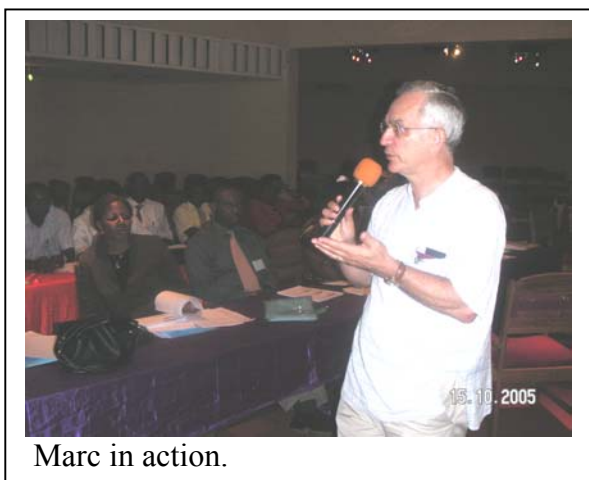


ESPE Course on Paediatric Endocrinology at the University of Benin, Nigeria 14 – 17 October 2005

Following earlier contacts between Ze'ev Hochberg and Professor Angela Okolo, a team of teachers from ESPE was invited to the University of Benin to give a four-day crash course on paediatric endocrinology to young Nigerian paediatricians. I was assigned the task of recruiting another four teachers and to coordinate the course. An excellent crew was formed: Cecilia Camacho-Hübner from London, John Gregory from Cardiff, Marc Maes from Brussels, Otto Westphal from Göteborg and myself.



The ESPE team outside the Benin Historical Museum: From left Cecilia Camacho-Hübner, Marc Maes, Martin Ritzén, John Gregory and Otto Westphal.



Marc in action.

The basic setup was similar to the ESPE Winter Schools held every year in Eastern European countries, with the curriculum designed to cover all essential topics of paediatric endocrinology in a total of four days. This meant hard work for both teachers and students. Teachers were required to cover many different fields and students were required to be alert, listening to a foreign language over many days of classes that were overflowing with information. All students were also asked to bring cases that were selected so that they could illustrate various areas in paediatric endocrinology.

Our host, Professor Angela Okolo of The Institute for Child Health, University of Benin, invited a total of 21 students. The students were between 30 and 45 years old, 60% females and 40% males. They represented 18 different medical schools in Nigeria. The language posed no problems: English is the common language for teaching all over Nigeria, a country that hosts a multitude of languages among its 140 million inhabitants. Thus, the students easily understood the teachers, while the teachers sometimes found local accents to be a challenge.



The students and teachers during a short break. The teachers may be identified by their leisure clothing.

The campus of the University of Benin covers a huge area, fenced in and guarded by police carrying machine guns. It houses about 20,000 students and 4,000 employees. This campus is a society by itself, with institutions, dormitories, guest houses (where we lived), private homes for university employees and churches. The majority of people living in this part of Nigeria are Christian. Thus, our proposed teaching on Sunday morning had to be postponed – Sunday morning is church time for all, including us! It was a swinging Catholic service, never to be forgotten!

We found the Nigerian people that we met to be very open and friendly. The students were eager to take part in discussions with the teachers and within the group, and a very cordial atmosphere developed the very first day. Each teacher coached one group of students in preparation for the case presentations. This gave both person-to-person interaction and also an insight into

medical care in the home institutions of the students. We were impressed by the high level of textbook knowledge, but surprised to find that less attention was being paid to important aspects of patient work-up, such as taking a detailed history and performing and interpreting a careful physical examination. Less than half of the students, all specialists in paediatrics, were using growth charts in their clinical work! Most of them had private laptops, and almost all were familiar with the use of internet. This is essential, since the libraries rarely subscribe to medical journals and they have very few books. However, most did not

know that members of universities in developing countries have free access to full electronic versions of the major medical journals, including those in paediatrics.

Many of the case presentations ended with a list of appropriate laboratory investigations that the doctors would like to have done, but also a note that none of these could be performed, due to unavailability of the assays or to the cost of the tests. Also, it was appalling to learn that many children that are correctly diagnosed and treated for diabetic ketoacidosis in the hospital were not continued on insulin therapy after discharge, because the families could not afford long-term medication. Even relatively inexpensive medications, like L-thyroxine, are too costly for most families. Social welfare is non-existent in Nigeria, in spite of the major income to the state that comes from exporting oil. Nigeria is the 6th biggest oil exporting country in the world!



Our host, Professor Angela Okolo (in blue, left) dressed for church.



Cecilia with friends going to church Sunday morning.

It may be argued that paediatric endocrinology would not be a high priority area for health care in a country like Nigeria, where malnutrition, bacterial infections and HIV are so prevalent. However, the students all expressed their gratefulness for our initiative, both during the course and in e-mails afterwards. Several of the students came from university hospitals without a paediatric endocrine units, but stated that the plan was that they would be the starting nuclei for such units. Hopefully, increased knowledge will then spread from the universities. The members of the course declared that they would now start a “Nigerian Society for Paediatric Endocrinology”, NSPE, and the teachers promised to support such efforts.

At the moment, three of the students have expressed wishes to come to European centres as clinical fellows for further training, and one will submit a poster to next year’s ESPE meeting. Through the efforts of Ze’ev Hochberg, many ESPE members have donated excess subscriptions to Hormone Research to libraries of the students, and Karger has promised to ship them to the libraries indicated. Sister department links have been formed between Nigerian and European units to facilitate diagnosis and treatment of rare endocrine disorders. Our host Professor Okolo, has plans for a pilot study on neonatal screening for congenital hypothyroidism in her area, with know-how assistance from ESPE members. Thus, there are reasons to believe that this initiative will not be an isolated episode, but rather the start of something new in Nigeria. All members of the ESPE team concluded that the trip was very worthwhile!

Martin Ritzén