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Hosted by Prof. Peter Dietz The University of Sydney, Sydney Medica I School Nepean, Pelvic Floor Unit Duration: 5 weeks (12 February 2018 to 16 March 2018)

I am currently working in University of Gondar Specialized Hospital, Gondar, Ethiopia as urogynecologist. My institution has one of the oldest and the largest medical school in the country which is expected to provide health care services for around 5 million people living in the North West part of the country.

In Ethiopia, like many other regions of Africa, quality healthcare remains a major challenge, particularly for Pelvic floor disorders. As one can expect in a country with high fertility rate; pelvic floor disorders are common reproductive health problems. This calls for strategies and interventions that focus on the importance of training qualified manpower, providing quality of care at all levels, train fellow professionals that can design, conduct and implement researches, and evaluate clinical practices and programmes to minimize these maternal morbidities and related complications in Ethiopia. For these reasons, a pioneer program in the country to produce the badly needed subspecialists in Urogynecology and Pelvic floor Reconstructive Surgery was launched in our university hospital in January 2016 with the help of our partner from Germany Urogynecology association and I am among the first groups of fellows who completed the fellowship in January 2018. And IUGA has also played an important role in availing observership grant for those from developing countries.

I attended my observership in Australia at the Pelvic Floor Unit, Nepean Hospital, Sydney for five weeks in 2018, starting on 12.02.18. The pelvic floor unit is run by the distinguished and renowned urogynecologist Professor Peter Dietz. It is one of the most successful and well-established unit in the world in providing advanced care and producing internationally recognized research output. The unit runs well organized and resourceful research center especially in having quality 3D/4D pelvic floor ultrasound

volumes data in conjunction with clinical data. All spectrum of urogynecologic procedures are also performed in the unit.

I have seen how much energy is being invested to improve the care provided in the field especially using 3D/4D ultrasound. The unit is a fertile ground to the world urogynecology community to obtain substantial experience. I have also witnessed scholars coming from different corners of the world to benefit from this endeavor. In the unit there are two urogynecologist and two fellows who were instrumental during my stay.

I contacted Professor Peter Dietz after revising host directory of IUGA when I planned to compete for IUGA 2017 observership grant and Professor Peter Dietz and his colleagues provided me the necessary support in organizing my travel and stay.

I had expectation to acquire clinical and research experience in the field especially usage of 3D/4D ultrasound for evaluation of pelvic floor.

My experience in the unit was marvelous and I can say one of the best times in my career. I was engaged in the unit starting on my day of arrival to my departure. I was engaged to pelvic floor unit on the first day of my visit by familiarizing myself to 3D/4D viewer software which was used later to do my project titled "Is pelvic floor muscle function an important factor for fecal incontinence". I had the chance to attend major operations in the field never seen before like doing posterior repair differently and surgeries on trial like puborectalis sling for genital hiatus widening in addition to common procedures.



Left to right: Moshe Gillor, me, Ka Lai Shek, Jessica Caudwell-Hall, Peter Dietz

I was given the chance to observe the majority of activities in the unit and at Peter's private urodynamic clinics where I got the chance to practice 3D/4D pelvic floor ultrasound under supervision. At private urodynamic clinic I had also the opportunity to observe clinical evaluation of patients with pelvic floor disorders. All staff of the unit were friendly and helpful. Especially, Prof. Peter is an amazing person who loves to explain everything scientifically and I enjoyed that very much.

Conclusion

I found pelvic ultrasounds particularly 3D/4D ultrasound very beneficial in understanding pelvic floor disorder better.

I encourage young gynaecologist interested in urogynecology to be member of IUGA and benefited from clinical awards provided and have exposure at best set up in the field. I would like to thank IUGA for the chance given me and should continue the effort to expand standard urogynecologic services to all corner of the world in general and to underserved part of the world in particular especially Africa.