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**Global Orthopaedic Surgery Capacity Building**

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As a US orthopaedic surgeon who moved to Africa for 7 years to do orthopaedic missions work, I read the article Global Orthopaedic Surgery, An Ethical Framework to Prioritize Surgical Capacity Building in Low and Middle-Income Countries by Pean et al with great interest. While living in Africa, I frequently witnessed visiting surgeons from high income countries (HIC) trying to force their own surgical approaches to treating disease when in fact, it was not appropriate in the low- and middle-income countries (LMIC) setting (1). As noted by the authors, the ethics of humanitarian efforts are vital to the success of any programs. No longer is the point of global surgery to just do surgery, but it is capacity building through, as the authors point out, “infrastructural support, surgical education, and empowerment of local health-care providers.” Our focus must be on these points, or our “help” is minimal at best, or can even be harmful.

The checklist provided by the authors is certainly a starting point, and one must always be cognizant of potential ethical dilemmas. There are many other unintended sequelae of humanitarian trips, including the negative economic impact on the local physicians when free surgeries done by the visitors “steal” their paying patients. Many more ethical situations can arise, and the visiting surgeon must be aware to recognize them.

Incorporating the ethics of humanitarian efforts with the education of LMIC surgeons can be complex, but solutions are evolving. An orthopaedic program in Kenya has graduated 9 local surgeons, increasing the national total of orthopaedic surgeons by over 10%. The program successfully integrates visiting surgeons from HIC to assist in the training, working alongside the local surgeons. As the interest in Global Surgery grows, we must continually evaluate the impact we have on LMIC and determine how best to help them. Pean et al’s paper reminds us that we must first do no harm, and I congratulate their efforts.

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References


Conflict of Interest: None Declared