

Thailand

Thailand is a tropical, mainly Buddhist country, of over 60 million people bordering the Andaman Sea and the Gulf of Thailand, adjacent to Burma, Cambodia, Laos and Malaysia. Paediatric Surgery is an important and relatively well developed specialty for the high proportion of children in the community. However, Paediatric Urology is a new subspecialty, with only one unit existing in the country. In order to further promote the development of surgery for the care of children with urological conditions the senior staff at the Queen Sirikit Children's Hospital in Bangkok and the senior staff who provide the current surgical expertise for such surgery in other centres, supported the application of Dr Lantom Tonvichien to the Boonpong-Weary Dunlop Scholarship. Dr Tomvichien then spent four months at the Royal Children's Hospital in Melbourne in 1999. During her time in Melbourne she conducted research on pelviureteric junction obstruction and urethral abnormalities, which enabled her to recognise the role of research and to establish a clinical link that facilitated the subsequent visiting-professor program. Thus, with the assistance of the Royal Children's Hospital International, the Kind-Cuts-for-Kids Committee and the Australasian Association of Paediatric Surgeons, a one-week visit consisting of lectures and operative demonstrations in Paediatric Urology and anorectal anomalies, was arranged.

The Paediatric Surgical Department at the Queen Sirikit Hospital consists of 100 surgical beds, 30 of which are for neonatal patients. The Department has access to five operating rooms and the staff see 50-70 outpatients per day. Paediatric Surgery is conducted by seven Paediatric Surgeons, one Orthopaedic Surgeon, one Plastic Surgeon, one Neurosurgeon and two Paediatric Urologists, plus trainees. The Urology service has two days in the main operating theatre and one in the outpatient theatre, and is supported by the trainees in Paediatric Surgery.

The Paediatric Urology visit was in part sponsored by drug companies who provided meals for the large group who participated in the two days of lectures, including Paediatricians, Urologists, Paediatric Surgeons, surgical trainees in Paediatric Surgery and Urology, plus residents and medical students. Additional funding came from Bard and Ansell and contributors to the Paediatric Surgery in Developing countries fund. Thus far only one teaching visit has been undertaken, with more planned when the need is highlighted by the local surgeons.