

My Experience in Training Abroad

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Cape Town, South Africa





**Universitätsklinikum
Leipzig**

Anstalt öffentlichen Rechts



**Department for Hematology and Medical Oncology
Leipzig, Germany**

H SCT in the Philippines (1990-2014)

Type	Number	%
Allogeneic unrelated - 9 cord -2 mismatched related-8	99	89
Autologous	12	11
Total	111	100

Hematology Specialty Training in the Philippines

- 4 Institutions for Hematology Specialty Training
 - > Only 1 center with BMT program (Private)
- Learning HSCT is not an integral part of the training curriculum.
- Pursue training in HSCT abroad.

WBMT Hanoi Meeting 2011



Workshop of the WBMT in cooperation with the World Health Organization (WHO)

Hanoi, Vietnam, November 10 – 11, 2011

www.wbmt.org



Workshop of the WBMT in cooperation with the WHO

Barriers to a successful BMT program in the Philippines:

1. Prohibitive cost
2. Private hospitals are current providers of transplant care
3. Lack of government subsidy
4. Out of pocket payment
5. Unavailability of certain medications and laboratory tests
- 6. Very few physicians are trained in HSCT**
7. Exodus of health professionals
8. Lack of confidence in the overall capability of local transplant centers
9. Lack of awareness regarding the indications and appropriate time for BMT

Worldwide Network for Blood and Marrow Transplantation

Hematology at the National Kidney and Transplant Institute

- HSCT – last performed in 2002-2003
- Internal Medicine – Anemias, Leukemias, Hemostasis and Transfusion Medicine
- Laboratory
 - > Flow Cytometry, Molecular Cytogenetics, HLA-Lab
 - > Apheresis
- Ambulatory Oncology Care Unit
- Consultant for training Internal Medicine Residents and Hematology Fellows.

Objectives of HSCT Training

- ◉ Competent Transplant Physician
- ◉ Proficient Manager of a Transplantation Unit

Factors to Consider in Training Abroad – How to start?

- Administrative support
- Funding
 - > Financial support from home institution (tenure of position)
 - > Private sponsors
 - > Local Scholarship (Foundation in Germany)
- Cost of Living Expenses - ~500 Euro/month
 - > Board and Lodging
 - > Food, Transportation
 - > Health Insurance

Factors to Consider in Training Abroad – How long?

- How long is long enough? How short is too short?
 - > Clinical entry competency
 - Experience in clinical Hematology, ie Acute Leukemias
 - > Funding
 - > Research Project

Factors to Consider in Training Abroad – Where?

- Experience
 - Consistency
 - Research Activity
 - Atmosphere for Learning
 - Language
- > Competent Staff
 - > Established Protocols
 - > Well-implemented SOPs
 - > JACIE certification
 - > Modern, Reliable Laboratory and other Diagnostics
 - > Continuing Medical Education

My Experience Training Abroad-

Department of Hematology and Medical Oncology

- Two Hematology and Oncology floors (24 beds)
- Two Transplantations floors (24 beds)- **JACIE Accredited**
- One outpatient department- 70 patients/day
- One ambulatory day care unit (10 beds)
- Laboratory - cytology, FACS, cytogenetics, molecular biology
- Research Laboratory – PCR, DNA Sequencing, Cell Culture
- GMP Laboratory and Cryopreservation Unit
- Apheresis Unit

My Experience Training Abroad-

Department of Hematology and Medical Oncology

- ~220 SCT/ Year (>3000 transplant total)
 - > Acute & Chronic Myeloid Disorders (>>>AML)
 - > Chronic Leukemias
 - > Lymphoproliferative Disorders
 - > Non-Malignant Hematopoietic Disorders
- Non-Hematopoietic Disorders
 - > Breast cancer
 - > Sarcomas
- 90% of patients clinical studies (AML OSHO, EBMT, etc)

My Experience Training Abroad-

Department of Hematology and Medical Oncology

- Regular daily and weekly meetings
 - > Intra- (Laboratory, Research Group) and Inter- (Pathology and Radiology) departmental
- Regular daily and weekly conferences
- Quarterly Hematology Symposium
 - > Echo lectures from International Hematology and Oncology Conferences; Updates
- Biannual Regional Research Group Conference (OSHO)
- Annual Conferences (DGHO)

My Experience Training Abroad-

As a Primary Care Physician...

- 8 Allogeneic patients
 - > MRD - 4
 - > MUD - 3
 - > Haplo - 1
- Autologous patients - 5
- Transplantation program for patients
- Discuss patient status in meetings
- Follow-up status in the outpatient clinic
- Educational presentation
- On call experience

My Experience Training Abroad-

Research Activity


- Molecular Prognostic Markers in AML

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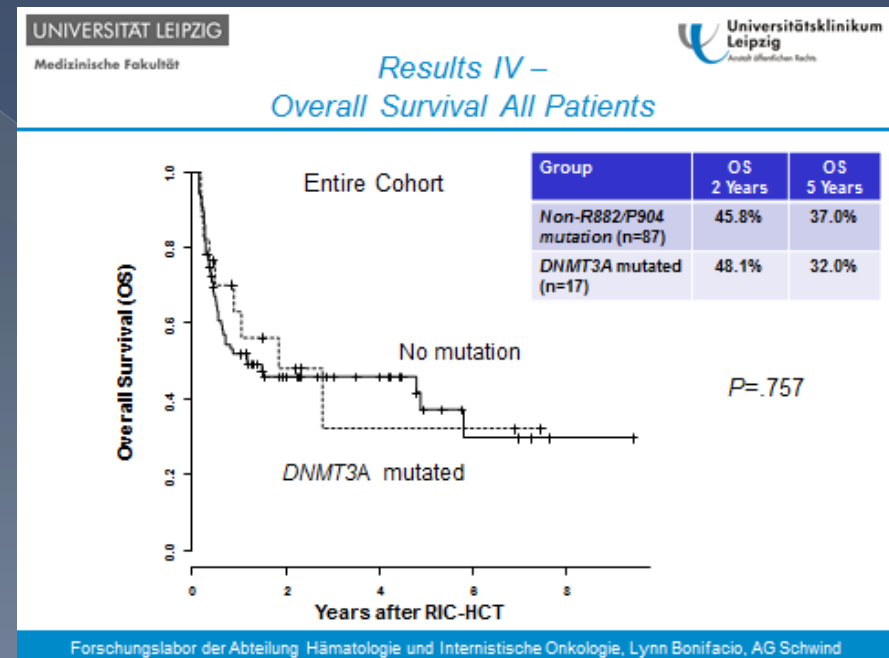
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**DNMT3A mutations in patients with
Acute Myeloid Leukemia receiving
Hematopoietic Stem Cell
Transplantation after Reduced
Intensity Conditioning**

Lynn Bonifacio, M.D.



Forschungslabor der Abteilung Hämatologie und Internistische Onkologie, Lynn Bonifacio, AG Schwind



Difficulties during Training Abroad

- ◉ Language
- ◉ Adjusting to working environment
- ◉ Prioritizing Clinical Areas for Learning
- ◉ Protocols
- ◉ Limited research skills
- ◉ Others – housing, food, weather

Attainment of Objectives

- Learn indications for HSCT
- Learn about conditioning regimens
- Recognize and manage complications
- Practice on a large number of patients
- Improve Research skills
- Recognize the various aspects of transplantation

Post-Training Issues

- A. Adapting “Lessons Learned” to local setting
 - > Identifying the needs and what is available
 - > Creating the team
 - > Generating SOPs
 - > Creating Registries
- B. Staying connected with host institution
- C. Tangible outputs- functional HSCT program

Conclusions

- Poor transplant activity in my country reflects the need for more Transplant Physicians
- Cooperation with transplant colleagues and Institutions is important to facilitate training
- Important factors to consider in sending trainees abroad:
 - > Funding – cost of living expenses
 - > Duration of training
 - > Institution for Training („one-stop shop“)
- Curriculum for trainee – depending on objectives
- Real challenge post training: Establishing HSCT program at home