INTRODUCTION & BACKGROUND

Nurses Non Frontiers and EBMT NG Global Committee in collaboration with Childhood Cancer International and Yangon Children’s Hospital organised the first training course for HSCT nurses in Yangon, Myanmar in December 2017. Myanmar is a lower-middle-income country in Southeast Asia, with a diverse cultural and socioeconomic background and variable communication and transport obstacles. Up until 2012, childhood cancer management was particularly challenging, with a scarcity of human resources, quality improvement initiatives, and limited treatment outcomes. There have been only 2 centers for childhood cancer treatment in Myanmar: Yangon Children's Hospital and Mandalay Children's Hospital (Hnin, T.M., et al. 2017).

OBJECTIVES

The National Cancer Control Plan launched The National Childhood Cancer Action Plan for 2017-2021 that includes the increase of committed and trained health care providers. Several workforce training has been ongoing with international conferences, and on-site continuing education lectures from international visitors. The EBMT NG Global Committee contributed with this training in the field of of Haematology and Haematopoietic Stem Cell Transplantation, to improve knowledge and skills for adult HSCT, and settle first learnings for paediatric HSCT as at the moment this programme has not been established.

METHODS

A questionnaire in order to assess nurses education, patient assessment knowledge and learning preference, was distributed months before the meeting.

Training course was held in two days:

- First day, December 8th, with front lesson presentations - focused on evidence based quality of care in BM transplant, on principles of conditioning, nutrition control, BMT complications management such as, Mucositis, GvHD, Haemorrhagic Cystitis and Infection control and risk.

- The second day, December 9th, a practical course on central venous devices management was held by Mauro Pittiruti, particularly focused on peripherally inserted central lines (PICCs), with large participation of doctors from different hospitals across the country.

We also visited Yangon Children’s Hospital, paediatric ward, laboratory and blood bank.

RESULTS

Over a hundred nurses together with some physicians, attended from Yangon Children’s Hospital, Mandalay Children's Hospital, and satellites centers, and they were extremely interested, especially on BMT complications.

Most nurses are Diploma and Bachelor’s degree, Master’s degree course is available, but nurses don’t have the opportunity to attend it currently.

Our educational course was a stepping stone, indicating to local nurses JACIE oriented direction on how to implement their learning priorities in the future.

CONCLUSION

The future plans within the National Childhood Cancer Action Plan, are to continue and strengthen the workforce and promote effective definitive treatment and supportive care.

Workforce continuing education has been established based on online continuing education with international hospital partners. EBMT NG Global Committee is looking forward to collaborate and establish an online continuing education focused on HSCT issues. For that reason we look forward to continue our collaboration with a second step, an advanced training course focused on management of adult and paediatric patients undergoing BMT, using the new technologies possibilities such as on-line follow up, courses.

REFERENCES