# Korle Bu **Bulletin**



A Newsletter of the Korle Bu Teaching Hospital

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he National Nuclear Medicine and Radiotherapy Centre (NNMRC) of the Hospital has begun the treatment of prostate cancers with a new intervention called Intensity-Modulated Radiation Therapy (IMRT).

Intensity-Modulated Radiation Therapy (IMRT) is an advanced mode of high-precision radiotherapy that uses computer-controlled linear accelerators to deliver precise radiation doses to a malignant tumor or specific areas within the tumor.

IMRT allows for the radiation dose to conform more precisely to the 3-D shape of the tumor by modulating or controlling the intensity of the radiation beam in multiple small volumes.

Speaking to the Head of the Centre, Dr Joel Yarney, he said the Centre had within the past two weeks treated and discharged three patients who had prostate cancers.

Dr Yarney said the new radiation therapy reduces the side effects of radiation to the patient, adding that "it helps us to adjust the radiation beam to the contours of the cancer, allowing for higher, more effective doses of radiation to be delivered while minimizing exposure to surrounding healthy tissue".



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## **KORLE BU BEGINS RADIATION THERAPY TREATMENT FOR PROSTATE CANCER**

Dr. Yarney disclosed that the new radiation therapy can be used in the treatment of cancers and tumours including brain tumours, breast, lung, head & neck, prostate and gynecological cancers.



He said, other than robust surgery, the Centre has all that it needs to manage prostate cancer in Ghana, adding that "there is no need for anyone to travel outside Ghana to treat prostate cancer".

#### **Stock Capacity**

Dr. Yarney noted that the new treatment facility is equipped with a Computed Tomography (CT) Scan machine to do imaging and enable the Centre do a more localized treatment.

The Centre, he said, also has a new linear accelerator. He said, currently, it is the only Radiotherapy Centre that has the ability to treat prostate cancer with radiation therapy in Ghana.

Dr. Yarney attributed this achievement to the highly-skilled manpower oncologists, medical officers and radiation therapy technologists the Centre boasts of.

#### Treatment of Prostate Cancer

The Head of the Centre stated that the curative treatments for prostate cancer includes radical prostatectomy, brachytherapy and external beam radiation therapy, which can all be done in Ghana.

He said Korle Bu started brachytherapy in 2010 and has since treated over 200 patients, with results comparable to any in the advanced world.

He said the new radiation therapy technique is an addition to the three curative treatments, however, "the new technique affords us the ability to limit the

radiation to the prostate alone, with very little radiation received by the surrounding organs".

#### Procedure

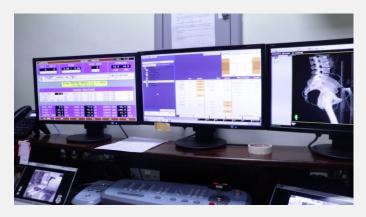
IMRT typically is administered five days a week for five to eight weeks. At each session, the patient spends between 15 to 30 minutes at the treatment room. Small amounts of radiation is given on a daily basis, rather than a few large doses which helps to reduce damage to body tissues surrounding the tumor. Weekend rest breaks allow normal cells to recover.

The total dose of radiation and number of treatments a patient receives depends on the size, location and type of tumor, the patient's general health and other factors.

The first IMRT session tends to be longer than others so that additional X-ray films and checks can be taken. Before treatment begins, colored semi-permanent ink may be used to mark the patient's skin to indicate the alignment of the radiation equipment with the targeted area. In the treatment room, the radiation therapist uses the marks to locate the treatment area.

For the beginning of the procedure, the patient is positioned on a treatment table, sometimes, specially molded devices are used to help with positioning. The machine, controlled from a nearby area, is then activated. The patient is monitored on a screen or through a window in the control room and the radiation therapist talks to the patient through an intercom when there is the need.

IMRT is a painless, non-invasive therapy, during which patients don't hear, see or feel the radiation. If the patient becomes uncomfortable during the procedure, the machine can be stopped at any time.





# WORKING IN A COVID-19 TREATMENT CENTRE IN GHANA! MY EXPERIENCE!

any people all over the world have been quite anxious about the global pandemic caused by the novel coronavirus. Many have lost their loved ones, their livelihoods and even their minds from the impact of this pandemic. On March 12, 2020 Ghana confirmed its first cases of COVID-19.

Being an infectious illness, it is not surprising that people are afraid to go near those who are infected.

Sometime after joining my departmental COVID-19 team, there was a call for volunteers to work at the

National Treatment Centre, specifically the National COVID-19 ICU.

I delayed my decision to join for a bit because I was honestly uncertain about what could go wrong and afraid for the worst.

Yes, I was afraid of all the possibilities and the fear of the unknown. I was also scared that I might pick the virus and infect my husband and kids with it.

My husband, Jeffrey, was thankfully very supportive. We had more training sessions which really boosted my confidence. I decided, eventually, to join the Team and the day came for work to begin at the treatment centre.

Entering the patient's room for the first time, there I was with all my tasks outlined for me.

The moment of truth had come and I still had mixed feelings; wondering if I had made the right decision to volunteer in the first place, along with all the potential risks it posed to my family and I.

Apparently, the fear never went away (I soon realized). I said "Hello" to the patient and started performing my tasks in the room which involved setting an intravenous line for the patient (i.e. placing a needle/cannula into a vein through which the 'drip' and medications can be given). As I got close, I felt my mask may have shifted a bit.... ("Yikes! Am I exposed?"). Many ugly thoughts ran through my mind that instant. Thankfully, I still felt my breath was being filtered well by the N95 mask I had on my face, so I cooled down a bit.

The next few days after that incident had me really thinking. Many "what ifs?" ran through my mind. I got to speak with our consultants; Drs. Owoo, Commey and Dame and other team members who calmed me down and asked me to alert them if I had any further concerns or symptoms. Their support helped a lot.

The tasks of the individual team members overlapped all the time with the aim of reducing the number of exposures for health care workers. Of course, the team work was great. All the preventive measures for COVID-19

recommended by the World Health Organization (WHO) were still practiced religiously.

There is time in between to have meals and also to catch one's breath. Yipeeeeee!

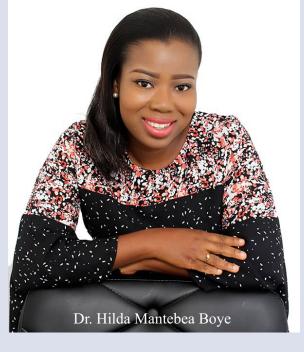
At the end of the working day or night, I go back home to my family. This means that I need to ensure that I do not take the virus back home. I practice hand washing and change back into my home attire before leaving the hospital.

Once I get home, I take a shower before coming close to anyone in my home. We all do miss, to an extent, the physical closeness that is discouraged now. We miss seeing and hugging our

friends and even some family members. The masks however cannot steal the smiles that show in our eyes even when the mask covers the mouth and nose. We all need to stay strong and help fight COVID-19.

Although it took me some time to say "Yes" to volunteer for the National COVID-19 ICU team, I have not regretted this decision. There is so much joy when our patients recover and go home.

There have also been a few sad moments when patients died or were not doing well. Our clinical psychologists were however always there to provide both staff and patients with the much needed psychological support during those unfortunate times. We also had each other. We were there for ourselves as staff and for our patients as well.





# "Wearing a Mask: Dos and Don'ts"







DO: Pull hair back



DO: Tie straps behind head & neck



DO: Remove by grabbing from the back



DON'T: Pul below the nose



DON'T: Wear on forehead



DON'T: Pull below chin



DON'T: Cross straps



DON'T: Leave hair down your face



DON'T: Hang from one ear



DON'T: Leave a strap hanging

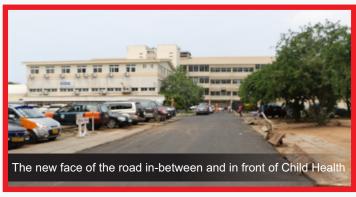


DON'T: Wear a dirty or wet mask



# **ROADS IN KORLE BU UNDERGO REHABILITATION**

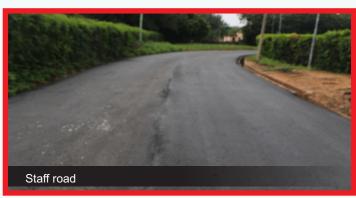






















## TAICHUNG HOSPITAL SUPPORTS KORLE BU WITH PPES

he Taichung Hospital, Taiwan in collaboration with their Ministry of Foreign Affairs donated Personal Protective Equipment to the Hospital. This was to support the Hospital in its fight against the Covid-19 pandemic.

The items donated included 10,000 pieces of N 95 facemasks, disposable surgical gowns and 1,000 pieces of disposable coveralls.

The handing over ceremony was conducted through a video link between the two hospitals.

In a statement, Prof. Meng-Chih Lee, the Senior Consultant Physician at Taichung Hospital who presented the items on behalf of the Hospital and Government said his country realized that Ghanaians were doing a great job in the management of the Covid-19 pandemic hence the decision to donate the items.

The items were received by the Central Management Team led

by Dr Daniel Asare, the CEO of the Korle Bu Teaching Hospital.

The CEO expressed his gratitude for the presentation and said it was timely and would help in the fight against Covid-19.

He urged the Taichung Hospital to continue to support Korle Bu in order to deepen the cordial relationship between the two institutions.

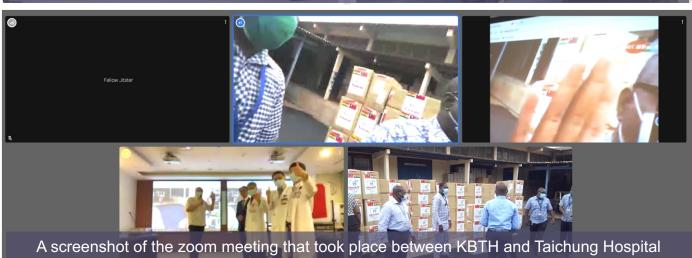
Present at the event were Dr. Ali Samba (Director of Medical Affairs), Dr. Harry Akoto (Deputy Director of Medical Affairs), Dr. Daniel Ankrah (Director of Pharmacy), Mrs. Rita Aryee (Director of Nursing & Midwifery Services) and Mr. Munir Alhassan (Director of Administration).

The rest were Mr. Frederick Addo-Yobo (Director of General Services), Mr. Sylvester Badohu (Head of Stores), Mr. Mustapha Salifu (PRO), Prof. Yeh (International Relations, Taiwan-Taichung Hospital) and Mr. Charles Anachanser (Head, Information Technology).











#### **NURSE INDUCTION: 48 SENIOR NURSES UNDERGO TRAINING WORKSHOP**

he Hospital has organized a training workshop for 48 newly promoted senior nurses.



They included four (4) Chief Nursing Officers (CNOs) and 44 Deputy Director of Nursing Services (DDNS) from across the various Sub-BMCs.

The training workshop is a periodic programme the Hospital conducts for promoted staff to keep them

abreast with the rules and regulations of the nursing profession and general patient care.

The workshop is to also help the staff share their experiences and challenges and the best ways to resolve issues that come up in their line of duty.

The Hospital's Director of Nursing & Midwifery Services, Mrs. Rita Aryee challenged them to give off their best especially in patient care and staff management.

Mrs Aryee assured them that Management will stand by them and provide the needed logistics as they all help in fighting Covid-19.



## PREVENTION OF COVID-19 IS BETTER



#### WHEN YOU COUGH OR SNEEZE

Germs spread easily. Always carry tissues and use them to catch your cough or sneeze.



#### **BIN IT**

Germs can live for several hours on tissues. Dispose off your tissue as soon as possible



#### KILL IT

Hands can transfer germs to every surface you touch. Clean your hands as soon as you can

NB: If tissues are not readily available, cough into a flexed elbow.







# **EAT SOME WATERMELON: IT'S IN SEASON**

ellow Ghanaians, the colourful watermelon fruit is readily available now; it's in season. This also means it is cheaper today. It is therefore a good opportunity to inculcate it in your diet.

A serving of watermelon (as I normally eat and pictured below) as a mid-morn or late afternoon snack and eaten as part of a healthy diet is good love to show your body.



A serving of watermelon as shown here is usually worth Gh¢2 on the market.

Watermelon is a great source of water. It is more than 90% water but it also gives some fibre. This means eating moderate amounts as part of a good diet plan could help you lose good weight.

Its pink colour, synonymous to that of the tomato fruit, means that it provides beta-carotene (a form of vitamin A) and lycopene. These two phytochemicals are potent antioxidants, thus could protect your cells from the destructive effect of free radicals.

Watermelon has appreciable amounts of vitamin C to support your immune system, though not in significant quantities as the citrus fruits



More significant to note though is an amino acid it contains, called citrulline. Watermelon is the richest known source of citrulline among all foods. Citrulline,

once in the body, is converted to another amino acid called arginine. Both arginine and citrulline help boost the production of an important chemical in the body, termed nitric oxide.



Nitric oxide in the body works by dilating (widening) and relaxing your blood vessels to ensure that blood flows better and adequately. This action helps to lower blood pressure. Sufficient amounts of nitric oxide may also help improve erection in men.

Citrulline is greatly found in the white rind (part) of watermelon. It is therefore important that you don't let the white part of your watermelon go waste, at all. Carefully cut as much of it from the hard green part as you can.

Go for watermelon! It is in season now. It is cheaper now. Like other colourful fruits and vegetables, watermelon may add as much colour to your life as it bears.

It is important to always remember that no one food is able to provide the nutritional and health benefits you need. That is why a good dietician will always advise you to take to a healthy diet -- that is, eat moderated and balanced meals throughout the day.

FOOD IS ALWAYS YOUR BEST MEDICINE; EAT TO LIVE.

DESMOND PAA KWESI HACKMAN (RO, RD, LD, MSc)

Registered Dietician and Nutritionist Regulatory Officer, Food and Drugs Authority Email: paaquesihackman@yahoo.com

Mobile: 0244016344



### **NEW ULTRA-MODERN ANALYZERS TO BOOST LABORATORY SERVICES**

The Central Laboratory Department of the Hospital has procured and installed two new ultra-modern Vitro 5600 Chemistry Analyzers to boost laboratory services in the Hospital.

The analyzers are the haematology (XN-1500) auto analyzer and a coagulation (CS-1600) auto analyzer.



Vitro 5600 Chemistry Analyzer

Speaking to the Laboratory Manager, Mr George Kpentey, he said the two analyzers give precise and reliable test results and that was the reason Management decided to procure them.

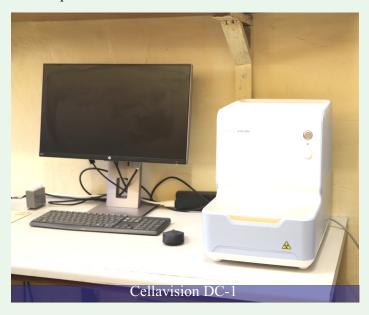
These analyzers, he said, are the best in terms of speed, stability, ease of use and has an e-connectivity that can identify problems before they even start.



Haematology (XN-1500) auto Analyzer

The CS-1600 is a fully automated coagulation analyzer that has expanded the spectrum of tests from Clotting profile to Factor assays (factor VIII &IX), Ddimer, fibringen, Protein C&S, Vonwilli brand factor

as well as Correctional studies. This reduces waiting time of patients from 24 hours to less than 3 hrs.

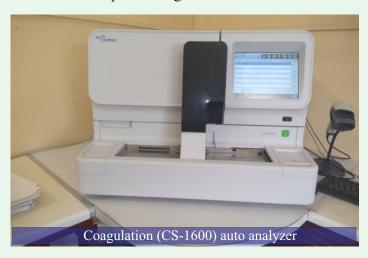


The XN-1500 has a slide preparation unit for preparing and staining of thin films (SP-50) which has helped to standardize films staining and avoid human variations in film preparations.

Mr. Kpentey highlighted that the lab has also acquired a Cellavision DC-1 which performs a digital microscopic examination of prepared slides and gives a differential morphological count, RBC characterization, Platelet estimation and interface for film comment on the three main cells of blood. This has helped to reduce patient waiting time from two (2) weeks to less than a week now.

He said the massive automation of the activities in the department has helped reduce stress on staff, reduce sample error and improve overall efficiency.

"Management is certain the introduction of the analyzers will yield positive returns on activities at the Lab and the hospital at large" he added.





### TRIBUTE BY DEPARTMENT OF SURGERY FOR PROF. RUDOLPH DARKO

Professor Rudolph Darko joined the Department of Surgery in 1989 when he was appointed Consultant General Surgeon at the Korle Bu Teaching Hospital and a lecturer at the School of Medicine and Dentistry.

As a surgeon and teacher, he had high ideals that he tried to pass on to his students and surgical trainees. He was a very skillful and careful operator and a brilliant teacher.

At Surgery, he was precise and swift, completing surgical procedures expeditiously. When teaching, he was eloquent and straight to the point. His selfless devotion to patient care, training of doctors and surgeons have been exemplary.

Many of the doctors and surgeons he helped train remember him by his nickname – 'Sticky D' – 'D' for Darko and 'Sticky' for his tendency to stick on you with questions whose answers he believed you ought to know.

Other lecturers would simply pass the question to the next student, but not Sticky. Working with him on Surgical Ward 4 meant you had to be on your toes and ready to spar with him intellectually without notice. In one instance in the surgical theatre, he directed a question to a student on the anaesthesia side of the operating table. "Sir" the student began, "please I am on the anaesthesia rotation, not the surgery one." She had a good excuse obviously. "It does not matter," Sticky fired back, "you have to answer the question all the same". The hapless student was completely unprepared for this.

Further questions followed; the student's answers were mumbled and often had to be extracted with clues from Sticky. Then for a brief moment, there was a pause in the flow of questions; something in the surgical field held Sticky's attention.

When the questions resumed, there was total silence from where the student was supposed to be. Sticky turned his gaze in the direction where he expected the student to be standing. Then it dawned on him: in the brief moment when he stopped questioning, the student made her escape from the theatre. He just chuckled and went on with his surgery.

His areas of interest both in practice and research were diseases of the biliary tract, abdominal tuberculosis, hernia and surgical endocrinology. His scientific publications and conference presentations mirrored his areas of interest, enabling him to rise through the ranks of academia to become Associate Professor of Surgery in November 2004.

Professor Darko's contribution to the University of Ghana Medical School is reflected in the leadership positions in which he served: Head of Department of Surgery from September 2002 to July 2008; member of the College of Health Sciences Ethics and Protocol Review Committee from 2007 to 2010; and a member of both the University and College of Health Sciences Academic Boards from 2002 until the time of his passing.

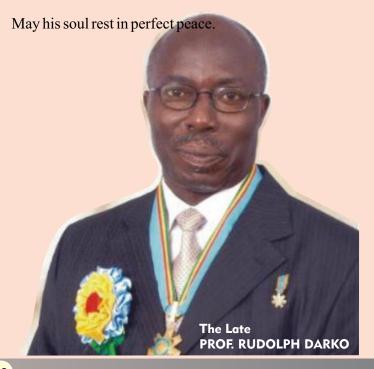
To encourage students to pursue surgical careers, Professor Darko instituted the Badoe Prize in Surgery to present cash prizes to deserving students who excelled in Surgery.

On the professional front, Professor Darko was elected Fellow of the West African College of Surgeons in 1993. He was a very active member of the College, rising through its leadership ranks to become Secretary, and then Chairman and Chief Examiner of the Faculty of Surgery. He was the Editor-in Chief of the West African Journal of Medicine from 2011 to 2017. Professor Darko was a foundation fellow of the Ghana College of Physicians and Surgeons, a foundation member of the International Hepato-Pancreato-Biliary Association from 1994 and member of the Ghana Cancer Society.

He was the Director and Principal Instructor of the Advanced Trauma Operative Management (ATOM) Course Centre in Accra from its inception in February 2005 to July 2013 and a member of the Basic Laparoscopic and Endoscopic skills training courses, Accra Center, supervised by Minimal Access Centre (MIC) University of Turbingen, Germany.

As a Department, we have lost a great surgeon, mentor, and teacher whose many contributions and accomplishments in surgery stand tall in our archives.

Professor Darko will be fondly remembered by his students, residents and colleagues with whom he has enjoyed a most productive career for decades.





# KORLE BU MANAGEMENT, MOH HAND OVER NEW PROJECT CENTRES TO CONTRACTORS

anagement of the Hospital together with officials from the Ministry of Health have handed over the site earmarked for the construction of the new 400-bed capacity Maternity Block to the contractors, Rizzani de Eccher Spa.



Hospital Engineering and Maternity HOD

The handing over was to enable the contractors prepare the site for an official sod-cutting.

The new Centres - Maternity Block and Urology and Nephrology - are expected to improve maternal care and ensure that care in areas of kidney transplantation is accessible to all in the country and within the West Africa Sub-region.

Construction works for the two projects are expected to begin this year and completed in 2022. Both centres will run a paperless service with installed ICT equipment, CCTV and relevant software to provide seamless care to patients.

The Maternity Block will be a 12-storey women's hospital encompassing both obstetrics and Gynaecology, family planning and invitro fertilisation center, IVF center.

The Block will be located at the tennis court adjacent to the Reproductive Health Unit. The current Maternity Block will still be in use until the new one is completed.

The €145.22 million Maternity Block project has been awarded to Rizzani DE ECCHER and Bergam, with support from Hospital Engineering.

The Urology & Nephrology Centre is a €38 million project awarded to VAMED Engineering GmbH.



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#### **WORKING IN A COVID-19 TREATMENT CENTRE IN GHANA! MY EXPERIENCE!**

Fellow Ghanaian, kindly ensure that you take all necessary precautions to prevent the spread of COVID-19.

Fellow Ghanaian health care worker, let's not allow fear to prevent us from caring for people infected and affected by COVID-19. By all means say 'Yes'. By all means get trained in the appropriate wearing of PPE and caring for people with COVID-19.

Fellow Ghanaian health care manager, by all means get us the PPE that we need so that we can continue to give off our best in caring for the people of Ghana.

I know that this is not an easy task but yes we can! We all do hope that the COVID-19 pandemic ends very soon. May it however find us prepared and well equipped! Let's do this!



# PIX IN BITS



Operation Smile donated medical items to the Reconstructive **Plastic Surgery and Burns Centre** 





Royal Canopy Ltd. donated five (5) canopies to the Hospital



New Executives of Health Service Workers Union (HSWU) Korle Bu have been sworn in





Mr. Lukeman Alhassan of Prime Aim donated a Veronica bucket and a stand to the Hospital





Hyundai Motors donated 15,000 pieces of face masks and 1,000 pieces of coveralls to the Accident and Emergency Centre

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