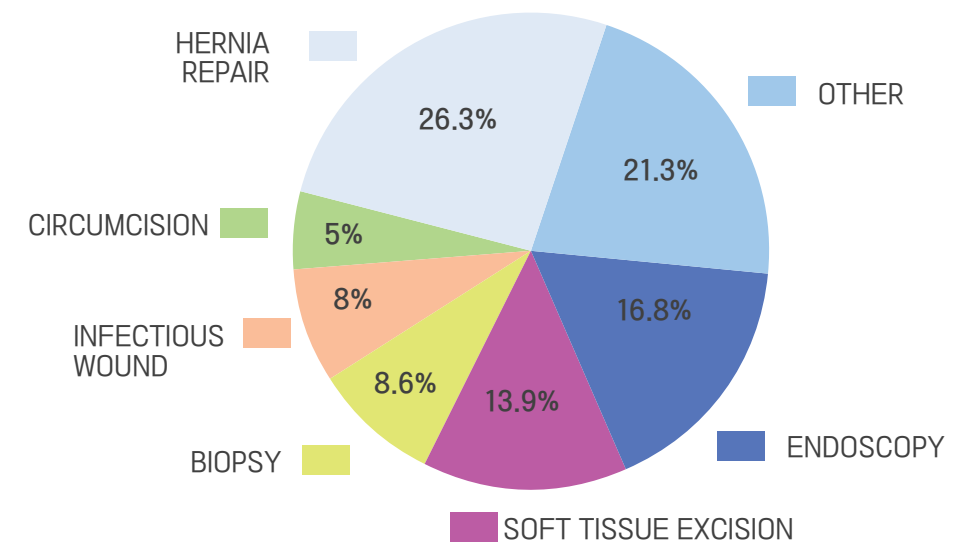
DIAGNOSTIC TESTING

In addition to being able to perform a wide variety of surgical procedures, Kyabirwa Surgical Center also offers various laboratory tests and medical imaging. These tests and imaging have allowed the physicians to make accurate diagnosis and treatment plans for the 7,620 patients seen at the center since inception.



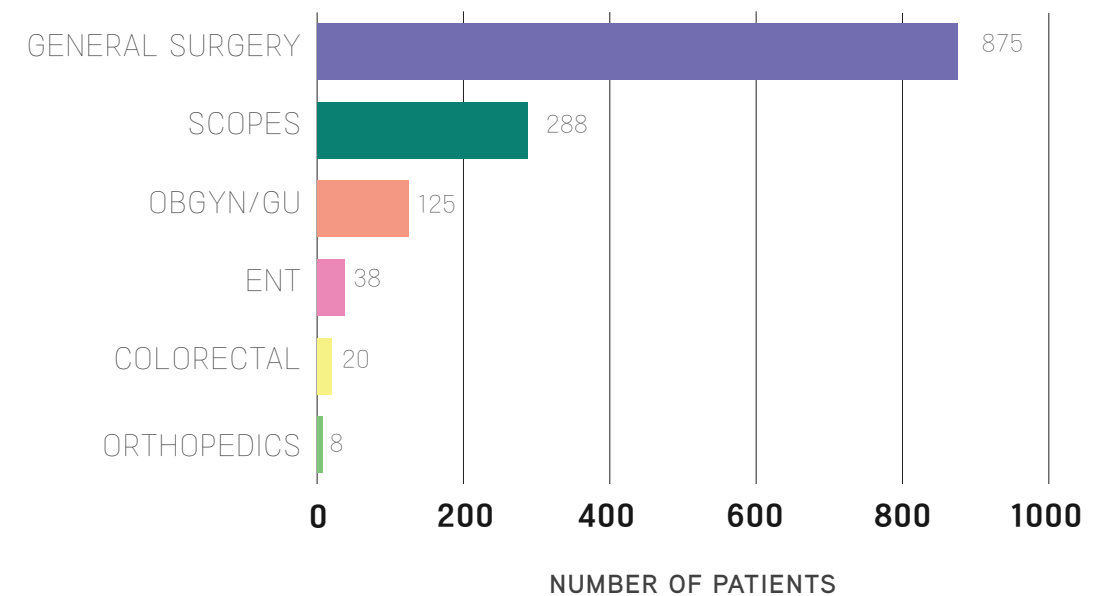
SURGERIES PERFORMED

TYPES OF SURGERIES



1078 surgeries and 277 endoscopies were performed through 2021.

SURGICAL SPECIALTIES



MEASURING IMPACT

It can be hard to demonstrate impact in global health. We can see the positive changes in the faces of our patients, but, as researchers, we need to have numbers. For those, we use disability adjusted life years (DALYs), a commonly used metric to measure how a condition affects the health of a population.

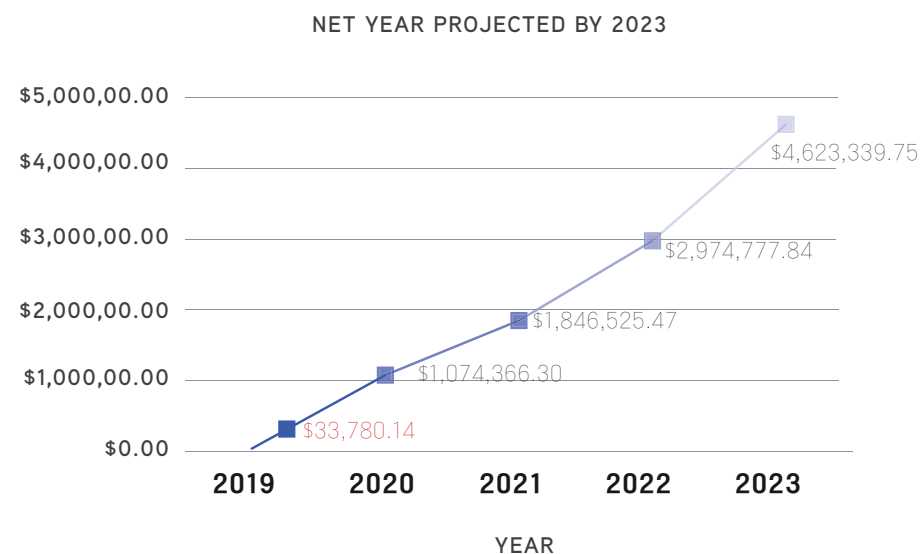
It provides the number of years lost due to ill-health, disability, or early death. Conditions have specific DALYs associated with them and DALYs caused by surgically treatable conditions can be "averted" through timely surgical care. Below are the DALYs averted by KSC since opening.

Surgery Type	Number Of Patients	DALYs Averted Per Case	DALYs Averted
Hernia Repair	356	2.996	1066.576
Incision and Drainage	72	0.656	47.232
Biopsy	117	2.435	284.895
Circumcision	68	1.157	78.676
Appendectomy	26	26.86	698.36
Hydrocelectomy	23	0.348	8.004
Thyroidectomy	13	0.725	9.425
		Total	2193.168

NET IMPACT

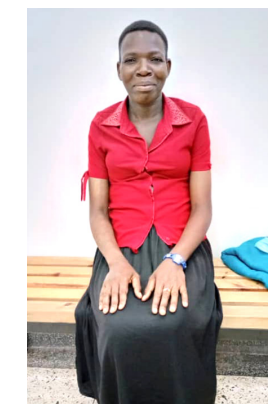
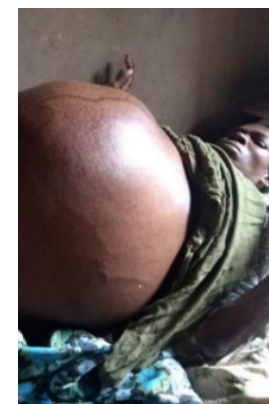
For every DALY, there is an economic impact reflecting the decrease in productivity due to the condition. This allows us to calculate the Center's "net impact" which is the economic impact minus the cost of the surgical center. The total net impact for 2020 and 2021 were gains of \$1.0

million and \$1.8 million, respectively. This reflects a 46% growth in the economic impact between 2020 and 2021. With growth at this rate, net impact in 2022 and 2023 are projected to be \$2.9 million and \$4.6 million, respectively.



KOLOSI'S SURGICAL

One Patient's Story



2018

MAY 2021

OCT 2021

DEC 2021

At age 25, Kolosi's abdomen started to grow abnormally large. After visiting multiple hospitals, her family could not afford another trip to Kampala from her village, so her abdomen continued to grow...

Kolosi received treatment at Kyabirwa Surgical Center and 15.6 liters of fluid were drained from Kolosi's abdomen, giving immediate relief.

Dr. Joseph Okello Damoi was joined by surgeons from The Mount Sinai Hospital to remove Kolosi's abdominal mass. Dr. Nebras Zeizafoun, a pathologist from Mount Sinai remotely read her specimen slides, and determined it was a benign ovarian cyst.

Kolosi is all smiles at her most recent follow up appointment, grateful for the life changing impact of her surgery

Bringing Innovation to Global Surgery

Developments in mixed reality offer an exciting opportunity to enhance training and broaden operative practice in rural settings.

Mixed reality combines aspects of the physical and virtual world. Headsets, such as the HoloLens2™, can be worn by an operating surgeon, giving remote viewers access to the surgeon's perspective. The see-through display allows the wearer to visualize their physical environment as well as any holographic objects placed into the field of vision. The technology is interactive, allowing

remote parties to superimpose drawings or other images onto real anatomy. The user can direct the technology either through voice commands or by using hand gestures.

Thus far, a HoloLens2™ headset was used to provide Dr Joseph Okello Damoi with expert intraoperative consultation in several complex surgeries. The HoloLens2™ headset demonstrates that advances in digital technology can augment surgical care in low-resource countries.



Drs. Joseph Okello Damoi and Moses Binoga Bakaleke working together in the OR, and planning their approach, while remotely assisted by a hologram of Dr Marin.



HoloLens2™

Need a Pathologist? Surgical Innovation

In Uganda, there are few pathologists available to analyze the tissue specimens obtained during surgery. To combat this barrier, we have enlisted the help of Dr. Nebras Zeizafoun, a Mount Sinai pathologist, who partners with the surgeons and laboratory technician in Uganda. Dr. Zeizafoun reads weekly pathology slides using a Nikon Robotic Microscope System shared over virtual meetings. He has remote control of the computer and microscope in Uganda, allowing him

to have full control of the position of the slides, the lens, and the focus. Dr. Zeizafoun has examined over 600 slides, diagnosing the pathology of over 100 patients. With this simple but innovative approach, Kyabirwa Surgical Center has overcome one of the most challenging barriers to providing surgical care in low-resource countries, particularly in the diagnosis of cancer.



It's Time for a Colonoscopy

In February 2020, Dr Jerome Wayne travelled to Kyabirwa Surgical Center to begin to train six Ugandan surgeons in upper and lower endoscopy. When Covid-19 complicated his ability to return to provide continued training, he piloted training Dr Joseph Okello Damoi remotely. At his home office in Connecticut, Dr. Wayne is able to see a split screen of the endoscope camera and a view of Dr Joseph's hands, allowing Dr Wayne to provide remote instructions and proctoring. We are very proud to say that Dr Joseph has performed over 100 proctored and now 100 independent endoscopies. Dr Joseph is now training the two medical officers at Kyabirwa Surgical Center in endoscopies.



Penninah Asimwe, KSC's Lab Biomedical Manager, is seated at her telepathology microscope, reviewing slides with Dr Joseph Okello Damoi (Surgeon at KSC), Dr. Nebras Zeizafoun (Pathologist at Mount Sinai), Katie Glerum (Program Manager at Mount Sinai) and Unwana Abasi (Medical Student Researcher at Mount Sinai).



Postoperative Care: Bringing it Home

With One Mobile App, One Moped, and One Nurse

Most surgical care in Uganda involves lengthy postoperative stays in the hospital, even for the most basic procedures. This can be very costly for patients and can prolong their immobility, resulting in poorer postoperative outcomes and significant patient healthcare expenditure. In addition, extended hospitalization is taxing on hospital resources and increases the burden and cost of providing surgical care.

Kyabirwa Surgical Center's model of ambulatory surgery aims to **shift the paradigm of postoperative care** toward same-day discharge with at-home monitoring by a nurse. The nurse will call each patient multiple times throughout the first 30 days after surgery, and visit the patient's home 7 days after surgery, ensuring that the patient is recovering without difficulties. All the information gathered at these encounters is collected into a mobile application, uploaded into a cloud-based electronic medical record system, and monitored by the surgeon who performed the operation.

Since June 2020, **over 600 patients** have been safely discharged with follow-up at their homes by a visiting nurse. Preliminary results thus far show no readmission for postoperative complications, no mortalities, and a very low wound infection risk.

Incorporating mobile technology into postoperative care, along with a cloud-based electronic medical record system, creates a foundation to support ambulatory surgery in low-resource countries. **The concept has the potential to revolutionize the delivery of postoperative care in Uganda and beyond.**



Nurse Mahad Habib visiting the home of a patient.



Now Offering Laparoscopic Surgery

Minimally Invasive A New Way for Rural Uganda

Kyabirwa Surgical Center is continually improving the services available to patients. Minimally invasive laparoscopic surgery was an obvious next step, made possible by the diligent work of our surgical team in Uganda, who underwent hundreds of hours of training. In collaboration with expert laparoscopic surgeons in New York City, the Center performed its first laparoscopic case in October 2021.

Across the Arabian Sea

Dr. Joseph Okello Damoi, the Surgeon-in-Chief of Kyabirwa Surgical Center, flew to India to participate in a one-month intensive training course in laparoscopic.

Bridging the Physical Divide

Through remote tele-simulation, surgeons in Uganda continue to be mentored by laparoscopic surgeons from Mount Sinai to perfect their laparoscopic skills. During monthly teleconferencing, Ugandan surgeons practiced their Fundamentals of Laparoscopic

A 7,000-mile Journey

Three laparoscopic specialist surgeons from Mount Sinai (one laparoscopic surgeon, one surgical oncologist, and one urogynecologist) traveled in October 2021 to collaborate with the local Ugandan team in launching laparoscopic surgery at the Center. The week ended with laparoscopic removal of an appendix performed entirely by the Ugandan team.

Quality matters

To ensure the Center is providing laparoscopic surgery with the utmost of safety, the Ugandan team will continue to be proctored by Mount Sinai surgeons via remote live telementoring this year.

Dr. Arthur Emuro, Dr. Umut Sarpel, Swaleh Mwamisah, Dr. Ann Tran, Dr. Daniel Herron, and Dr. Joseph Okello Damoi meeting outside the digital world and excited to collaborate in person.



Community Outreach

From the Theatre to the Community



In addition to the outstanding surgical care available at Kyabirwa Surgical Center, the surgical facility engages the community through various initiatives to improve surgical health. These outreach projects not only build a sense of community but also expands the health knowledge of the local Ugandans.

Health Education on the Radio

Kyabirwa Surgical Center collaborates with Busoga One Radio, a local radio station, to provide surgical health education sessions. A surgeon from the center joins an evening talk show to discuss a variety of health topics that impact the local region and afterward answers questions from listeners who are interested in learning more. A total of six radio sessions have occurred, addressing other topics such as breast masses, non-healing wounds, and goiters.



Busoga One Radio

Dr. Moses Binoga Bakaleke telling everyone on the radio about the great work being done at KSC.

Primary & Palliative Care Support

Located adjacent to Kyabirwa Surgical Center, Soft Power Health is an organization that provides primary healthcare, health education and prevention, and health-promoting activities for people in the area. Kyabirwa Surgical Center and Soft Power work intimately together to improve the overall health of the community Kyabirwa Surgical Center has also teamed up with Rays of Hope Hospice, a local non-profit, interfaith organization, to improve palliative care support.

Community Outreach

KSC staff travel to nearby communities every Monday, Tuesday, and Wednesday to hold community gatherings. At these events, a nurse explains the services offered by KSC while and answers questions from the audience. Meanwhile, another nurse is stationed in a nearby tent fielding consultations from the community. Those who appear to need surgical assistance are then told to come to KSC for a formal consultation.



Nurse Sandra Nambi in the community, spreading awareness and answering questions.

Women's Cancer Awareness

Kyabirwa Surgical Center, along with Soft Power Health and Rays of Hope Hospice, came together in October 2021 for a Women's Cancer Awareness Walk. Staff distributed information around the local villages educating the community on the cancers most affecting the female population. The event ended with the exciting announcement that patients at Rays of Hope Hospice would receive free cancer care at the Kyabirwa Surgical Center for the rest of 2021!

Meet Our Staff

Message from the Director Anna Kalumuna At Kyabirwa Surgical Center



Being part of the implementation of the amazing vision of “breaking barriers to surgical care” in the remotest of places in Uganda offers me a lot of gratification. Serving the helpless and most vulnerable communities gives a sense of validation to us as we watch forgotten smiles emerge following surgical interventions of conditions previously written off. It’s a beautiful tale when a patient’s life returns to normalcy and hope is restored without having to bankrupt the already impoverished communities.

I have watched the Center emerge from a muddy, messy construction site to a center of excellence with novel approaches to surgical care in this region. The team is amazing. Everyone is ready to give it their best and to progress. From construction masons to equipment maintenance technicians, we are meticulously trying to emulate standards at Mt. Sinai—it’s a beautiful story that I am proud to be a part of!

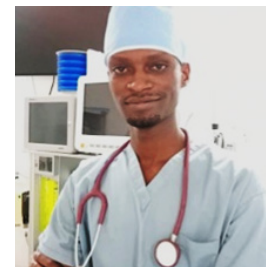
And it’s not just about the Center—the entire community is transformed! Roads are now accessible, and because of the intrigue surrounding the center, political leaders now visit the once-forgotten communities to see the amazing work going on. Kyabirwa Surgical Center has brought a lot of hope, and I could never have asked for a better place to work and an amazing team to lead. It is my pleasure to introduce you to some of the leadership at KSC.



Ambrose Nuwahereza

DIRECTOR OF NURSING SERVICES

I am excited to be part of the Kyabirwa Surgical Center where Lives are changed through surgical services. It is so rewarding to me seeing a patient get relieved of the surgical problem and see them recover after surgery.



Dr. Arthur Emoru, MBChB, MMed

ANESTHESIOLOGIST

At KSC, I have the drugs and equipment to provide a high-quality service to the most needy population. For this I am grateful.



Cathy Kulsum Kyazike

HOUSEKEEPER

The KSC management has created an environment that cares and listens to its staff irrespective of cadre.



Ivan Lumala

CHIEF TECHNOLOGY OFFICER

I was born 30 miles from Kyabirwa but growing up I had never heard of Kyabirwa even though it was close to a waterfall that many tourists would visit. But I was surprised when my taxi driver who picked me up from Kampala (50 miles) away asked if I was going to the Hospital in Kyabirwa! In just 3 years, even people in Kampala know about Kyabirwa – amazing!



Dr. Joseph Okello Damoi, MBChB, MMed

HEAD OF SURGERY

The Kyabirwa Surgical Center has undoubtedly made so much difference in its two years of existence. Uganda surely needs more of such model centers. I’m glad to belong here at a time like this.



Mahad Habib

FIELD NURSE

I am excited to work at KSC as a field Nurse giving Professional care to post-surgical patients at their homes, a system that is very new to the community and I think this will motivate more patients to come for our services.



Phoebe Monica Kwagala

SOCIAL WORKER

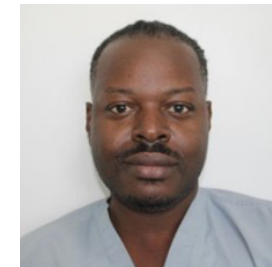
I am very excited to see that the number of no-shows for surgical procedures at KSC reduces and am very eager to see KSC excel in extending accessible and affordable surgeries to all beneficiaries in the region. We are ensuring that the information gap that yields myths and fears and hence no-shows is addressed. My best appreciation goes to Anna, our Administrator, who has kept the standard of the facility to the expectations of the public but also of our funders, Mt Sinai.



Dr. Moses Binoga Bakaleke, MBChB

MEDICAL OFFICER

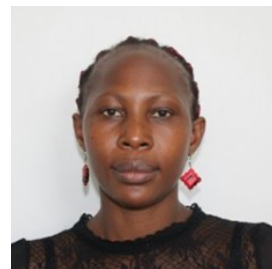
KSC has graced us with the opportunity to extend services to the vulnerable. It is always wonderful to see patients who have gone to many places in vain become hopeful in our rooms because the team is willing to do their best to offer solutions. The benefits of having support from Mount Sinai surgical team cannot be stressed enough. We have grown in knowledge and skills. No doubt, KSC is making a difference for the health care provider and the patient. I hope that we continue breaking the barriers to surgical care in this nation.



Saul Kibirango

MAINTENANCE MANAGER

KSC is a place that gives everyone the opportunity to fully express and exhibit their potentials and abilities. It's exciting to work with a facility that adopts edge cutting state of art technology.



Penninah Asiimwe

LAB BIOMEDICAL MANAGER

KSC has given us an opportunity to work with the very best team consultants in NY. This has given us more exposure and knowledge especially in pathology and we are looking at being the best center in the east of the country.



Dare to Dream

Next Steps



Coming Soon

Kyabirwa Surgical Center **Addition**



1. Kitchen
2. Storage
3. Cafeteria
4. Medical Equipment Workshop
5. Open Office Area
6. Laboratory
7. Janitor's Closet
8. IT
9. Director's Office
10. Conference Room
11. Dr. Team Office
12. Staff Conference /Lunch Room
13. Staff Simulation Training
14. Toilet
15. Lockers Male/Female
16. Clean Storage
17. Doctor's Overnight Stay
18. Clean Storage Room
19. Nurse Station / Medicine
20. Pantry
21. Patient Overnight Stay
22. Covered Walkway
23. Private Verandah
24. Isolation Room

1 1 1 1 1 4M

Expanding the Horizon

Due to remote location and the nature of surgical care for rural patients, there is a need for overnight stays for some patients after their procedure. The new facility, an annex to the existing structure, will have an overnight ward, simulation centers, and a state-of-the-art medical laboratory, as well as staff support facilities.

Fitting to the Environment

The roof of the building is designed to collect rainwater and facilitate ventilation and air movement while resembling the famous rapids of the Nile River. The building will be clad with locally made clay tiles, the steel fabricated by local ironworkers, and local skilled and unskilled labor used for the construction.

Advancing the Human Genome

To adequately understand and address some of the more complex surgical problems faced by our patients, large quantities of data are needed. Our biorepository will be a collection of unique tissue samples representing various disorders, as well as a comprehensive digital resource consisting of de-identified clinical information, digitized pathology slides, and genetic data for future processing. We will collect and process tissue as well as extract DNA, RNA, and serum to enable studies to understand the genetic causes of conditions treated at Kyabirwa Surgical Center as well as the surrounding healthcare facilities.

This rich dataset will form a resource for Ugandan scientists to better understand the etiology of various conditions and foster international collaboration. By building research capacity in Uganda and increasing access to essential and rare biological specimens, we can provide more targeted care to patients in the future.

Construction scheduled to be **completed in 2023**



Compassion & Generosity

The donors to this program both helped the team imagine the possibility of such a center in Kyabirwa and provided the funding to fulfill the vision. Their time, spirit, and incredible generosity is what allowed us to build this facility—the first of its kind and one with the potential to change the way we provide international surgical care.

They are a shining example of what can be accomplished when you combine a passion for helping others with the power of philanthropy. And thanks to the successful work being done in this one small village in Uganda, perhaps this kind of care can next be achieved in hundreds of other places around the world. Because of our forward-looking supporters, countless individuals throughout Uganda—and beyond—will live happier, healthier lives, now and for years to come.

If you are interested in learning more or would like to make a gift of your own, please contact *Jessica Shaffer*, Executive Director of Development, at jessica.shaffer@mountsinai.org or **646-605-8761**. She welcomes the opportunity to share more details and discuss the role you can play in this remarkable initiative.

Getting It Done, Together

While there are many who generously supported this endeavor, we must acknowledge **Steve Miller** and the Steve Miller Band who, in January 2019, donated their time and tremendous talent to put on a benefit concert, the proceeds of which went directly to fund this initiative.

We also must express our unending gratitude to **Jay Lieberman** of the *Derfner Foundation*, and **Mark and Laura Yockey**. If not for their inimitable leadership, thoughtful guidance, and unparalleled philanthropy, this facility could not have been built.

Jay, Mark, and Laura have been remarkable collaborators from the very beginning, going above and beyond to provide us with the expertise and resources that were critical in launching this project. They helped crystalize our mission and joined numerous exploratory trips overseas to

determine which site might be best suited for a partnership with Mount Sinai. And when we were trying to determine how this endeavor might be funded, they not only made their own substantial philanthropic gifts but worked creatively to get other donors on board.

The Lieberman Family and the Yockeys continue their unstinting support to this day. Whenever it becomes clear that something important is needed at the center—such as the annex now under construction—they answer the call. Visiting Uganda many times over the years, they have come to know and care about the community and our leaders on the ground. They are exceptional members of our Kyabirwa family, and for that, we are truly grateful.

Once again, we extend our profound thanks to them—and to all of those who have joined us on this journey.





Special Thanks

Numerous individuals and organizations came together to provide guidance, support, proctoring, and direct assistance to the Kyabirwa Surgical Center and its staff. A special thank you to everyone for their countless hours of dedication and commitment to making the Center a model for quality surgical care in rural Uganda.



Professor Joel Okullo,
Chairman Of Uganda Medical And Dental Practitioners Council

William Kadhumbula Gavula Nadiope, Kyabazinga
King Of The Busoga Kingdom

The Jinja District Health Office and City Health Office

All the leadership within Budondo Subcounty who promote awareness about the center are our ambassadors.

MOUNT SINAI TEAM

Brian Coakley, MD,
Assistant Professor of Surgery
Pediatric Surgery

Daniel M. Herron, MD,
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Bariatric, Abdominal, and Laparoscopic

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