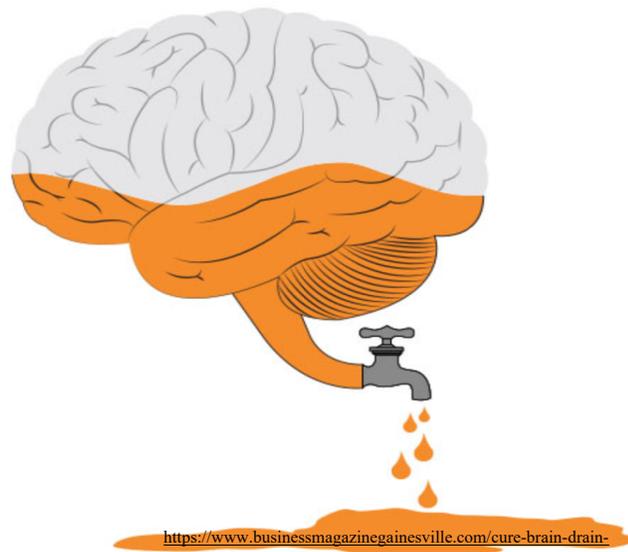


# Global Health: The West Pacific

## Plugging the Brain Drain: Bringing surgeons home to Tonga

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### Brain Drain: what is it?

A major challenge for Tonga – a developing country – is highly educated healthcare providers moving to developed countries. Tonga is riddled with non-communicable diseases (NCDs) and cannot afford to lose these professionals. Tonga routinely experiences critical deficiencies of medical surgeons. For the people of Tonga seeking surgical care they must typically go abroad or wait for visiting surgical teams.

*- Neither option is sustainable.*

From the outside looking in, the Tongan health system is meeting the World Health Organization (WHO) standards of care. However, the people of Tonga are underserved when it comes to surgical care, something not directly measured by the WHO statistic. This gap in translation of a statistic to real life surgical care is a common problem globally, as there is no definition for surgical care, or surgery as a global burden of disease. Anne's story is a case in point.

### Anne's Story:

Anne, a 32-year-old woman, living in Tonga, had been experiencing shortness of breath for several months, and finally decided to make the trip to Vaiola Hospital (the one tertiary center in Tonga). She had delayed seeking treatment as she knew seeking medical care would be both costly and timely. Once she arrived at the hospital, she saw a nurse who triaged her as non-urgent and was told to bring her records to another nurse in the outpatient department. When Anne was finally seen by a second nurse she was observed again and waitlisted to see a clinician. Once she saw the clinician it was suspected that she had rheumatic heart disease. She was then told to go see the medical specialist in the cardiac clinic later that week. Meaning that she would be away from home for multiple days to see the specialist – she decided to stay; however, the financial burden was large. Later in the week when she saw the specialist an echocardiogram was conducted and this test revealed extensive mitral valve damage, requiring valve replacement surgery. She was told by the cardiologist that this could not be performed in Tonga. She had three options 1) apply for overseas treatment, 2) wait for overseas cardiac surgical teams to come to Tonga or 3) go home. Option 1 and 2 required her to wait, were costly, and did not guarantee her surgery. Option 3 was free. If she waited in the hospital, there was a daily fee. However, if she left the hospital, she had to come back to Vaiola Hospital for monthly injections of benzathine penicillin and to meet with the cardiologist every 3 months for reviews, meanwhile she lives far away, making these trips expensive. While she waited contact with the patient was lost, leaving her decision unknown. - Story from [Kingdom of Tonga Health System Review](#)

Imagine being told that you need heart surgery but that no one in your country can help you. Imagine waiting for foreign doctors - that may or may not speak your language, and who may or may not be able to fit you into their schedule. Imagine the number of lives that are lost due to having to pick option 3 as option 1 and 2 are not financially feasible.

### The Tongan Drain is flowing

A major contributing factor to Anne's story is Brain Drain as the Tongan surgeons that could potentially perform these types of operations leave Tonga. In 2007 Tonga's Brain Drain was estimated to be the 9<sup>th</sup> highest in the world, with nearly 75% of Tonga's specialist doctors living outside of Tonga. Doctors leave for a variety of reasons. Developed countries have enticing benefits of employment and lifestyles. Tonga offers poor income potential, long working hours and inadequate supplies/equipment that inhibit these highly trained doctors from functioning fully – *If you were a doctor what would you choose?* Add to this that a few countries, including Tonga, have no in-country facilities to train doctors, meaning that to be a doctor in Tonga you must be trained abroad.

*- It becomes easy to sympathize with these Tongan surgeons as to why they would be reluctant to return "home".*

### Tonga needs a Plug – and fast!

Doctors leaving Tonga leads to lives lost, and lives lived with disability, such as Anne's. Tonga does not have specialized health providers to manage the country's surgical burden of disease. In 2008 there was 1 pediatrician for a population that had over 40% aged 0-14 years old. In 2015 there were 55 doctors, 5 were surgeons, 3 anesthetists. This is not enough for a population that

has rising rates of non-communicable disease including stroke, ischemic heart disease, diabetes and rheumatic heart disease, all of which can require surgical care.

– *Tonga needs a plug for its Brain Drain*

### What if Brain Drain stopped?

Brain Drain is a double-edged sword, because if surgeons did come back to Tonga the country would have no room for them.

*-How would the government of Tonga afford these new surgeons –how would they pay them? What would happen to the current healthcare workers, would they be displaced? How would these new doctors be monitored, evaluated and trained? Without the capacity to monitor new doctors what level of care would the people of Tonga be receiving?*

### Who is to blame?

*- **T**he doctors who leave and don't come back? The country that can't support Tongan doctors but needs them?*

A middle ground needs to be identified that mitigates the negative effects of Brain Drain and capitalizes on the positives. Positives of brain drain include: migrated health workers sending money back to Tonga building the economy, migrants contributing to tourism of their home country both as consumers and as sources for travelers considering visiting Tonga, the government using brain drain to analyze other national health systems strategies, business facilitation, technology transfer and export promotion. However, these positives from Brain Drain are currently few and far between.

### Plugging the Drain: some signs of progress

Tonga needs to build surgical capacity to create an environment that will ensure employment opportunities.

*- So far so good; some promising actions in Tonga*

Recently there have been major health infrastructure projects to increase health care capacity in Tonga and there has been an increase in governance by establishing policy and institutions to address brain drain. A vicious cycle exists, doctors do not return to Tonga and are lost to Brain Drain because of the lack of infrastructure and equipment for surgical care, yet Tonga struggles to increase infrastructure without the prospective return of surgical doctors.

– ***BUT...** There is hope!*

Tonga is developing promising relationships, acquiring funding opportunities to scale up surgical capacity, in hopes of reducing Brain Drain and bringing Tongan surgeons' home.

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