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# HEART INSTITUTE PERFORMS TRIPLE BYPASS HEART SURGERY

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PHOTO BY RITAH MUKASA

Heart patients with complicated conditions that necessitate bypass heart surgery will no longer have to travel abroad to save their lives. This is after surgeons at the Uganda Heart Institute (UHI) celebrated achieving a milestone when they carried out a successful triple bypass heart surgery recently. This was the first of its kind in Uganda carried out by Ugandan doctors and the lucky patient was 45-year-old Andrew Kayondo.

According to Dr John Omagino, the executive director of UHI, coronary bypass surgery has been the missing link, which compelled many patients to travel abroad to save their lives.

However, Omagino says UHI has been performing cardiovascular interventions since 2007, including closed and open heart surgeries for children born with heart defects, adults and children with valve heart diseases, intervention in the cath-lab and pace makers.

Speaking of the lucky patient, Dr Emmy Okello, a consultant cardiologist, said Kayondo was referred to the institute two weeks before after he suffered from multiple blockages in the coronary arteries.

"He was breathing with difficulty, had progressive chest pain and had fainted a day before. He was an urgent case for coronary bypass surgery," he says.

Okello explained that this kind of surgery takes over 10 hours. Afterwards, the patient is monitored for about a week before being discharged. The patient is then reviewed after two weeks and expected to heal after two months.

Meanwhile, Omagino noted that the institute has attained the technical capacity to offer a complete range of cardiac care services comparable to any



Kayondo (waving) with ecstatic cardiologists at Uganda Heart Institute in Kampala

centre of excellence in the world. He also called upon individuals, companies and organisations to fund the surgeries of children who need sh18.5m each to save their lives.

"With the technical capacity, the institute can also ably teach or train specialists in the cardiac specialty, conduct high calibre research to ensure quality care and generate the necessary data to guide policy," he said, adding that this will help sustain the success they have achieved.

### STATISTICS

According to Okello, while the present capacity at UHI is to operate on 1,000 cases, only 50% capacity can be utilised due to inadequate funding.

"The institute has a huge backlog of over 500 patients awaiting surgery and the booking for elective cases is at one year," he said.

### COST OF SURGERY

According to Omagino, a heart patient needs between sh18m and sh30m to access comprehensive care that

includes diagnostic interventions in the catheterisation laboratory and operating theatre and subsequent care in the intensive or coronary care unit.

"This cost is low compared with referring patients abroad, which costs an average of sh89m," he noted, adding: "When we operate on these patients here, there are benefits of capacity building, training, research and saving foreign currency."

Omagino is of the view that it is better to treat patients in their native environment and is a source of national pride. Besides, there is also a potential of generating foreign currency through referrals from neighbouring countries.

However, he emphasises that they have invested a lot in training their manpower in and outside the country but unfortunately, the institute cannot fully maximise them because they lack the necessary facilities.

For example, there are only four ICU beds for patients from the theatre. This forces them to take patients to the ward to create space for others, yet they are supposed to spend at least 24 hours

## Kayondo's story

Andrew Kayondo, who works as driver with Kampala Capital City Authority, is a father of five and resident of Lungujja, a city suburb.

His brother, Benard Kisekka, narrated that two weeks ago, on returning from work, Kayondo felt a sharp pain in his chest coupled with severe headache and difficulty in breathing.

"He thought it would subside, but it continued up to morning till he passed out. When he regained consciousness, he called me," Kisekka recalls.

He was rushed to International Hospital Kampala, but was referred to UHI.

"On reaching the institute, he was diagnosed with severe artery distractions. The doctors said he was in critical condition and, therefore, immediate surgery was needed to save his life," he adds.

A few hours later, Kayondo was taken to the theatre, where he spent 10 hours undergoing a triple Bypass heart surgery, also known as the coronary artery Bypass grafting.

"We had little hope of seeing him alive again and, therefore, thank God for giving Kasozi a second chance to live," Kisekka says.

in ICU.

We hope to discharge him in a few days," said Harriet Katabira, the head of nursing in the Uganda Heart institute.