Medical students’ experiences and perspectives from a local, multidisciplinary trauma conference

The 2nd annual Cape Town International Trauma Conference (CTITC) was hosted at the Century City Conference Centre on the 21st and 22nd of November 2019. This conference was the first time the Trauma Society of South Africa (TSSA) and the South Africa Orthopaedic Trauma Society (SAOTS) joined forces with the South African Association of Paediatric Surgery (SAAPS) to put the leading voices and experts in the fields of emergency and paediatric surgery together under one roof to learn from each other, to the benefit of all the attendees and their patients.

Each morning began with a two-hour joint plenary session where all 333 attendees converged into one venue. These included 58 South African registrars, 48 South African specialists and 16 international specialists and 7 registrars. These sessions, many of which were multidisciplinary, were presented by experts in their fields and discussed topics of joint interest. These talks conveyed a holistic approach bringing politics, economics, surgery and societal issues together to help us understand the burden and treatment and possible solutions for traumatic injuries. For example, Prof. Richard Matzopoulos from the University of Cape Town’s School of Public Health and Family Medicine and the deputy director of the Medical Research Council of South Africa’s Burden of Disease Unit helped us understand the causes of alcohol abuse and how that affects violence and trauma in our country, just before Prof. Juan Carlos de Agustin from Hospital General Universitario Gregorio Marañón in Madrid took us through the principles of damage control surgery.

TSSA, SAAPS, SAOTS registrars and consultants presented 44, 42 and 37 trauma talks respectively. Some of the 54 nurses and health and rehabilitation professionals at the conference also gave talks in the breakout sessions. Last but by no means least, there were 34 students with a few brave enough to present, and the remainder who engaged with the content and presenters.

The talks given were combinations of experienced surgeons drawing on their skills to allow us to benefit from their expertise and younger researchers updating us on their more recently acquired research skills and interests. This allowed us to see what is possible for us to aspire to in the future, giving us an insight into the steps necessary to get to the stage of presentation.

The conference organisers were gracious enough to offer a few medical students from the University of Cape Town’s Surgical Society the opportunity to attend the conference and all of the talks without cost. UCT’s Surgical Society is a student-run association of students from the university (mostly medical students but it is expanding to other degrees and faculties each year) and is affiliated with the UCT Department of Surgery. It was established in 2006 and hosts events, talks, workshops, training programmes and shadowing times that are all aimed at encouraging a culture of passion and excellence towards surgery amongst undergraduate students.

We thoroughly enjoyed being able to attend the CTITC; below is a short list of some of the things we learned:

• Exposure to the conference environment builds intrigue in the diversity of work and research surgeons can do. Examples included observing a collaboration between physicists and surgeons teaching on blast injuries and the appropriate management thereof and then seeing a surgeon speak about how artificial intelligence and big data has the potential to change surgical provision in our country.

• The presenters had a broad range of interests and were committed to interdisciplinary work, incorporating information and expert opinion from vastly different backgrounds.

• Anatomy is a visual subject and the human body is an art form with unique structures and functions and diversity between people. It was fascinating to see the role that 3D-imaging tools can play in predicting complications and it made us realise how important it is to be competent in the basics of human anatomy.

• Learning to present your work and the work of others in front of large groups of highly educated people is an important skill to prioritise for any person hoping to enter the field of academia.

• Research is playing an increasing role in guiding the treatment of patients in South Africa. Our perspective has been broadened exponentially on the scope of research possibilities that can be pursued. It was encouraging to see that it is possible, and even important, to be a surgeon who thinks clearly and critically about knowledge and understands its potential clinical application.

• The typical stereotype of “a lab rat researcher” is not what we observed at this congress and is not the type of dynamic and engaged researchers that South Africa is creating. The presentations we saw by South African surgeons and allied healthcare researchers were relevant to our context, presented vibrantly, and emphasised the importance of multidisciplinary care and helped us get more excited about building a career in clinical research.

• It is important to cross-polinate between surgical disciplines and enhance the application of existing solutions to other disciplines.
Presenting and attending conferences like these provide an opportunity for intersectoral collaboration, networking, finding mentors, and for ‘lightbulb’ moments to occur.

The adult, adolescent, and child are completely different types of humans and each deserves experts who are dedicated to their care specifically.

The perfect hospital doesn’t exist, but each practice area provides different opportunities for personal and career development. It is therefore important to consider a range of variables when deciding on destinations and institutions for internship and further studying.

We would strongly advocate for more opportunities like this to be presented to undergraduate students, giving them a chance to expand their mind and to foster a culture of curiosity and continual learning. We expect that this will encourage students to pursue their studies with more dedication and will help students become more passionate about research and its implications (just as we were), both of which will benefit our healthcare system and its patients.

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Declaration
The authors declare no conflict of interest.