## **Strategic Planning of Surgical Missions**



## LETTER:

reparation and accomplishment of missions to train medical teams in underdeveloped countries, according to each local specificity, are relevant and there are some important points to be highlighted.

Each mission accomplished is unique and peculiar because the transfer of theoretical knowledge and technical skills necessary for the sustainability of these missions can occur in a shorter period when compared with medical missions that do not involve a surgical approach.

In addition, a number of organizations, such as the World Health Organization, are collaborating to successfully carry out missions in the surgical field in developing countries, but financial support from nongovernmental organizations and private investments is growing and essential for the expansion of surgical missions. These activities are carried out in a growing number of regions that require this kind of intervention and collaboration of specialists of medical teams. In this case, ample practical experience and training in certain types of procedures of neurosurgery can be observed.

Surgery is one of the needs of all countries. There is an extreme lack of resources in underdeveloped countries, with a notable need for improvement, emphasizing the relevance of missions in the area of neurosurgery. From the detection of the main needs and resources that will benefit a region, it is possible to set goals of how to approach and minimize major problems during a team's performance on a mission.

The importance of the transfer of surgical knowledge during these missions and the teaching of technical skills to surgeons on these teams must be emphasized. Theoretical and practical classes with training and qualification of surgeons should be among the objectives of the missions carried out.

We reiterate the importance of partnership with local health institutions as a relevant factor to establish standards of care and provide the best possible assistance. Besides, the primary aim of transferring knowledge and skills should be established and agreed upon among the teams. Bidirectional learning is important and effective because it results in more effective collaborative planning of mission work.<sup>1</sup>

Missions with a focus on vocational education in underdeveloped countries are relevant to the current scenario of neurosurgery. The identification of the disciplines, from the theoretical curriculum that needs to be instituted as an auxiliary method, connected to the practical approach necessary to the teams of the regions that need missions is very important. It would be possible the training become increasingly effective, carried out by extremely professional trained individuals with good training and willingness to help and contribute to places with fewer resources can have a broader range of action and benefit for the population, providing treatment to patients who need neurosurgery intervention in various subspecialties.<sup>2-5</sup>

In order for successful integration to take place between the teams (team of the region approached and team proposed to do the training), it is necessary that before the missions, communication occurs so that the team has complete knowledge of how to best assist the shortcomings in specific procedures. Furthermore, it is essential to know the peculiarities of each region receiving the missions, with an epidemiologic study of the incidence and prevalence of the diseases and procedures that the population needs and that will benefit those affected by the main diseases related to neurosurgery. From the knowledge of deficit skills identified by local neurosurgeons, it is possible to design intervention and training methods much more efficiently, with better results and greater comprehensiveness than will be taught.

Another important factor is to have knowledge about what is really lacking in the skill and training of local surgeons and what resources are lacking in that place, such as no public funds to perform certain procedures, equipment, and structured surgical centers. This issue is important to be outlined at the time of programming and methodologic organization of each mission so that teams are divided according to each subspecialty and need of the area to be addressed by the surgeons who will perform the training.

Preparation of these professionals is one of the most relevant factors, as from this stage, the next steps will be well organized and structured financially, theoretically, and practically, with the insertion of the best possible integration between local surgeons and those of medical missions. Thus we can verify results are increasingly satisfactory for the surgical team and especially for the patients, who are the main reason for the project.

Therefore the emphasis of physicians who compose the teams for these missions should be on the needs that will be researched with the staff of the place to be approached, identification of each topic to be approached, and the best forms of intervention in each region.

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