Policy Briefing:

Sustainable Cardiac Surgery in Cameroon and Sub-Saharan Africa

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Overview:

This policy briefing synthesises key insights from the 30th edition of the Cameroon Townhall for Healthcare Professionals, held on July 31, 2021, focusing on the theme "Sustainable Cardiac Surgery in Sub-Saharan Africa: Are We Getting There Any Time Soon?" presented by Dr. Clarence Pingpoh, cardiac surgeon at the University Heart Center Freiburg-Bad Krozingen, Germany.

Context:

Rheumatic heart disease affects mainly young people in poor countries, and cardiovascular disease is rising across Africa. Cameroon has one regular cardiac surgery centre, at Shisong, run by a religious order, and Cameroonians who can pay are often sent abroad. Participants included cardiac surgeons, cardiologists and other specialists in the diaspora.

Key Issues:

1. **Missing diagnosis and data:** Few Cameroonians ever receive an echocardiogram and there is little surveillance of rheumatic or congenital heart disease, so the burden is invisible to decision makers.
2. **Cost and financing:** With about 94 percent of health spending out of pocket and surgery costing several thousand euros, most patients cannot pay.
3. **Fragmented models:** Medical tourism, humanitarian missions and privately run centres are not integrated into the national health system and struggle to last.
4. **Retention and credentials:** Staff trained abroad often do not return, returning specialists find no platform, and there is no board to certify subspecialists.
5. **Political will:** Speakers agreed that experts and much of the skilled staff exist, and that government commitment is the main missing piece.

Discussion Highlights:

- Cameroonian cardiac surgeons, cardiologists and anaesthesiologists abroad said they are willing to help build a programme.

- A cardiac centre needs a steady flow of diagnosed and referred patients to maintain safe volumes.
- Rwanda's national insurance and Kenya's government-led programme were cited as examples.
- Cardiac rehabilitation should be built in from the start.
- Members proposed a coordinated Town Hall cardiac surgery mission to Cameroon.

Recommendations:

- **Put cardiac care in national planning:** MINSANTE should recognise rheumatic and congenital heart disease and cardiac surgery in the national health strategy and designate a public referral centre linked to a university teaching hospital. First step: a costed plan drawn up with diaspora surgeons and the Shisong and Douala teams.
- **Build diagnosis and referral:** Regional delegations and training schools should equip district and regional hospitals with basic echocardiography and train primary care staff to detect heart disease and refer, starting with school-age children at risk of rheumatic heart disease.
- **Finance through coverage:** MINSANTE and partners should include cardiac surgery, at least for children and rheumatic valve disease, in the coverage package being developed, and remove import duties on donated cardiac equipment.
- **Train and retain:** MINSANTE and the Ministry of Higher Education should pair scholarships abroad with return contracts and guaranteed salaries for the first years back, and create posts for returning specialists.
- **Certify specialists:** The National Order of Physicians should set up verification of specialist credentials with documented case requirements and speed up recognition of foreign diplomas.
- **Coordinate diaspora missions:** The Town Hall and diaspora professionals should organise missions that train local teams in partnership with public hospitals, so that each mission leaves skills behind.

Next Steps: The Chair proposed working with Dr. Pingpoh towards a cardiac surgery mission once conditions allow. The next Town Hall was set for a fortnight later.

Conclusion: Cameroon has much of the expertise needed for sustainable cardiac surgery, in the country and in the diaspora. What it lacks is a government-backed plan that links diagnosis, financing, training and retention, and the session called for that plan to start now rather than after the burden grows.

Prepared by the Co-Moderators, Cameroon Townhall for Healthcare Professionals, from the session of July 31, 2021. Recording: https://www.youtube.com/watch?v=utrcTcUXUJo