

# AIHA Learning Resource Centers:

## Linking Practitioners, Patients, and Communities to Vital Healthcare Information

BY KATHRYN UTAN

When the staff at the Women's Wellness Center in Kutaisi, Georgia, observed a steady increase in rates of neonatal mortality due to central nervous system damage resulting from asphyxia over the past few years, Dr. Nino Berdzuli immediately turned to the Internet. Berdzuli, an ob/gyn and the information coordinator of AIHA's Kutaisi/Atlanta partnership, knows the value of clinical practice guidelines (CPGs) for neonatal resuscitation; she has been working on adapting them for use in Georgia since 1997 when she was introduced to the concept while training at Grady Hospital and Emory University as part of AIHA's now-graduated Tbilisi/Atlanta partnership.

"The protocols we had been using for neonatal resuscitation at our maternity house really were obsolete, as were the guidelines for neonatal and perinatal services in general," Berdzuli notes, explaining that physicians often used outdated methods of treatment. "After doing some research on the Internet using Medline and several other information sources, I analyzed and compared a number of CPGs to the ones we were using and discovered many differences."

The protocols being used at the maternity house did not provide appropriate standards for managing cases requiring neonatal resuscitation, according to Berdzuli. "The pathways were especially weak in their guidance for delivery room care when proper assessment and management of newborns with any type of

disorder that may cause damage to the central nervous system is crucial."

The staff at the maternity house are quite satisfied with the new protocols, which are cost-effective and use less pharmaceuticals than the previous system, says Berdzuli. But the most important result of the change has nothing to do with saving money; it has everything to do with saving young lives. "Since implementing the new guidelines in 1999, the number of cases involving central nervous system damage that resulted from asphyxia have dropped substantially."

Every day, AIHA information coordinators join forces with others—sometimes staff from their own institutions, sometimes students or healthcare professionals from area schools and hospitals, and sometimes patients—to bring the most up-to-date research and treatment options into their communities. Information has become an essential commodity within the modern healthcare system—as important as medical equipment or pharmaceuticals—and AIHA's Learning Resource Centers (LRCs) serve as a conduit between crucial data and the practitioners, patients, and communities seeking it. Just as there is a nearly infinite amount of healthcare information available, so too are there countless ways to put that information to good use.

### Keeping Healthcare Professionals on the Cutting Edge

At Minsk City Hospital #36 in Belarus, for example, information coordinator Dr.

Vladimir Rambowsky and his colleagues at the LRC conduct weekly review sessions and monthly seminars for physicians to keep staff informed of the latest developments in healthcare and clinical practices. "We have also launched a series of training courses in reproductive health and sexually transmitted infections (STIs) for gynecologists from other medical institutions across Belarus."

Following a recent presentation on diagnosing chlamydia, a doctor who attended the lecture reviewed the file of one of his patients and discovered that her chronic symptoms were in keeping with what had been discussed during the session. Another series of tests indicated that the woman did indeed have chlamydia, according to Rambowsky, and she has since been successfully treated. "It often happens like this. . . . A physician will attend a lecture and something he hears will remind him of one of his patients then he will review the case and come to a correct diagnosis."

While providing information to healthcare professionals allows them to better serve the needs of their patients, information coordinators are often called upon to assist in immediate and compelling situations in which knowledge is the only thing standing between life and death.

When Dr. Ravshan Asamov of the Tashkent National Republican Center for Emergency Medical Care was having difficulty convincing a patient she needed an operation to correct a bronchial condition, he sought help from Dr. Bobir Shukurov, information coordinator of the Fergana/Atlanta partnership. "Medical staff often seek our assistance in getting information for patients regarding both their ailments and treatment options," Shukurov states. "In the case of this young woman, she was [apprehensive] about the operation and didn't really believe it was

necessary. We provided her with data describing the disease, how it was affecting her, and probable outcomes of the operation. . . . This information helped strengthen her trust in the surgeon's competence and sincerity. She agreed to the procedure and is now doing much better."

Improved patient confidence is one result of using evidence-based research; improved confidence among medical professionals themselves is another, according to Shukurov. "Our patients take comfort in the fact that we obtain information only through reliable Internet sources, while our physicians gain a new level of evidence-based scientific knowledge. This has created an environment of continuous learning that has dramatically changed the attitudes medical staff have toward both their chosen profession and their patients."

### Reaching Out to Young People Within the Community

Healthcare practitioners are not the only ones LRC staff seek to educate—programs for patients and members of the community are also important focus areas for many AIHA partners. Students in the Russian city of Kurgan, for example, reap the benefits of public education and outreach programs developed by LRC staff. Sergey Kosintsev, a programmer at Kurgan Obstetric Hospital #1 and information coordinator of the Kurgan-Schuche/Appleton partnership, notes that a lack of school-based programs on issues of reproductive health has resulted in a low level of knowledge on the subject among area youth. "In general, school curricula do not encompass the provision of information on the sexual or behavioral aspect of human life. . . . This often leads to poor decision-making later in life."

To fill this void, the LRC's lectures and educational materials focus on topics such as healthy lifestyle choices, substance abuse,

STIs, contraception, and both male and female reproductive health. Courses on these and other subjects have been presented to more than 3,200 students between the ages of 14 and 19 at four Kurgan area schools since November 1999, Kosintsev says.

Another interesting program launched by the LRC in January 2000 targets students who have chosen healthcare as their future profession. This skills-based training course—developed in cooperation with both the hospital and a local educational center called "Harmony"—includes tours of a number of departments within the hospital and hands-on participation in a variety of procedures. "Students from Kurgan High School #57 aged 14 to 16 receive pre-college professional education and become acquainted with evidence-based medicine and the Internet technology available through the LRC," Kosintsev explains, noting that many participants become involved in individual scientific research projects.

The LRC at City Hospital #36 in Minsk also offers a number of courses targeting area youth, according to Rambowsky. "Twice a week our health center provides classes on topics such as smoking cessation, obesity, and healthy lifestyles that we developed in conjunction with our partners from New Brunswick. Clinicians also deliver lectures on contraception and STIs for some 35 area students each month."

### Reaching Beyond Community Boundaries

In some cases, the information available through the LRCs spreads far beyond the walls of hospitals and borders of individual communities. When a television broadcast recently highlighted the plight of a 9-year-old Kazak boy who was apparently suffering from progeria—a rare disease that causes rapid premature aging—journalists turned to Almaty's Scientific

Center of Pediatrics and Children's Surgery for more information.

"This was the first suspected case of progeria reported in Kazakstan, so there was very little information on the disease available in the Institute's scientific library," explains Zhyldyz Abdrakhmanova, information coordinator of the Almaty/Tucson partnership. "Through various Internet resources and search engines, we were able to obtain the necessary information on the disease and a number of journalists from newspapers and television channels throughout the country conducted interviews with leading specialists from our center."

Reports on the boy's condition soon came to the attention of medical professionals as far away as Germany, Russia, and Ukraine—many of whom consulted on the case—and individuals from Moscow, Vladivostok, Sakhalin, and the United States, whose letters of support flooded in.

"For clinicians at our Institute, it is often necessary to perform scientific research on a wide range of topics concerning pediatric medicine and surgery," says Abdrakhmanova. "To do this, they must have ready access to current information. Our LRC provides this access, as well as assistance with many of the tasks involved with collecting data."

Since 1995, AIHA has established more than 130 partnership LRCs. Altogether, these Centers are providing information and communications services to a community of more than 60,000 health professionals across the NIS and CEE. In addition to meeting the information technology needs of partner institutions, Centers provide support to in excess of 25,000 other medical professionals and community members each year, including approximately 1,500 patients.

---

*Kathryn Utan is AIHA's staff writer.*