



Miller School Clinicians Provide Noninvasive Ventilation Training in Haiti

A University of Miami Miller School of Medicine physician team recently provided training in noninvasive ventilation (NIV) to help Haitian medical professionals care for COVID-19 patients with serious respiratory problems.



Haitian health care workers received training in noninvasive ventilation.

“Haiti has limited resources to provide adequate respiratory care to critically ill patients,” said Alexander Fort, M.D., assistant professor of clinical anesthesiology and critical care medicine. “Noninvasive ventilation has been shown to



reduce the duration of hospital stays, the need for invasive mechanical ventilation and mortality among adults, and can be a life-saving treatment strategy during the COVID-19 pandemic.”

The UM-led team provided a three-day NIV training course for 36 nurses, respiratory therapists and physicians in Haiti, funded by Project Medishare, an organization founded by UM medical professionals in 1994 to improve Haiti’s health infrastructure and strengthen the skills of medical professionals.

Haiti has one of the lowest health care workers-to-population ratios in the Caribbean, with an estimated 124 ICU beds and 64 ventilators for a population of 11 million people. While COVID-19 cases in Haiti have been relatively well controlled, there is a growing need for NIV care, Dr. Fort said. The NIV curriculum was developed in collaboration with the Haitian Ministry of Health and the Bernard Mevs Hospital in Port-au-Prince.

A collaborative study

The team’s study, “Collaboration in the Time of COVID-19: Noninvasive Ventilation Training in Haiti,” was published in May in *Anesthesiology News*. Miller School participants included Ivet Cordoba-Torres, M.D., assistant professor of clinical anesthesiology, Chantal Policard, M.D., assistant professor of clinical anesthesiology, and Trishul Siddharthan, M.D., assistant professor of pulmonary and critical care medicine. Peter Jackson, M.D., a pulmonologist and critical care physician from Virginia Commonwealth University School of Medicine, also participated in the training.



Dr. Siddharthan said the team received very positive feedback from the curriculum, which included classroom sessions and simulation training.

“Every trainee had an increase in scores on the confidence survey and knowledge exam,” he said. “The averages for both assessments following training showed a significant increase in confidence with NIV use and knowledge of NIV principles.”

The team is in the process of publishing formal results from the project.

Plans for additional education

Additional educational initiatives are being planned, according to Dr. Cordoba Torres.

“On-the-ground needs assessments with key hospital stakeholders, which was done during breaks in the training sessions, identified educational and infrastructure gaps, including the need for invasive mechanical ventilation education and respiratory equipment,” she said. In addition, a distance-learning program through a telemedicine platform is being planned.

“The value of providing medical education to a grateful and appreciative group of health care workers is immeasurable,” Dr. Fort said. “But equally valuable are the relationships and friendships that we made along the way. Ultimately, the goal for all of us was to provide the highest quality health care to every patient.”

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