

Ditch 'colonial' thinking to boost access to surgery for world's poor, rich nations told

It pays to work collaboratively with low and middle income countries, says international blueprint for action

Rich nations "must abandon colonial narratives" and work alongside low and middle income countries to boost access to safe and affordable surgery for the world's poor, concludes an international blueprint for action, published in the newly launched journal **BMJ Global Health**.

The enormous human and economic cost of continuing to neglect surgical conditions, which has been estimated to run into trillions of dollars, far exceeds the investment required, emphasises the consensus statement.

It draws on the expertise of an international panel of clinicians, business leaders, and health advocates, convened by the Lancet Commission on Global Surgery last May in the US. The meeting was attended by representatives from around the world, to discuss how best to move forward on surgery as part of the UN Sustainable Development Goals for 2030.

In 1980 the World Health Organization identified surgery as a critical part of primary healthcare, but 35 years later, around 5 billion people in some of the world's poorest nations still can't access safe surgery or afford the aftercare required, when they need it.

Yet surgical conditions make up almost a third of the world's total burden of disease. In addition to the 313 million procedures performed annually, an estimated 143 million more procedures will be needed every year, the latest figures indicate.

The need is most acute in the world's poorest countries, which comprise a third of the global population but where currently only 6% of all surgical procedures are carried out.

Investing in the provision of safe surgery and anaesthesia is extremely cost effective, irrespective of the economic analysis framework chosen, says the statement.

"Simple cost effectiveness analyses reveal that surgery compares favourably with interventions such as antiretroviral therapy for HIV or bed nets for malaria," it says.

While the cost of scaling up surgical services by around 9% a year between 2012 and 2030 would cost around US\$420 billion, this is a fraction of the US\$12.3 trillion that would be lost in economic productivity.

Among the raft of recommendations, the consensus statement calls for:

- Professional education and training bodies to assume collective responsibility for addressing the global inequities in access to safe surgical care and for developing an interdisciplinary approach to building global surgical capacity
- Universities and training programmes to establish global surgery and anaesthesia as formal career paths for trainees
- Researchers from high income countries to forge academic partnerships with researchers from low and middle income countries
- The prioritisation of clinical and research needs in low and middle income countries

- Global health funders to recognise that surgical care is affordable, saves lives and promotes economic growth, and that it is essential for reaching development goals
- Surgery to become a critical part of donor funding for health system strengthening
- Individuals and organisations to stop ‘dumping’ outdated and obsolete devices overseas
- The biomedical devices industry to develop low cost innovations in surgery, and to train its technicians to service existing equipment
- Campaigners, advocates, and the media to step up their efforts to communicate the scale of global surgical inequities and the consequences of inaction

In his address to delegates at last May’s meeting, Dr Jim Yong Kim, President of the World Bank Group, said: “Not only is [improving] access to surgery the right thing to do morally, but it is also important to ending extreme poverty and boosting shared prosperity.”

The consensus statement published today asserts: “High income country actors must abandon colonial narratives and work alongside low and middle income country partners to build the surgical systems of the future.”

It concludes: “No one stakeholder can alone achieve the cross-sectoral improvements required to make timely, universal access to safe, affordable surgical and anaesthesia care a reality. We call on all countries to commit to this vision to achieve the health, welfare, economic and equity gains it promises.”