

Reconstructive Surgery in the Solomon Islands

A 2002 Interplast Odyssey

From April 2 till April 18 2002, an Interplast team from the Netherlands visited the Solomon Islands to perform reconstructive surgery.

It consisted of the following members:

Dr. H.P. de Bruijn, MD, PhD, plastic surgeon

Mrs. M.I. Burkink-Abbink, OP nurse

Dr. F. L. van Eenennaam, MD, anaesthetist

The mission was financed by Interplast Germany, Munich section.

The country

The Solomon Islands consist of a group of 998 islands, atolls and reefs scattered over an area of 1600 by 1000 kilometres south east of Papua New Guinea, located in the Melanesia region of the Pacific, just south of the equator. According to the 1999 census it accommodates 409.000 inhabitants.

Although in global perspective the Solomon Islands accommodate a small population, it is one of the larger countries in the Pacific islands region. With a 121st place, the country ranks low on the Human Development Index. Population growth is 2.8% annually, which is among the highest in the world.

The literacy rate is around 76% (83% for males, 68% for females). The majority of the population lives from subsistence agriculture, hardly or not participating in the cash / money economy. The great majority of households participate in the production of food for own consumption. As the diet in general is well balanced with plenty of fish and enough fruits and vegetables, malnourishment is rare. The staple food is yam, cassava, taro and some imported rice. HIV seems to be no item. A few years ago one case was detected.

The Solomon Islands potentially have a number of sources of foreign currency, like coconut plantation (palm oil), fish cannery, logging (tropical timber) and a goldmine. Unfortunately the economy collapsed and has come to a practical halt after the ethnic tensions and civil unrest 2 years ago on the main island of Guadalcanal between immigrants of the Island Malaita (Malaita Eagles Force) and the local Guadalcanal residents, represented by the Isatabu Freedom Movement. This resulted in the departure of almost all expatriates from the country and demolishing and closure of coconut plantations and the goldmine. Due to mismanagement / misconduct of the government thereafter, most foreign aid donor countries, the IMF, the World Bank and the Asian Development Bank have stopped their support to the Solomons, resulting in further collapse of general means. For instance the budget for health has been reduced to 60%, which means that a lot of essential medical services cannot be carried out.

The medical infrastructure

Due to the ethnic tensions and collapse of the economy the medical infrastructure was severely impaired. In the main hospital of the country, the General Referral Hospital in Honiara, only 12 out of the proposed 35 medical doctors and specialists were available. There was a severe shortage of medical supply. The second largest hospital of the country in Ghiso was virtually out of working order, due to lack of doctors and supplies. The remaining smaller hospitals and dispensaries faced the same problems of lack of support and supply.

The plastic and reconstructive infrastructure

In the past several plastic and reconstructive surgical teams from Australia have visited the Solomon Islands. Due to the ethnic tensions no team had visited the country for two years. The amount of patients to be operated on was increasing. In the beginning of 2002 there was again for the year to come no certainty of an Australian reconstructive team visiting, as Australia considered the situation still to be unsafe.

Due to this fact, the surgeon in charge and the medical superintendent of the hospital, in concordance with the Ministry of Health had asked the above mentioned team to come to the Solomon Islands in order help reducing the waiting list of patients for reconstructive surgery. Locally employed Europeans regarded the political situation to be safe enough for a team to visit the country.

Dr. Hermann Oberli, head of the surgical department of the General Referral Hospital, had made all the arrangements for the team to be able to operate. Through radio broadcasts and newspapers the population of the Solomons was informed that a reconstructive team was coming. A special ward was arranged to accommodate the patients. A member of the medical staff was assigned to perform the pre-op check-up and post-op controls. Two out of the three OP theatres were available for reconstructive operations. The facilities in theatre were, considering to be third world conditions, of royal class, thanks to endless efforts of Hermann Oberli to obtain material and supplies from Europe. The local staff was very skilled, conscious, helpful and friendly.

The patients

In total 60 patients were operated on in the General Referral Hospital. 210 Patients were seen in outpatient clinic, mainly for consultation and partly prior to admission for operation.

There was a striking high number of keloid and congenital midline defects, among these some giant meningo-myeloceles. Two patients were rejected for surgery due to poor health conditions. Beside a few partial skingraft takes, no serious complications were encountered.

List of operations:

Cleft lip and palate	19
Hypospadias	1
Congenital midline defects / meningo-myelo celes	4
Dermoid / branchiogenic cysts, teratoma	3
Post burn / trauma contractures	11
Old flexor tendon injuries	2
Congenital deformities	6
Benign tumors, cysts, keloid	12
Malignant tumors	2

Local training

Attempts were made to train and instruct local staff and medical doctors. This appeared to be only partly possible. Due to extreme shortage of medical staff very few spare time was available for local doctors, due to the high workload.

Transport and housing

It is a long way of travelling to the Solomons from Europe. Thanks to kind support of Singapore Airlines and Solomon Airlines enough overweight could be carried along to bring in all the needed material and supplies for the team.

Thanks to the very kind hospitality of Hendrik and Ellen van der Heijden, the team found the best lodging possible in the Solomons with unsurpassed views from the veranda with a cold beer and three Michelin star meals.

The Ministry of Health kindly provided necessary support, cooperation and local transport.

The future

If the political situation settles, Interplast Australia is likely to resume future Interplast missions to the Solomons. If this is not the case most likely another Interplast team from Europe will be asked to assist the Solomons in future. It is not possible at this time to foresee the situation in the near future. The presence of Dr. Hermann Oberli can not be overestimated. Most likely he and his wife Elisabeth (thanks for all you have done to make us feel welcome and comfortable) will leave the Solomon Island in 2003. Interplast will have to reconsider the local infrastructure at that time before sending new teams.

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Dr. Hans. P. de Bruijn

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