



IMMERSIONS

THE GLOBAL HEALTH NEWSLETTER

Hospital grounds, Kinshasa, DR-Congo

Vol. 2, Sept 2023

Sign-up for the Global Oncology and Disparities of Care Program!



Global Health Track

Join us virtually on Monday afternoons in learning about global health and global health “at home”. Learn about different infectious diseases, refugee health and evaluations, and principles of global health.



Dr. Forbes providing patient care and teaching in Mutolere, Uganda

Welcome to UConn Health Global Health!

WELCOME to the Autumn 2023 edition of *Immersion*s, the UConn Health Global Health Newsletter. Both UConn and our global partners are emerging from the global COVID-19 pandemic to find our ‘new normal’. Days are getting shorter, the new academic year has started, classes are back in session, and learners are starting to envision their potential roles and experiences in Global Health over the next year.

The next academic year is bound to present opportunities and challenges as UConn and our partners gear up for an anticipated "surge" in learner interest. During this next academic year, we encourage you to avail yourself of the rich opportunities for global health–related trainings at UConn Health. The Global Health & International Studies sponsors extracurricular programming including a Global Health evening series of didactics and skills building, boot camp, career night, and an annual spring symposium. This year, we have also introduced a global health/tropical medicine–focused Monday afternoon lecture series available by Zoom.

The new global health travelers’ database is now live online for perusal as one considers possible experiences and sites.

We continue to develop and evolve our relationships with partners in Uganda, Guam, Peru, Nicaragua, Dominican Republic, Vietnam, India, Haiti, Sri Lanka, Lithuania and others.

Over the ensuing issues of *Immersion*s, we will highlight unique Global Health programs at UConn, as well as faculty and trainee experiences. Many opportunities exist to interact with our global health faculty, collaborating partners, and Connecticut-based “global is local” programs in our immediate area. We hope to see you at all of these events!

~ *Kevin Dieckhaus, MD FIDSA CTropMed®
Director of Global Health*

FACULTY HIGHLIGHT – VICTORIA FORBES, M.D., M.S.



Dr. Victoria Forbes, a Hematologist/Oncologist from our Carole & Ray Neag Comprehensive Cancer Center

Q: How did you get involved with global health?

A: My first medical experience abroad was in Australia. This led to me to seek out Global Health opportunities as a resident where I traveled to Uganda as a learner in UConn's Tropical Medicine rotation with Dr. Dieckhaus. I was hooked and looked for a Fellowship program that incorporated Global Oncology training. My Fellowship at Dartmouth allowed me to connect to my mentor Dr. Mary Chamberlin, travel to Rwanda to provide oncologic care to patients, and perform research in the field. I helped develop an online Global Oncology curriculum as a Fellow during the pandemic and I continue to direct this course now. I joined UConn as Faculty and our Neag Cancer Center offered me the amazing opportunity to start UConn's first Global Oncology program. I run this program now and serve as UConn Global Health Faculty along with a dedicated team. All learners are welcome to join the Global Oncology and Disparities of Care virtual program (<https://forms.gle/Wu9nt4qxtEaTcQuV9>)

Q: What are some challenges you have experienced in this field and how did you overcome them?

A: Only a handful of US-based Fellowship programs have a Global Oncology program. However, the field is gaining momentum and if you want to be involved, I recommend jumping right in. In Global Health, it is also important to seek out mentorship.

Q: Why do you think Global Health is important?

A: Global Health ensures a healthy future for everyone as one community, no matter where they live. We need to find meaningful ways to gain and share knowledge globally in a bidirectional manner, realizing our shared humanity. I love what I do and feel lucky to inspire learners to care for patients in radically different settings. As a team, we can address the disparities in access to care globally and do it with cultural humility and a commitment to equitable international partnerships.



OBSTETRICS AND GYNECOLOGY RESIDENT SPOTLIGHT - ROSANNE ZANDVLIET, D.O.



Rosanne Zandvliet, D.O. Current 3rd year OB-GYN resident in Kisoro, Uganda.

Q: CAN YOU TELL US ABOUT YOUR GLOBAL HEALTH TRIP TO KISORO, UGANDA IN 2023?

A: “This February and March, I teamed up with 2 IM residents, 2 ID fellows and travelled to Kisoro, Uganda with Dr. Dieckhaus (Infectious Diseases) and Dr. Forbes (Hematology-Oncology) to help provide Obstetric and Gynecologic care to women in a rural, resource-limited healthcare center. For four weeks, we were part of the local medical care team serving patients from all over Kisoro district. I performed complex obstetric and gynecologic surgeries, delivered many babies, and helped provide routine preventative and maintenance healthcare, as well as improve implementation of laparoscopic and other low-intervention surgical techniques. Throughout our immersive experience, I learned that my UCONN training has prepared me to face any obstetric or gynecologic patient or emergency, even in an incredibly resource-limited setting. My surgical training, extensive exposure, and creative problem-solving skills made the difference in providing life-saving and health promoting care in Uganda. I felt welcomed with open arms by the

incredibly kind people of Uganda and thrived working in the remote jungle under the African sun, needless to say; this experience is only the beginning of hopefully a long career of Global Women's Health.”

Contacts

Please contact us if you have any questions or ideas that may pertain to global health at UConn Health

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HIGH IMPACT - POINT OF CARE ULTRASOUND IN GLOBAL HEALTH CONTEXTS



*Alvaro Ayala, M.D. Current 3rd year
UConn Primary Care Internal
Medicine Resident.*

Q: CAN YOU TELL US ABOUT HOW ULTRASOUND WAS USED ON YOUR GLOBAL HEALTH TRIP?

A: “Point of care Ultrasound (POCUS) has emerged as an essential diagnostic tool in resource limited regions around the world. In our experience, we were able to apply various concepts—in real time—in order to guide clinical impressions, make diagnosis, and accelerate treatments.

In one case, we were able to diagnose rheumatic heart disease in a young patient with an apical heart murmur and a history of chronic cough and shortness of breath. They were evaluated multiple times in the past and were treated for common cold with their non-specific symptoms. On evaluation, we noted significant mitral valve regurgitation and significant left atrial enlargement. The patient also had B-Lines on lung ultrasound, making the diagnosis of heart failure instant. Thus, the patient was admitted and treated even before obtaining a chest x-ray.

Additionally, a patient with abdominal pain was admitted to the medical wards. The abdominal ultrasound revealed free fluid. Given our concern for viscus perforation, he was subsequently transferred to the surgical ward and eventually had an exploratory laparotomy.

POCUS was also valuable when performing procedures such as thoracentesis, paracentesis and even lumbar puncture in a safe way. Many patients with tuberculosis present with pleural effusions and diagnosis was made after ultrasound-guided thoracentesis. Ultimately, we were able to look for increased intracranial pressure in patients with hemorrhagic stroke by performing an ophthalmic ultrasound at the optic nerve width.

In conclusion, POCUS will become essential in underserved and low-resource areas. Yet, much has to be done in terms of personnel education and availability of ultrasound devices in these settings. Thus, our role as physicians is to continue to push for better care with easily and readily available tools, such as POCUS, that impact diagnosis and treatment on-the-spot.”





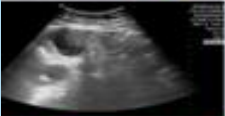



Cardiac POCUS at the bedside, Kisoro, Uganda



Large unilateral pleural effusion with single loculation in a patient with Pulmonary TB – “Jellyfish Sign”

Global Health Calendar
-come join us for the following events-

	Topic	Date	Location
	Infectious Diseases Cases	Sept 20, 2023 6 p.m.	Academic Rotunda
	Global Health Career Night	October 18, 2023 6 p.m.	Zoom Meeting
	WASH (Water, Sanitation, Hygiene)	December 13, 2023 6 p.m.	Academic Rotunda
	Travel Safety & In-Flight Emergencies	January 17, 2024 6 p.m.	Academic Rotunda
	POCUS (Point of Care Ultrasound)	March 2, 2024 6 p.m.	Academic Rotunda
	Global Health Symposium	April 4, 2024 12 noon – 4:30 p.m.	Academic Rotunda

GLOBAL HEALTH IN PRACTICE



UConn IM residency-supported medical mission trip to Dominican Republic, November 2022

GLOBAL HEALTH FACTS

Ten Global Health Issues to Watch

(adapted from the Institute of Health Metrics and Evaluation)

- 1. Long COVID:** Longer impacts of COVID have impacted the ability to engage with work and school and relationships.
- 2. Mental Health:** A leading cause of disability worldwide. The pandemic has caused an increase preceptor's orders by 25%, meanwhile services have been disrupted. Disruption and displacement from ongoing conflicts and growing social and economic inequalities are leading to increasing mental health needs.
- 3. Impact of Climate Change:** Climate changes expected to worsen throughout this century, leading to extreme heat, flooding, droughts, food insecurity, and related political insecurities.
- 4. Cardiovascular Disease:** Cardiovascular diseases such as ischemic heart disease and stroke are the leading causes of death globally, accounting for 28% of total deaths.
- 5. Lower Respiratory Infections:** Normal decline in influenza and RSV due to COVID-19 restrictions, rates are expected to surge. Avian flu remains at risk for becoming the next worldwide pandemic.
- 6. Poverty's Role in Health:** Low- and middle-income countries (LMICs) experience worse health outcomes than high-income countries. Compared to high income countries, life expectancy is 34 years lower, under 5 mortality 100 times higher, deaths due to interpersonal violence and suicide are 30 times higher, and deaths attributed to antimicrobial resistance are 12 times higher in LMIC countries.
- 7. Health Systems Strengthening:** Commitment to address long-term sustainability of public health and primary care are needed.
- 8. Diabetes:** Diabetes is the fourth main cause of loss of DALYs in Latin America
- 9. Road Injuries:** Leading cause of death in people age 15-49 worldwide. Simple interventions including helmets and seatbelts airbags to be limits and laws limiting alcohol impaired driving needed.
- 10. Population Aging and Dementia:** The proportion of population over age 65 is expected to increase significantly, leading to increased needs for support services for the elderly.

GLOBAL HEALTH EXPERIENCE DATABASE



The GLOBAL HEALTH EXPERIENCE database contains trip details for over 300 international learner experiences since 1985. The database is designed to be updated in real-time by current learners upon completion of global experiences. The database will serve as a source of contact information and ideas for learners contemplating global health experiences, as well as a repository for helpful tips and guides for the various sites from prior learners. This information is designed to be helpful for conceptualizing and planning international immersive experiences.

The database is accessed through the following link: <https://travelexperiences.uchc.edu/home>

Learners who wish to explore possibilities for a Global Health experience can sort by activity, location, language, or just browse to identify relevant or related prior experiences. Learners who have returned from an international experience are asked to complete a post-travel assessment to upload their experience to this dataset to benefit future students.



The **Focus on Culture Project**: Based on the book "Humans of New York" by Brandon Stanton, we are collecting thought-provoking images on Global Health and Cultural Diversity that underscore the importance of culture within not only the global healthcare environment, but also our individual lives and global community.

UConn learners and faculty are encouraged to share a photograph from their global health experience that in some way highlights our unity across cultures, and then describe what the image represents and how it impacted them. Please send submissions for publication to dieckhaus@uchc.edu. Images will be posted to newsletters and collated in the (future) global health website.



Perahera procession, Kandy, Sri Lanka,

The Perahera procession is a weeklong festival of increasingly grand processions through the streets of Kandy in central Sri Lanka. It is a celebration of the sacred tooth relic of Lord Buddha that is held the Temple of the Tooth in Kandy. While this photo captures some of the procession itself in the street, what it does not capture is the community of those observing along the sidelines. People from Kandy and all over Sri Lanka gather to witness Perahera, crowded on cushions and blankets along the road - sharing umbrellas, local snacks, and turns to peek through the crowd to witness the brilliant procession.

~Antea Demarsilis, School of Medicine Class of 2020~