

**Letter to the Editor**

**Urology in perspective**

Dear Sir

**Background:**

The practice of urology in Sudan made slow progress since the introduction of nationwide medical services in the past century. However over the past few years there is a noticeable improvement of access to urology services.

In the 1950s urology service used to be provided by general surgeons in the capital and the regional hospitals. Most of the service done was open type of urological surgery due to lack of endoscopy setup in most hospitals. Early in 1960s late Mr. Osman Awad Alla established urology unit in Khartoum Civil Hospital. He was joined by AbdelKarim. The endoscopic procedures were cystoscopy, TURP, TURBT.

A Small cystoscopy room was chosen for such services in the New Building of Khartoum Civil Hospital. The procedures included cystoscopy using conventional light and lower urinary tract dilatation. The cystoscopy room was later moved to a small room in the South Block of Khartoum Civil Hospital.

In the 1970s a separate operating theatre dealing with urology together with orthopedics was established in the Old Building of Khartoum Civil Hospital. Same type of services continued in addition to open urology like renal stones, nephrectomy, bladder and urethral surgery.

Likewise in the 1970s Mr. Hassan Goreish started a unit in Omdurman and Prof. Ali Kambal took the burden of Khartoum North. However in these two hospitals endoscopy was not routine due to lack of proper setup. In 1975 late professor Omer Belail started the urology unit in Soba University Hospital and was joined then by Prof Ahmed Ibrahim and Later Prof AbdelRaof Sharfi. In 1978 Professor Faisal Ibrahim started for the first time urology service in El Obeid. He continued his service for six years.

In the first half of the 1970s Mr. Yahia AbdelRahim started urology unit in Wad Medani Hospital as the first specialised unit outside Khartoum. He used to do most of the Endoscopic procedures particularly TURP. He did good work in urethral surgery i.e urethroplasty as two stage procedure.

In the last century our colleagues took the responsibility of starting
urology units in the following hospitals. Mr. Osama El Feil in Port Sudan, Mr. Rida Shareef in Kassala, Mr. Dirdiri El Geily in Gedarif, Mr. Ahmed Mekki in Atbara, Mr. Ibrahim Ali and later Mr. Ibrahim Badri in Barbar and later in Atbara. Late Mr. Dosa in Nyala and Mr. Mohy Eldin AbdelRahman in El Fasher.

It is sad to say that all these centres are now without urologists, a matter which M.O.H is trying to rectify.

The current status:

The problem of back up armamentarium and personnel was eased with new trained urologist and instruments added from last decade.

There are now approximately 36 urologists in Sudan. However half of them are engaged in fulltime private practice.

Taking a good example Ibn Sina Hospital the service provided now includes ureteroscopic surgery and percutaneous renal surgery (PCN) in addition to endoscopic bladder and prostate surgery. Soba and El Rabat University Hospitals are equally providing similar kind of services.
**The Role of the Ministry of Health:**

The Ministry of Health started scheme of providing modern and up to date back up instruments nationwide. This scheme provided new lithotripters to deal with urinary tract stones. Ibn Sina Hospital was chosen to pioneer this service in hospitals belonging to Ministry of Health.

A lithotripter “Dornier” was introduced in September 2005. In one year time the rate of open renal and ureteric stones dropped by a figure of >25%. It is hoped that all except few of these stones will be covered by this service.

There are now 8 lithotripters in Khartoum distributed between Ministry of Health hospitals, El Rabat hospital, Soba University Hospital, Military Hospitals and three in private hospitals.

This service has changed the image of dealing with stones of the urinary tract lessening open surgery.

**Renal transplantation:**

**Background:** the first renal transplant in Africa and Middle East was carried in Sudan in 1974 by a team lead by the late Prof Osman Awadalla, Mr.Osman A/Karim, Prof Abdul A’Al Abdulla, and Prof Abdelraham Musa (nephrologists). The patient was a Saudi citizen. In spite of this glamorous fact the practice of renal transplant went on with very slow pace over the next three decades during which only 34 renal transplants were performed with rather poor results. Problems which halted progress of transplant surgery was lack of back up service particularly tissue typing, angiography and immunosuppressive drugs.

**The current status:**

From the turn of this century in year 2000 MOH took the initiative of reactivating the programme of renal transplantation. This program was thought to be vital to deal with the increasing number of patients suffering from chronic renal failure (CRF); amounting to 400 patients /million inhabitants are annually added to the dialysis program load.

**Ahmed Gasim Hospital:**

In Jan 2000 a transplant team was chosen to start the scheme at Ahmed Gasim Hospital, Khartoum North. The team chosen was professor Faisal Ibrahim, Mr.Faisal Y Amir, Mr.Tayeb A/Rahman in addition to nephrologists Dr. A/Rahman A/Wahab.

Mr. Kamal Abu Sin, Sudanese transplant surgeon, working in the U.K joined the team at Ahmed Gasim Hospital. His presence gave a great
push to the scheme. His work later extended to Wad Medani and for short period at Ibn Sina Hospital over the next 3 years >100 kidney transplants were done at Ahmed Gasim Hospital. The number now is >206.

Ibn Sina Hospital

The program of renal transplant was reactivated in Ibn Sina Hospital during the year 2001. From 2001 to 2005 >62 transplants were carried out, 10 out of these patients were children. 12 patients died of complications amounting to 19%. In the year 2005 the mortality dropped to 5% (one out of 20 patients). From the beginning of year 2006 16 patients were done without mortality. The total number up to date is 87 transplants. The team now leading the transplant work at Ibn Sina includes Mr. Faisal Amir, Mr. Mahmoud Obeid, Dr. Salwa El Sir and the nephrology team at Ibn Sina Dr. Layla Tamam and A/Rahman Othman Bery

Wad Medani Hospital

In the same year 2001 Wad Medani Hospital started its transplant program. Again Mr. Kamal Abu Sin gave a good push to the work. There are now 44 cases done at Wad Medani.

The future:

It is clear that there is noticeable progress in the services of renal transplant from the turn of this century. We still need to work hard to bring the service to world standards. Recruitment of well trained urologists and transplant surgeons seems one of the key answers to the problem. We need to establish more centers, nationwide, with full back up service and personnel. There are mounting numbers of patients now with CRF on dialysis waiting for transplant amounting to an approximate number 4500. The services of transplant is not going in pace to clear as much patients from dialysis scheme. Thus we need to evaluate the situation and lay out new plans to bring scheme to world standards. It is interesting to know that the estimated number of patients with CRF is about 17 000 in this country.

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