Enhancing cooperation in urodynamic field-Kosovo experience

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Åke Björn-IMP-Landstinget i Östergötland

INTERNATIONAL MEDICAL PROGRAM (IMP)

• Since its inception, the International Medical Program has facilitated the recovery and rehabilitation of the health care systems effected by the crises. The response to the crises in Bosnia and Herzegovina was supported by the Swedish Government.
• From 1995 to 2003, the program was implemented through the successful cooperation between the Swedish Migration Board, the Medical Centre for Refugees, and IOM.
• From 2004 to 2008, the Global Development Funds from the Swedish Government supported the program.
• From 2009 the County Council of Östergötland continued to finance the Program.
Established in 1951, the International Organization for Migration (IOM) is the leading inter-governmental organization in the field of migration that works closely with governmental, intergovernmental and non-governmental partners.

IOM boasts 146 member states, a further 13 states holding observer status and offices in over 100 countries.

IOM is dedicated to promoting humane and orderly migration for the benefit of all. It does so by providing services and advice to governments and migrants.

Republic of Kosovo

- Area - 10,908 km²;
- Municipalities – 37;
- Capital – Prishtina;
- Population - 1,739,825
  - Males - 875,900;
  - Females - 863,925;
- Urban population - 661,586;
- Rural population - 1,078,239;
- Population under 26 years – 50%;
- Population over 65 years - 6.7% (116,785);
- 800,000 living abroad
Financing of Public Health Care System

- Centralized budget (tax based funded system)
- Primary Health Care – targeted health grant from the Government (41,029,068 € for 2012);
- Secondary & Tertiary Health Care – budget from the Ministry of Health (88,588,425 € for 2012);
- Very low financing: 75 Euro per capita for public health care services

Swedish Medical Program Fields of support in Kosovo

- Reconstruction and plastic surgery
- Hand reconstructive surgery
- Rehabilitation and physical therapy
- Spinal surgery and rehabilitation
- Pediatric Cardiology
- Pediatric Surgery
- Pediatric Urology
- Gynecologic Oncology
- Histopathology and Cancer Registration
- Emergency medicine
Patients operated by Swedish Medical Team in Kosovo 2000-2012

Medical staff from Kosovo on training to Sweden 2000-2012
Patients from Kosovo evacuated to Sweden 2000-2012

- Pediatric cardiology: 44
- Traumatology: 3
- Spinal surgery: 8
- Pediatric surgery: 1
- Ophthalmology: 11
- Reconstructive surgery: 3
- Total: 70

Patients from Kosovo evacuated to Bosnia and Herzegovina 2000-2012

- Pediatric cardiology: 13
- Spinal surgery: 5
- ENT: 4
- Gynecologic oncology: 4
- Total: 26
Pediatric surgery clinic in Pristina

- Staff employed at Pediatric surgery clinic: 3 Senior pediatric surgeons, 11 junior pediatric surgeons, 2 residents and 23 nurses,
- IMP in 2005 received the request for providing the training in endoscopic treatment of patients with vesico-ureteral reflux (VUR)
- 81 patients were treated with deflux treatment in the period from 2006 to 2012.

Problems identified

- Low communication between medical professionals responsible for treatment of the patients with urinary dysfunction (UD)
- Limited technical capacities and equipment to diagnose, treat, and follow up patients with UD
- Nurses do not have an active role in the patients diagnostic and treatment process
- Limited data available on patients with UD
- Patients fragmented between professionals, they frequently undergo the same diagnostic procedures by different medical doctors
Project of pediatric urodynamic

The aim (goal) of pediatric urodynamic project is to contribute in improving the health care quality for the children with urodynamic dysfunction and engage the number of the medical professionals from the same field that can contribute achieving better results.

Enhance communication between medical professionals treating patients with UD

- First seminar organized in September 2011
- Presentations on “Urinary dysfunction symptoms diagnosis and treatment”
- Presented results of the technique applied and results of deflux treatment
Training on diagnosis, treatment for patients with UD

- Workshops, seminars, on the job trainings organized for medical professionals dealing with UD patients in Kosovo
- Medical professionals from Kosovo trained at the Pediatric and Surgery Clinic, University Clinical Centre in Linkoping, Sweden.
- Different trainings were organized for the medical staff.
Data collection and integration
UD patients

- Kosovo health care system is in general lacking evidence on population health status.
- Data is registered in hand written protocols and some in computers.

Table 1. Number of uroflowmetries in 2012 by local specialists

<table>
<thead>
<tr>
<th>Patient diagnosis</th>
<th>VUR</th>
<th>Enuresis nocturna</th>
<th>Uretral strictura</th>
<th>Spina bifida</th>
<th>Urinary tract infection</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric surgeon</td>
<td>5</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td>Pediatrician</td>
<td>2</td>
<td>5</td>
<td>0</td>
<td>1</td>
<td>11</td>
<td>19</td>
</tr>
<tr>
<td>Urologist</td>
<td>0</td>
<td>2</td>
<td>12</td>
<td>0</td>
<td>3</td>
<td>17</td>
</tr>
<tr>
<td>Nurses</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>7</td>
<td>11</td>
<td>16</td>
<td>1</td>
<td>20</td>
<td>55</td>
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</table>
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<tr>
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<th>Spina bifida</th>
<th>Urinary tract infection</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric surgeon</td>
<td>12</td>
<td>21</td>
<td>3</td>
<td>1</td>
<td>36</td>
<td>73</td>
</tr>
<tr>
<td>Pediatrician</td>
<td>6</td>
<td>28</td>
<td>0</td>
<td>3</td>
<td>5</td>
<td>42</td>
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<tr>
<td>Urologist</td>
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<td>17</td>
<td>16</td>
<td>0</td>
<td>12</td>
<td>51</td>
</tr>
<tr>
<td>Nurses</td>
<td>0</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>24</td>
<td>71</td>
<td>19</td>
<td>4</td>
<td>65</td>
<td>183</td>
</tr>
</tbody>
</table>

Active involvement of nurses in the patients diagnostic and treatment process

- Nurses involved in the process of patients diagnostic and treatment
- Nurses regularly registering the medical procedures performed on patients.
- Nurses participated in trainings and workshops in Kosovo and Sweden
Visit to PNUT – UCC Linkoping, September 2012

Purpose of the visit:
• Patients referred at the clinic,
• Selection of patients for urodynamic diagnostic and treatment
• Diagnostic procedures applied
• Decision on treatment procedures
Provide basic equipment needed for diagnose and treatment of patients

Basic equipment and consumables are donated to the Pediatric Surgery Clinic:
- Uro flowmeter
- Bladder scanner
- Consumables for training purposes
- Books and other education material
Added value of the project

• Decision of the Ministry of Health in Kosovo to officially approve the establishment of a “Urodynamic Unit” in Pristina
• Number of participants interested to join the project of Urodynamic was higher than expected
• Self initiative to share results of urodynamic unit with regional hospitals
Constrains and actions to be taken

- Data collection and maintenance remains to be huge struggling problems for the Kosovo Health care System
- Maintenance of the medical equipment and instruments needs more improvement.

Assumptions

- Strong institutional support of Local and Governmental Authorities in Kosovo
- Qualified and dedicated medical professionals willing to receive professional support and training
- Monitoring and follow up by Swedish Medical Teams ensured professional expertise.
Department of Pediatrics

Measure and note down voided volume. Mark by an X if you cannot measure the voided volume.

University Hospital: Prishtina

Name: ____________________________

Date of Birth: ______________________

Wet is noted: ☒

Damp is noted: ☒

Drops are noted: ☒

| Wet | 07.00 | 08.00 | 09.00 | 10.00 | 11.00 | 12.00 | 13.00 | 14.00 | 15.00 | 16.00 | 17.00 | 18.00 | 19.00 | 20.00 | 21.00 | 22.00 | 23.00 | 01.00 | 02.00 | 03.00 | 04.00 | 05.00 | 06.00 |
|-----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| ☒   |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |

Voided CIC Leakage Fluid Intake

<table>
<thead>
<tr>
<th>Time</th>
<th>Voided intake</th>
<th>CIC volume</th>
<th>Day</th>
<th>Leakage</th>
<th>Damp</th>
<th>Wet</th>
<th>Flux</th>
<th>Inlet</th>
<th>Volume</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Micturition/CIC observation

Name: ____________________________

Date of birth: ______________________

Date: ____________________________
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am satisfied with the newly introduced system at work?</td>
<td>22</td>
<td>6</td>
<td>2</td>
<td>30</td>
</tr>
<tr>
<td>I can give my personal opinion in the daily work</td>
<td>26</td>
<td>3</td>
<td>1</td>
<td>30</td>
</tr>
<tr>
<td>The team should work more closely with parents</td>
<td>24</td>
<td>2</td>
<td>4</td>
<td>30</td>
</tr>
<tr>
<td>This type of approach ensures better results</td>
<td>22</td>
<td>6</td>
<td>2</td>
<td>30</td>
</tr>
<tr>
<td>I receive more knowledge in this way</td>
<td>25</td>
<td>2</td>
<td>3</td>
<td>30</td>
</tr>
<tr>
<td>Treatment of the patient should be decided jointly</td>
<td>22</td>
<td>6</td>
<td>2</td>
<td>30</td>
</tr>
<tr>
<td>This model of work is applicable to other fields</td>
<td>25</td>
<td>1</td>
<td>4</td>
<td>30</td>
</tr>
</tbody>
</table>

Most frequent comments were: more transparency and share of information, more initiative between staff, additional trainings
THANK YOU
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