

Surgeons OverSeas (SOS)

Annual Report for 2012

January 2013

Letter from the Directors

Surgeons OverSeas (SOS) began from the modest idea of creating an organization in New York to link surgeons interested in working in developing countries. What started with a small, local group of passionate and dedicated surgeons has evolved into an international organization with a membership of over 200 surgeons that spans the globe - all with a common goal: saving lives in developing countries by improving surgical care.

2012 was a great year for SOS with an expansion of our advocacy and research efforts.

Programmatically, we continued our efforts in Sierra Leone with our partner Dr. TB Kamara. We support Dr. Kamara and a junior surgeon to attend the American College of Surgeons annual clinical conference in Chicago to present their research, conducted our Surgeons OverSeas Assessment of Surgical needs (SOSAS) survey and sent a container of supplies and equipment to the Sierra Leone Ministry of Health and Sanitation.

We also supported the visit of a surgeon and operating room nurse to Kamuzu Central Hospital in Malawi for 3 months.

SOS members participated in multiple global conferences and published 17 important research papers in peer-reviewed medical journals.

We have met an unbelievable array of surgeons, physicians, residents, students, and laypeople who share our passion for addressing basic surgical needs throughout the world.

We look forward to expanding our membership and supporters as we continue with our mission to save lives in developing countries by improving surgical care.

SOS Executive Board of Directors

T. Peter Kingham, MD
President

Adam L. Kushner, MD, MPH, FACS
Surgeon/Director

New York, NY
January 2013



Vision

Death and disability from surgically treatable conditions in developing countries will decrease to approach rates seen in developed countries.

SOS will be recognized as a global leader in the improvement of surgical care in developing countries.

Mission Statement

Surgeons OverSeas (SOS) saves lives in developing countries by improving surgical care.

SOS achieves this through collaborative training, funding, and research initiatives.

Who we are

Bios

T. Peter Kingham, MD is an assistant attending hepato-biliary surgeon at Memorial Sloan-Kettering Cancer Center. He has participated in missions to Malawi, Mexico, Sierra Leone, South Africa and Tanzania, and was a Yale/Johnson & Johnson international health scholar for surgery. As part of his residency training at New York University Hospital, he did two years of cancer research at the Memorial Sloan-Kettering Cancer Center and started a certificate degree program in international surgery.

Dr. Kingham has an M.D. from SUNY Stony Brook School of Medicine and a B.A. from Yale University.

Adam L. Kushner, MD, MPH, FACS is a board certified general surgeon who practices exclusively in developing countries. He is an Associate in the Department of International Health at the Johns Hopkins Bloomberg School of Public Health, a Lecturer in Surgery at Columbia University and has worked as a general surgeon and educator in the Democratic Republic of Congo, Ethiopia, Haiti, India, Liberia, Malawi, Sierra Leone and Sudan, led landmine assessment missions to Azerbaijan and Kosovo, conducted human rights assessments in Iraq, taught trauma care and landmine injury management in Colombia, Ecuador and Nicaragua, and worked as a health specialist following the 2005 tsunami in Indonesia. Since 2003 he has participated in US military training exercises as a subject matter expert for human rights and humanitarian assistance issues and is a member of the planning committee of the World Health Organization's Global Initiative for Emergency and Essential Surgical Care.

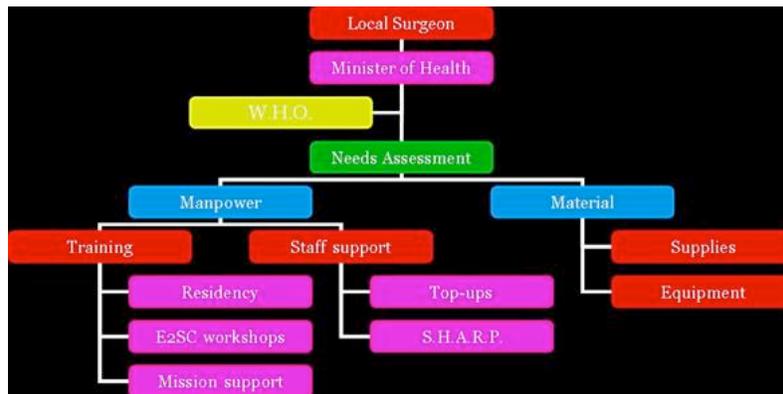
Dr. Kushner completed his general surgery residency at the University of Texas Health Science Center - San Antonio, has an M.D. from the Mount Sinai School of Medicine, an M.P.H. from Johns Hopkins, and a B.A. from Cornell University.

What we do

SOS is an organization with a mission of saving lives in developing countries by improving surgical care. We accomplish this via three programmatic arms: **Direct interventions and missions, Advocacy** and **Research**.

Direct interventions and missions

The SOS model for interventions (illustrated below) entails identifying local surgeons in host nations and in collaboration with the Ministry of Health and the World Health Organization undertaking a needs assessment of surgical capacity. Subsequently interventions are planned based on manpower and material needs.



One of the biggest problems affecting health facilities in resource poor environments is the lack of highly trained health personnel capable of performing safe surgery. SOS endeavors to help with this situation both financially and academically.

The emphasis of SOS missions continues to be on teaching skills and enhancing local capabilities rather than providing direct patient care.

Advocacy

To raise awareness of the need for surgery in developing countries, SOS serves as a focal point for surgeons and others interested in knowing about surgical work and conditions throughout the world. SOS maintains a website (www.surgeonsoverseas.org), a member and facility database, and publishes a newsletter. SOS acts as a resource to provide background information and standards on how to work and function in resource poor environments. Information is available through the SOS website and through communication with SOS members.

SOS was recognized by the United Nations and give Special Consultative Status.

SOS initiated the drafting of a World Health Organization World Health Assembly resolution calling for increased resources for Surgical Care and Anesthesia. We actively contacted Ministries of Health around the world to propose and support such an item.

SOS is actively involved in social media and spreading information related to SOS programs and global surgery.

Twitter: www.twitter.com/SurgeonsSOS

Facebook causes: <http://www.facebook.com/surgeonsoverseas>

YouTube : www.youtube.com/SurgeonsSOS

Research

SOS looks to support research into the global burden of surgical disease. We believe that before policy makers and donors will allocate additional resources for global surgery there needs to be a better definition of the underlying problem.

SOSAS, the Surgeons OverSeas Assessment of Surgical need survey was completed in Rwanda and Sierra Leone and the results were published. Addition sub-analysis is ongoing and will be published shortly.

In 2012 seventeen papers were published in medical journals and include:

1. Thumbs A, Borgstein E, Vigna L, Kingham TP, Kushner AL, Hellberg K, Bates J, Wilhelm TJ, Self-expanding metal stents (SEMS) for patients with advanced Esophageal cancer in Malawi: An effective palliative treatment, *J Surg Oncol* 2012;
2. Leow JJ, Brundage SI, Kushner AL, Kamara TB, Hanciles E, Muana A, Kamara MM, Daoh KS, Kingham TP, Mass casualty incident training in a resource-limited environment. *Br J Surg* 2012;
3. Groen RS, Sesay SB, Kushner AL, Dumbuya SS, Three-stage repair of a giant inguinal hernia in Sierra Leone: A management technique for low-resource settings, *JSCR* 2012; 12:8.
4. Leow JJ, Pozo ME, Groen RS, Kushner AL, Social media in low-resource settings: A role for Twitter and Facebook in global surgery? *Surgery* 2012;
5. Groen RS, Samai M, Petroze RT, Kamara TB, Yambasu SE, Calland JF, Peter Kingham T, Guterbock TM, Choo B, Kushner AL, Pilot Testing of a Population-based Surgical Survey Tool in Sierra Leone, *World J Surg* 2012;
6. Groen RS, Samai M, Kamara TB, Kushner AL, The unmet surgical disease burden in the developing world. *Lancet.* 2012;379(9816):616 .
7. AL Kushner, C Kallon, TB Kamara, Free health care in Sierra Leone: the effect on pediatric surgery, *Journal of Pediatric Surgery* 47 (3), 628-629.
8. Pozo ME, Leow JJ, Groen RS, Kamara TB, Hardy MA, Kushner AL, An overview of renal replacement therapy and health care personnel deficiencies in sub-Saharan Africa, *Transpl Int*, 2012;
9. Groen RS, Kamara TB, Dixon-Cole R, Kwon S, Kingham TP, Kushner AL. A Tool and Index to Assess Surgical Capacity in Low Income Countries: An Initial Implementation in Sierra Leone, *World J Surg.* 2012 Apr 10.
10. Lagrone LN, Sadasivam V, Kushner AL, Groen RS, A review of training opportunities for ultrasonography in low and middle income countries, *Trop Med Int Health*, 2012; 17(7): 808-19.
11. Leow JJ, Groen RS, Kingham TP, Casey KM, Hardy MA, Kushner AL, A Preparation guide for surgical resident and student rotations to underserved regions, *Surgery*, 2012; 151(6): 770-8.
12. Kushner AL, Groen RS, Kamara TB, Dixon-Cole R, Daoh KS, Kingham TP, Nwomeh BC, Assessment of Pediatric Surgery Capacity at Government Hospitals in Sierra Leone, *World J Surgery*, 2012 Aug 1.
13. Groen RS, Samai M, Stewart KA, Cassidy LD, Kamara TB, Yambasu SE, Kingham TP, Kushner AL, Untreated surgical conditions in Sierra Leone: a cluster randomized, cross-sectional, countrywide survey, *Lancet*, 2012 Aug 13.
14. Henry JA, Windapo O, Kushner AL, Groen RS, Nwomeh BC, A survey of surgical capacity in rural southern Nigeria: Opportunities for change, *World J Surg*, 2012 Sept 6.
15. Hughes CD, McClain CD, Hagander L, Pierre JH, Groen RS, Kushner AL, Meara JG. Ratio of Cesarean Deliveries to Total Operations and Surgeon Nationality Are Potential Proxies for Surgical Capacity in Central Haiti. *World J Surg.* 2012 Sep 18.
16. Gyorki DE, Muyco A, Kushner AL, Brennan MF, Kingham TP. Cancer surgery in low-income countries: an unmet need. *Arch Surg.* 2012 Dec 1;147(12):1135-40.
17. Petroze RT, Groen RS, Niyonkuru F, Mallory M, Ntaganda E, Joharifard S, Guterbock TM,



Kushner AL, Kyamanywa P, Calland JF. Estimating operative disease prevalence in a low-income country: Results of a nationwide population survey in Rwanda. Surgery. 2012 Dec 17.

Additional Support

Website design:

Alison Josephs, Josephs Design

Website hosting:

Rayogram

Accounting:

GAF Financial Group

Legal:

Curtis, Mallet, Prevost, Colt, and Mosely

2012 Balance Sheet