

Saving Lives across Borders

It is a sunny winter's day and Dr Muhammad Tahir is out and about in Peshawar, Pakistan when his phone rings. When this happens, he knows: time is of the essence.

The doctor on the other end of the line describes the problem to him. An accident. Tahir asks follow-up questions.

'Can I speak to the patient? Can you send me photos of the injury?' All of this will help him make a more accurate diagnosis.

'I can help the doctors, particularly in more complicated cases,' Tahir explains.

Telemedicine can save lives by connecting specialist, trained doctors with remote patients, even across borders. This particular telemedicine project, in the border region between Afghanistan and Pakistan, is helping injured people in remote areas receive urgent medical help, by facilitating cooperation between the two countries.

A child spills boiling water over itself.

A car full of passengers catches fire in an accident.

An explosion leaves several people with burn injuries.

These emergencies can happen anytime, anywhere – even hundreds of miles away from Peshawar and its hospital, the Hayatabad Medical Complex (HMC).

As a burn-injury specialist, Tahir knows that in these cases, the first twelve hours are the most critical. There is often not enough time to transport the patients from the isolated regions of Pakistan's highlands or the Afghan border region to specialists in Peshawar. The distance is just too great, and the Burn and Trauma Centre ward at HMC currently only has 14 beds. These are often already occupied.

'The need is immense.' So the words of Jens Clausen, Vice Chair of the Pakistan-Afghanistan-Tajikistan Regional Integration Programme (PATRIP) Foundation. The foundation, implemented by the Afghan-German Cooperation, carries out and monitors the telemedicine project on behalf of the German Federal Foreign Office and KfW Development Bank.

The foundation estimates that there are around 30,000 burn injuries in this region every year, and nowhere near enough experts like Tahir to handle



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them.

The region on the border of Pakistan and Afghanistan is considered to be particularly poor. Clashes between Afghans and Pakistanis are frequent, and care for the sick and injured is often inadequate.

‘Medical care is very poor, particularly in more specialised medical fields such as trauma injuries and burns,’ Clausen states.

Since 2014, with the support of the German Federal Foreign Office, five Burn-Trauma Centres have been established, the first three in Pakistan, and then two more in Afghanistan in 2016. All these centres are located in rural areas.

When planning the development of the trauma centres in Afghanistan with the NGO Wish International, Clausen faced a problem: the doctors and nurses in remote regions had no training in the area of burns or trauma management.

Tahir has been working as a surgeon for almost 20 years. He specialises in skin transplants for burns. And he is known for his work in the field.

Wish International approached the PATRIP Foundation with an idea. Tahir could play the role of a ‘satellite interface’, as Clausen describes. Someone who can act remotely as an intermediary for doctors at the trauma centres who need further assistance and provide surgical expertise.

Tahir was on board and trained 119 doctors, including 24 women, in the five centres through workshops and seminars. They travelled to Tahir’s hospital in Peshawar, where he showed them photographs of burns injuries. He taught them how to recognise the different degrees of burns, how to clean a wound, when antibiotics are necessary, and how to fix skin in place. In addition, five doctors and one paramedic went for international training.

These lessons fed into the idea that doctors from the two countries should learn together.

‘One of our priorities is to contribute to international understanding and to improve the integration of the remote areas,’ Clausen states.

After all, saving lives knows no boundaries. In total, almost 1,500 acute patients from Pakistan and Afghanistan have been treated with the help of telemedicine to this day.

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Partner: Aga Khan Development Network, Aga Khan Foundation, Wish International, Mission East, Organization for Relief Development (ORD) and other non-governmental organisations

Implementing Organisation: KfW Development Bank, PATRIP Foundation, Aga Khan Foundation

Provinces: Afghanistan: Badakhshan, Paktia, Khost, Nangahar, Tajikistan: Gorno Badakhshan, Pakistan: Balochistan, Khyber Pakhtunkhwa

Programme objective: Infrastructural measures in the Tajikistan-Afghanistan-Pakistan border regions promote stability, integration and cooperation.

