

Sometimes a single carefully focused intervention – like funding the training of an intensivist for an under-staffed, under-equipped ICU – can be the catalyst for dynamic change.

Paediatrician Dr Nandipa Sotobe-Mbana, currently undergoing her two-year training in paediatric critical care at the Chris Hani Baragwanath Hospital in Gauteng, is about to become a living example of the power of one. She comes fortified with the fundamentals of passion, dedication and a determination to make a difference. Her return to Mthatha in 2021, will have a ripple effect across the province.

Unless there is another intensivist posting, she will be the only paediatric critical care subspecialist in Mthatha's private and public sectors, teaching registrars, tackling the shortage of ICU nurses and improving liaison with the other two ICUs in East London and Port Elizabeth.

Nelson Mandela Academic Hospital is the only critical care referral centre for some 6.8 million people across the former Transkei. "Not one of the 20 or so referring hospitals can fully support critically ill patients, nor do they have adequate ventilation facilities or appropriately trained staff," says Dr Mbana.

NMAH has seven paediatric ICU beds and eight paediatric High Care Unit beds, overseen by two paediatricians (one, now that Dr Mbana is in Gauteng) and one ICU nurse to two patients.

DR NANDIPA SOTOBE-MBANA

Subspecialist Award

Walter Sisulu University
Paediatric critical care

164 165





## Demands of the job

"It can be physically and emotionally strenuous. It is often difficult to choose whom to admit. You have to look at their prospects of survival or else you can block a bed for others, possibly for days. Sometimes you just keep working because you are concerned about a particular patient. It's often difficult to let go and you can work into the night," she admits.

Asked how the paediatric ICU she's training in at Chris Hani Baragwanath Hospital compares, she says. "At least here at Bara you can find another ICU to hold the patient. If a patient does not get in at NMAH, there is nowhere else to go. Our mortality at NMAH is higher than other ICUs in the country, mainly because of the lack of expertise. However, mortality has declined slightly since the constant attendance of a paediatrician since 2015." If she could change her home ICU, she would prioritise a life-saving high frequency oscillatory ventilator. Her second wish would be more qualified ICU staff and nurses, while training up people who can support critically ill patients in referring hospitals.

## **ICU** patient profile

The majority of her child patients at NMAH are medical cases. Vehicle accident victims with traumatic brain injuries, and patients with pneumonia, meningitis, cardiac failure and post-operative patients are common.

Dr Mbana is intimately acquainted with the daily challenges many South Africans face. Born to a teenage single mother who died in 1996, aged 30, and raised by her grandparents, her Gogo was a nursing matron at Mthatha General Hospital and her grandfather a lecturer at Walter Sisulu University.

"My grandfather died two years ago at the age of 88, two years after graduating with a PhD degree in theology," she adds proudly. Dr Mbana is married to an Mthatha civil engineer and moved with her two children to Roodepoort for the duration of her training. Dr Mbana's upbringing was the first single, carefully focused intervention and it has borne huge fruit, seeding her Discovery Subspecialist Award for paediatric critical care. Few in Mthatha will forget her legacy.

## **Seeing opportunities everywhere**

Another revelation for her while sub-specialising in Gauteng, is the collaboration between hospitals. "In the Eastern Cape, everyone seems to work independently. There's great potential to grow the three ICUs and share the load (in spite of the distances)." She is enthusiastic about the benefits of her current training. "Besides the teaching I can offer, I can help develop policies and ethical guidelines. I really want to strengthen capacity. Countrywide we have huge trauma-related pathology. Managing suitably qualified specialists has shown to improve patient outcomes and reduce costs," she says.

66 167