

# ADDRESSING CONTEXTUAL OBSTACLES IN REINTRODUCING GIANT GOITER SURGERY IN THE DEMOCRATIC REPUBLIC OF CONGO AND BURUNDI: A RETROSPECTIVE ANALYSIS OF 10 YEARS OF TEACHING MISSIONS

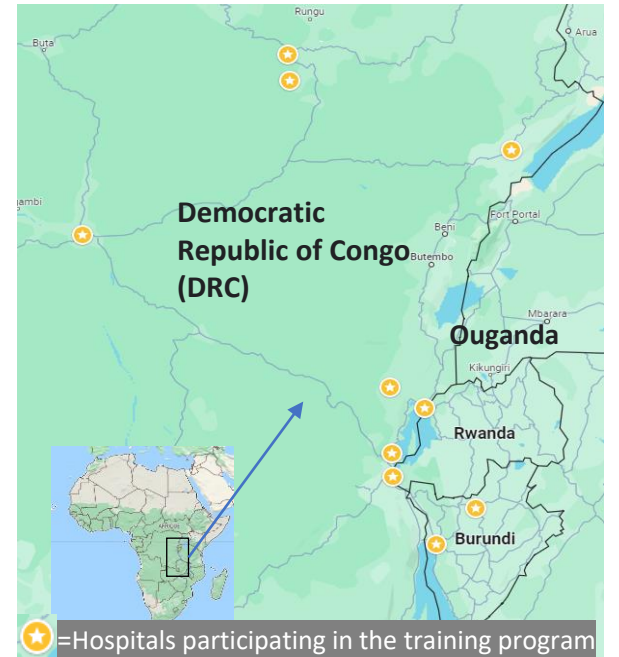


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- Giant goiters are **endemic** in Eastern DRC and Burundi.
- < 2012: **Thyroidectomies complications 50 % and mortality 4.1%.**
- 2012: Start of **goiter surgery training program** in Eastern DRC.
- Training of 29 local surgeons (2013-2023): **13 certified / 4 instructors.**
  - Subtotal thyroidectomies (**identification & preservation of the recurrent laryngeal nerve and parathyroid glands**). **No thyroid hormone substitution in DRC & Burundi**
- **39 missions, 578 patients / immediate Follow up=443 (IFU)/ Long term FU=244 (LTFU)**
- The IFU included 3.5% wound complications, 2.4% hematomas, and **0.2% mortality. In LTFU, 1.89% mortality (6/574)\*, 4.72% recurrent laryngeal nerve palsy. Improvement in the quality of life was observed in 87.41% of cases**



\*In DRC, Two deaths were attributed to assassination that occurred 12 months after the surgery, while two other deaths of undetermined origin took place more than 18 months following surgery. In Burundi, one patient died in a traffic road accident 5 month after the surgery.

## Take home messages

1. Outcomes and complication rates comparable to developed countries.
2. Successful training program despite geographical challenges and political instability.
3. > 2023: 100 patients have been operated in the DRC and Burundi in a perfect autonomy of multidisciplinary skills without any external financial aid.
4. The sustainability of the project appears to be solid.



Goiter surgery campaign in Bunia (DRC)



Giant goiter disabling everyday life



End of surgical campaign in Ngozi (Burundi) with patients and newly certified surgeons