THE ACTION OF MBC IN LOW- AND MIDDLE-INCOME COUNTRIES*

Michele Masellis

Before I suggested presenting this lecture, I asked myself whether the idea of action by the Mediterranean Council for Burns and Fire Disasters (MBC) with regard to Low- and Middle-Income Countries (LMIC) might possibly seem ill-considered, too ambitious, or even arrogant.

More precisely, I tried to understand whether the MBC now possesses sufficient cultural and scientific maturity to undertake such a step.

To reply to this question, and before getting on to the main theme of my lecture, I believe it may be useful to conduct a rapid review of our Association’s history, starting with the reasons for its original creation.

It was the 16th of September, way back in 1983, when in Palermo, on the occasion of the 32nd National Congress of the Italian Society of Plastic Surgery, it was decided to organize a “Meeting of Burns Experts from the Mediterranean Area”.

The idea had come out of an analysis made by my teacher Prof. Gianni Dogo, Prof. Gunn and myself regarding the problem of burns in countries of the Mediterranean area, immediately after my arrival in Palermo as Chief of the Department of Plastic Surgery and Burns Therapy.

Burns are an accidental pathological event present in all countries of the world. The scientific and clinical approach, however, may vary profoundly from one Mediterranean country to another. The Palermo meeting was to be an opportunity to verify identical positions, analogies and divergences and what mutual advantages might derive from a permanent interchange of information. The topics of the Meeting were:

- An analysis of the actual situation in each single country as regards the practice of prevention, therapy and the functional recovery of burn patients;
- The study of a common protocol with the purpose of achieving uniform orientations in research, teaching and treatment;
- A proposal to found a consultative organism among burns experts from the various countries with a view to the possible organizing of periodic meetings.

The participants were burns experts from Israel, Italy, Yugoslavia, Syria, Spain and Turkey.

The Statute of the Mediterranean Burns Club and its logo were approved.

The logo, a red fire under the motto “In studio victoria”, was meant to indicate the ambitious objective which we all proposed to achieve and which is cited in the Statute: Art. 3 “The purpose of the Mediterranean Burns Club is:
- to call meetings at times and in places to be decided on each occasion to consider a theme for seminars, or panels for discussion with exchange of ideas and expression;
- to seek appropriate ways and instruments for the dissemination of results of such meetings;
- to integrate, by the exchange of letters between individual members, information, knowledge, studies, research and any other elements that may enrich the cultural, intellectual and scientific wealth of the Club;
- to promote the interchange of individual types of culture in the various Mediterranean countries by assisting young physicians to enter the field of burns research;
- to assist in the preparation and development of research programmes among the various members with a view to increasing, strengthening and extending links and personal cooperation in the various countries.”

The MBC had its official inauguration in 1987 during the First MBC Meeting, in Palermo. Burns experts from Algeria, Cyprus, Egypt, France, Greece, Israel, Italy, Yugoslavia, Malta, Spain, Syria, Tunisia and Turkey were present.

The first President was S.W.A. Gunn, who in his opening address declared among other things:

“The Mediterranean countries are united by a common sea and by a series of historical events which, over the centuries, have reciprocally affected and woven their cultures and destinies. They present at once differences and

similarities in every field, and surely in scientific approach, in disease patterns and in care systems, depending on their individual background, level of technology and socio-cultural structures.

These similarities and differences extend also to health, to surgery, and to care of burn patients. It was this that led our late friend Prof. Gianni Dogo, in 1983, to propose the formation of an organized yet loosely-structured forum of Mediterranean burn specialists. A club of friends, rather than a structured society”.

Alas, Professor Dogo had died in the meantime. He was appointed Honorary President.

The MBC is 21 years old. Under the leadership of Bill Gunn, who presided over the MBC until two thousand and four, important activities were developed with the intention of achieving the objectives that had been set way back 1983.

The year 1987 saw the birth of our journal *Annals of the Mediterranean Burns Club*, renamed *Annals of Burns and Fire Disasters*, when our Association became “The Mediterranean Club for Burns and Fire Disasters”, as it began to develop its synergic action between burns as a medical and individual problem, on the one hand, and fires and their management as a social problem, on the other.

*Annals* has become the spokesman of all MBC colleagues and of many other countries outside the Mediterranean area. Every issue has a circulation of some three thousand two hundred copies, sent free all over the world. *Annals* is also entirely available on line and anyone can visit the site free of charge and download the articles.

*Annals* is now listed by the United States National Library of Medicine.

The MBC has developed its scientific and training activity, organizing a total number of: 35 Congresses and Training Courses in all member countries. Between 1988 and 2007, 180 scholarships were awarded: 119 to doctors and 61 to nurses. 654 papers by MBC members were published in *Annals*.

The scientific international activities were remarkable:


1992-1995: *The Tempus Project* (EU): The realization of a laboratory and a multimedia classroom connected in local network providing a system for managing images from various sources (e.g. operating theatres, etc.) and for training, in order to improve and update the teachers’ scientific preparation and if necessary modify university courses. Partners: MBC, University of La Coruña, University of Bucharest, Informed Palermo.


These three projects were preparatory to:

2002-2006: *The BurNet Project* (EU): The project aims to interconnect the Mediterranean Burn Centres through an information network both to standardize courses of action in the field of prevention, treatment and functional and psychological rehabilitation of burn patients and to co-ordinate interactions between Burns Centres and emergency rooms in peripheral hospitals using training/information activities to optimize first aid provided to burn patients before referral to a Burns Centre.

Partners: Algeria-Douera, Cyprus-Nicosia, Egypt-Cairo, France-Toulouse, Greece-Athens, Italy-Palermo and Turin, Israel-Beer Shev, Jordan-Amman, Lebanon-Beirut 1 and 2, Malta-Guadamangia, Morocco-Casablanca, Spain-La Coruña, Syria-Aleppo and Turkey-Gulhane.

As a result of its notable activity the MBC has received highly qualifying international recognitions:

In 1997 the Mediterranean Club for Burns and Fire Disasters was officially designated “WHO Collaborating Centre for Prevention and Treatment of Burns and Fire Disasters”. The formal protocol was signed in Palermo on 9th October 1997.

In 2000 to respond to the expanded activities and to better reflect its growing importance and international stature, in the title of our organization the word Club was replaced by Council. MBC became: “Mediterranean Council for Burns and Fire Disasters - WHO Collaborating Centre”.

In 2001 the Economic and Social Council, at its Organizational Session of May 2001, decided to grant “Special Consultative Status of UN” to the Mediterranean Council for Burns and Fire Disasters.

As is apparent from these remarks, it is possible to say that the main objectives – related to the analysis of the actual situations in individual countries in the practice of the prevention, therapy and functional recovery of burn patients; to the study of a common protocol in order to unify trends in research, teaching and treatment; and to the proposal to found a consultative organism among burns experts in order to organize possible periodic meetings – have been attained.

The best testimony of all this is the realization of the BURNET Project. Today, indeed, thanks to the Burnet Project:

- 17 Burns Centres in the Euro-Mediterranean area were provided with advanced technology.
- 17 Burns Centres are concretely connected in a close and equal relationship of analysis and dis-
activity is intended to realize projects of research and study and the activities of international cooperation. In particular, its aim is to permit a wider development of the scientific and cultural activities laid down in Article 3 of the MBC’s Statute and to realize new and propose ever newer scientific and cultural activities would certainly give new impetus in that direction.

The creation of an organism whose task is to analyse and propose ever newer scientific and cultural activities would certainly give new impetus in that direction.

After an analysis conducted with our President Emeritus, Professor Gunn, and with our General Secretary Bishara Atiyeh, the matter was discussed at the Executive Meeting held in Palermo on 22nd March 2007.

A proposal was passed that will be submitted to approval at the General Meeting, namely the creation of an Academy of Burns and Fire Disasters (ABFD)-MBC. The Burnet web portal is today the most complete interactive tool regarding burns in relation to scientific studies, treatment and prevention. However, it is my belief that the time has come to review the MBC’s organizational model in the light of the results achieved and as a function of the new demands that are triggered by a more modern and more open vision of our future activities.

The Burnet web portal is today the most complete interactive tool regarding Burns in relation to scientific studies, treatment and prevention.

There are numerous free online courses on first aid in burn accidents, the management of burn patients, and prevention.

Beyond any doubt, the work of realizing BURNET witnessed among the Partners the gradual development of a new “Therapeutic Pool” mentality.

The Data Collection Tool will constitute the most extensive clinical file Data Base in existence of burn victims, providing a collection of epidemiological, statistical, and research material. This may become a premise for the creation of a common clinical folder.

The Web Portal www.burnet.org constitutes a cheap, accessible, and concrete instrument to participate in Forums and Discussion Groups, to use the Scientific Library and to give updated reference portals on meetings, congresses and scientific innovations.

The Academy is the scientific operative instrument of the MBC. The aim of the Academy is to permit a wider development of the scientific and cultural activities laid down in Article 3 of the MBC’s Statute and to realize new activities of international cooperation. In particular, its activity is intended to realize projects of research and study on:

- Clinical and therapeutic aspects of the burn disease;
- Prevention of burn accidents;
- Management of burn disasters;
- Organization of burn care systems and programmes in countries in the Mediterranean area and in the developing countries, with particular reference to the realization of the BURNET Programme;
- Analysis, study, and production of material for the prevention campaign;
- Organization of national and international Master’s courses for the training of health operators in the sector of burns and fire disasters;
- Organization of training courses for general practitioners, nurses, fire brigades, volunteers, health workers, etc. for immediate action in mass burns;
- Organization of courses of information and education on burns prevention in schools, for the general public in the Mediterranean countries, and in the developing countries;
- Any other scientific, training, educational, or popularizing activity in the emerging and the developing countries, intended to promote a campaign of international cooperation in the defence of human rights in the context of burns prevention and the treatment and functional and psychological recovery of burn patients.

Coming now to the main point of my lecture, I firmly believe that the MBC is without any doubt able to consider the low- and middle-income countries in order to make the same analyses as were made in 1983 for the Mediterranean countries. In those days the input was mainly cultural and scientific, and an attempt was made to ascertain and reduce the gaps in the field of burns prevention and treatment in the Mediterranean countries. Today the stimulus would mainly be a feeling of solidarity aimed not only at reducing scientific and cultural gaps but also social gaps – a responsible desire to collaborate for the benefit of people who in the course of time have not yet succeeded in overcoming the difficulties, including those of organization and of care and assistance, in the field of burns.

Burns are the most serious public health problem in the developing countries, mainly striking the poorer sectors of the population and children in particular. The cause, in a large proportion of cases, is related to the daily use people make of certain domestic implements for cooking and heating and for lighting their homes. The number of accidents is closely linked to the use of non-electric devices such as gas-rings, stoves and lamps and to the ignition of kerosene, fuel oil, butane, liquid petroleum gas (LPG) and surgical spirit. A large proportion of responsibility is due to the inadequate planning and construction of such devices without any safety systems; in particular, there are defects in the fuel combustion system, which causes them to be unstable, plus structural mechanical inefficiencies. In addition to all this, there is the general public’s ignorance of basic safety precautions. In such countries, it has to be said that very often there is a lack of legislative regulations on safety, both at industrial and government level, and if they do exist they are not properly observed.
The organization of facilities for the treatment of burn patients is equally poor.

The action that the MBC could develop in favour of LMIC should be articulated in the following manner:

**Objective:** Advancement of burns prevention and treatment in LMIC.

**Background:** Modern and actual standards of burns prevention and treatment for LMIC. Practical standards suited to the actual situation of LMIC need to be developed.

**Programme:**
- Monitoring of the most frequent causes of burns in children in the country where collaboration is starting up;
- Monitoring of epidemiology of paediatric burns in the last five years in the country where collaboration is starting up;
- Monitoring of the hospital facilities where it is possible to treat extensive paediatric burns in the acute phase, with the possibility of providing the patient’s re-educational, functional and psychological treatment;
- Monitoring of the out-patient facilities for the treatment of non-extensive paediatric burns;
- Preparation of information and educational courses on the epidemiology of burns (schools, youth groups, family groups, communities) and the use of various opportunities for the dissemination of educational material, such as markets, children’s parties, meetings, radio, TV, posters, stickers, etc.
- Courses of professional training on burns treatment for doctors and nurses who work in peripheral health facilities, far away from hospitals;
- Production of common therapy protocols;
- Training courses for technical and sanitary personnel for the organization of a qualified service for the transport and necessary care of burn patients;
- Training courses for personnel working with children suffering from scar sequelae who require re-education.

**Tools:** Connect selected group of LMIC in Asia, Sub-Saharan Africa and Latin America by the Internet to the Burnet Network;

**Final outcome:** The creation of an International Study Group interconnected by the Internet in order to:
- establish a data bank
- formulate practical standards
- set prevention programmes adapted to specific LMIC situations
- develop a teaching curriculum appropriate to LMIC

To conclude, I think, in the light of these remarks, that the MBC is capable of making a quality leap in order to consolidate the work it has done, to implement this on the level of research teaching, and to extend its horizon even beyond its own normal confines.

The instruments to achieve already exist:
- disseminate the existing BURNET,
- create the First International Burn Network,
- strengthen International Cooperation.

The seriousness of our commitment, the awareness that the results achieved have to be consolidated, and a responsible feeling of collaboration for those who after long periods of time are still not able to overcome the scientific, organizational and therapeutic difficulties in the burns sector must in my opinion constitute the MBC’s new frontier.

In a more general view, a consolidation and a widening of its activities would give the MBC greater scientific dignity and operative capacity even beyond the Mediterranean area.