

Title: Providing Equitable Surgery to an Endangered Population: An Expansion of the SSRI in Haiti Project

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Objective: The scarcity of specialists presents a barrier for surgical patients in Haiti, especially after the COVID-19 pandemic and domestic surge of violence. We describe the quantity and type of surgeries performed at a freestanding surgery clinic that opened in 2012 under the auspices of the Sustainable Surgical Resource Initiative (SSRI) in Haiti. Foreign physicians ceased services prior to 2018. Also, the Médecins Sans Frontières (MSF) local trauma center gradually ended services in 2018, allowing for the transition of the separate freestanding surgery center into an autonomous orthopedic trauma center. This study demonstrates the ability to create a sustainable and independently run surgery clinic and serves as a model for low- and middle-income countries (LMICs).

Methods: This study focuses on patient selection and diagnosis over two different periods: the first, from 2012–2017, which included significant foreign SSRI physician involvement and the second, from 2018–2022, when the Haitian team of healthcare providers managed all cases.

Results: From 2012–2017, 1,506 of the following surgeries were performed by a team of foreign and domestic physicians: 109 circumcisions, 305 excisions, 29 hemorrhoidectomies, 509 herniorrhaphies, 83 holmium laser enucleations (lasers provided by the foreign team), 255 hydrocelectomies, 61 mastectomies, 86 multiple surgeries, and 69 other miscellaneous surgeries. From 2018–2022, the Haitian team saw 2,417 cases, most being herniorrhaphies, hydrocelectomies, excisions, and orthopedic surgeries. This surgery center became the de facto orthopedic trauma center after MSF's gradual departure. The orthopedic surgeries were largely lower extremity fractures requiring external fixation, surgical implant generation network (SIGN) nail instrumentation, and reduction under spinal and general anesthesia.

Conclusion: The development of a general surgery unit under the guidance of foreign physicians evolved into a Haitian-operated orthopedic trauma center. The data demonstrates how local physicians in LMICs can develop independent surgery units, with the startup assistance of foreign-trained specialists, ensuring that vulnerable populations receive equitable surgical care.

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