

Final Report for ESTHER Switzerland Start-up Grant

Title

Partnership to improve antimicrobial treatment and stewardship for gonorrhoea in Papua New Guinea

Number

2017 17S6

Project timeframe

March 1, 2018-December 31, 2018

Swiss Institution

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Partner Institution

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Project goal

To strengthen clinical and laboratory capacity to improve the treatment effectiveness and antimicrobial stewardship of gonorrhoea and other infections in pregnancy.

Project Activities

First partnership meeting

Dates

March 15-16, 2018

Location

Modilon General Hospital and Madang Lodge, Madang, Papua New Guinea



Figure 1. Modilon General Hospital in Madang, Papua New Guinea

Meeting participants

Dr. Paula Ao, Medical Doctor in Obstetrics and Gynaecology, Modilon General Hospital, Madang, Papua New Guinea

Prof. John Bolnga, Chief of Obstetrics and Gynaecology, Modilon General Hospital, Madang, Papua New Guinea

Ms. Dianne Egli-Gany, Epidemiologist and Project Manager, University of Bern, Institute of Social and Preventive Medicine, Bern, Switzerland

Dr. Moses Laman, Deputy Director, Papua New Guinea Institute of Medical Research, Goroka, Papua New Guinea

Prof. Nicola Low, Professor of Epidemiology and Public Health, University of Bern, Institute of Social and Preventive Medicine, Bern, Switzerland

Dr. Michaela Riddell, Clinical Project Coordinator, University of New South Wales, Public Health Interventions Research Group, Sydney, Australia

Prof. Andrew Vallely, Professor of Public Health Interventions, Papua New Guinea Institute of Medical Research, Goroka, Papua New Guinea

Dr. Lisa Vallely, Research Fellow, University of New South Wales, Public Health Interventions Research Group, Sydney, Australia



Figure 2. Participants from left to right: Andrew Vallely, John Bolnga, Moses Laman, Michaela Riddell, Nicola Low, Dianne Egli-Gany, Paula Ao, Lisa Vallely

Summary of meeting

We conducted a detailed site visit at Modilon Hospital, Madang Province, Papua New Guinea to discuss the proposed partnership project. All participants agreed that antimicrobial resistance is an important health issue. During our discussions with the local staff and tour of the hospital facilities, however, it became apparent that priorities have changed between writing the proposal and the site visit. Setting up an antimicrobial resistance surveillance system at Modilon General Hospital is not the main priority at present: the hospital has no functioning microbiology department owing to budget cuts and procurement problems, and there are no staff that could be trained to perform antimicrobial susceptibility testing. We discussed several other needs and potential projects that could be developed with a collaboration between the Institute of Social and Preventive Medicine at the University of Bern and Modilon General Hospital, but did not reach a final decision. Topics included, but were not limited to the following:

- Sepsis prevention in antenatal and postnatal women
- Training in the field of sexual and reproductive health
- Screening for sexually transmitted infections, including HPV
- Development of clinical pathways for cervical cancer, including follow-up for treatment
- Palliative care for cervical cancer
- Setting-up referral links for women with positive HPV results
- Intimate partner violence screening
- Breast cancer screening and treatment
- Supporting the set-up of the new healthy women's clinic at Modilon General Hospital
- Primary and secondary infertility

At the end of the meeting, we agreed that we would like to continue exploring opportunities for strengthening our partnership.

Second partnership meeting

Date

November 6, 2018

Location

Madang Lodge, Madang, Papua New Guinea

Participants

Dr. John Bolnga, Chief of Obstetrics and Gynaecology, Modilon General Hospital, Madang, Papua New Guinea

Dr. Moses Laman, Director, Papua New Guinea Institute of Medical Research, Goroka, Papua New Guinea

Prof. Nicola Low, Professor of Epidemiology and Public Health, University of Bern, Institute of Social and Preventive Medicine, Bern, Switzerland

Dr. Michaela Riddell, Clinical Project Coordinator, University of New South Wales, Public Health Interventions Research Group, Sydney, Australia

Summary of meeting

As a follow-up to the first partnership meeting, we conducted a second meeting in Madang, Papua New Guinea. We reviewed the partnership ideas that were discussed during the first meeting as well as the ESTHER Switzerland principles for institutional health partnerships. Amongst the topics discussed, cervical cancer emerged as the most pressing local priority. There is no screening programme for cervical cancer, chemotherapy is unavailable and the radiotherapy machine has been out of use for two year. We discussed ways in which a partnership between ISPM Bern and Modilon General Hospital could strengthen cervical cancer screening and treatment across the spectrum of primary, secondary and tertiary prevention and palliative care in the framework of the Sustainable Development Goals. The following ideas were discussed:

- Conducting a baseline survey of epidemiology (including HPV typing) of cervical pre-cancer and cancer presenting at Modilon Hospital
- Developing an electronic database to record patient information, diagnoses and follow-up for cervical cancer
- Developing pathways for diagnosis, management and follow-up of cervical pre-cancer and cancer based on visual inspection with acetic acid, colposcopy, cryotherapy and surgery
- Developing a peer support network to support women diagnosed with cervical cancer with patients who have been treated at Modilon General Hospital
- Screening for sexually transmitted infections, including HPV
- Preparation for HPV vaccination (e.g. community sensitisation)

At the end of the meeting, we agreed that, to begin with, the most useful and sustainable activity would be to develop an electronic database to record patient information, diagnoses and follow-up for cervical cancer, in cooperation with computer programming students at the local Divine Word University in Madang.

Future plans

This ESTHER Switzerland start-up grant allowed us to conduct several meetings with our partners in Papua New Guinea. The start-up grant showed us that successful partnerships are more likely to develop when the priorities of the partners emerge from grassroots, rather than being driven by external international health priorities. Based on the results of the meetings that this start-up grant facilitated, we are developing the partnership with Dr. Bolnga and his colleagues at Modilon Hospital. If ESTHER Switzerland launches a new call for project grants in 2019, we plan to submit a full project proposal. We will continue our work with our colleagues in Papua New Guinea through: our r4d project titled "Improving neonatal and infant outcomes using point-of-care tests for sexually transmitted infections in high prevalence settings"; and we submitted a pre-proposal for a further project, "Political prioritisation of the prevention and control of sexually transmitted infections: a global challenge," in January 2019.