

Anne G. Osborn ASNR International Outreach Professorship Report

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From 8/12-8/23/2024, I was honored to visit the radiology department of the Kilimanjaro Christian Medical Center (KCMC) in Moshi, Tanzania as a part of the Anne G. Osborn ASNR International Outreach Professor program. Founded and owned by the Good Samaritan Foundation, KCMC serves as the major regional referral center for northern Tanzania and has the second largest radiology residency in the country, boasting over 30 residents at the time of my visit. The number of residents varies greatly from year to year (ranging from 3-12 currently), as each resident is funded by his/her local hospital and are asked to return to serve at that hospital at the end of training. Currently, the radiology department is staffed by 5 full time attending general radiologists, with 3 CT/MRI interpreters and 2 x-ray/US interpreters. The program relies on guest lecturers from organizations like ASNR, Rad-AID, and Barrow, conducted both virtually and in-person, to supplement resident education.

Most of the patient population at KCMC are self-pay or insured. The hospital does not receive much governmental funding due to its private status, and radiology, in particular, relies significantly on aid support from organizations such as Rad-AID to supply PACS stations and some equipment. Equipment includes at least 3 x ray rooms and 6 US machines, as well as a CT scanner, a 1.5T MR scanner, and mammography. Unfortunately, during my visit, the sole CT scanner (which has a typical daily volume of 20-30 scans), was out of commission, meaning that patients had to pay to be transferred to the regional hospital in Moshi for CT imaging or alternatively pay for MR imaging.

My daily schedule consists of a one-hour lecture at 7:30 AM, followed by read-outs and PACS-based teaching with the residents. With the CT scanner down, the daily neuroradiology volume ranged from between 8-12 MRIs, divided amongst 4-5 residents. It was a pleasure to have the time to delve into the details of image interpretation and come up with teaching content for each case. As expected, normal examinations were rare. Pathologies ranged from late presentations of HIV & its complications including PML, to TB spinal osteomyelitis, to advanced presentations of hematologic and head and neck malignancies. In between clinical cases, I conducted small group teaching sessions with pre-prepared case conferences and shorter lectures for the residents assigned to the CT/MR rotation. I also attended multidisciplinary tumor boards which were held twice a week—one adult and one pediatric—covering malignancies of all systems. With attending support, the residents presented radiologic findings in these conferences, which engendered lively discussion amongst the surgical and medical oncologists. Currently,

KCMC does not offer radiation oncology services, although that is due to change in the next few years as they have already broken ground on a new radiation therapy complex.

Despite significant differences in resource availability between KCMC and a typical US academic hospital, I realized that we share many similar joys and frustrations of radiology practice. The appreciation showed by referring neurologists and oncologists for radiology insight can be found both at my home institution and at KCMC. Similarly, the inability to link medical records and make timely comparisons between scans performed at different institutions frustrated my hosts at KCMC as much as my colleagues at UCSF. Also shared is the enthusiasm and motivation of the trainee physicians, who impressed me with their knowledge level and were eager to learn as much as they could in order to provide the best care for their patients.

My gracious hosts were able to provide me accommodation in a guest room across the street from the main hospital and emergency department, which featured a stunning view of Mt. Kilimanjaro on clear days. I had a weekend off in between the two weeks of teaching to explore a local waterfall and tribal caves, as well as the plateaus of Mt. Kilimanjaro. At the end of my visit, the residents organized a group dinner where they gifted me with a beautiful traditional Maasai shuka and a Mount Kilimanjaro t-shirt. I will be forever grateful for their hospitality, enthusiasm, and kindness! Much appreciation to ASNR and the Anne Osborn Professorship for this amazing opportunity to connect with this wonderful group of radiologists across the globe.



Entrance to the outpatient side of the hospital building, where the radiology department is situated.



Hallway leading to radiology department.



The out-of-commission CT scanner



1.5 Tesla MRI housed separately from the main hospital building



Daily AM lectures to the residents. Computers in the room, donated by Rad-AID, are where the residents preview images and prepare for readout.



Weekly adult tumor board.



Sunset over Mt. Meru, with Kilimanjaro looming over the KCMC ER entrance and hospital building.



Literally breathtaking day hike on the volcanic plateaus of Mt. Kilimanjaro, where the air is thinned by the ~3500m elevation.



Celebratory dinner at the conclusion of the visit with KCMC radiology residents, head of the department Dr. Adnan Sadiq, and visitors from Rad-AID including pediatric radiologist Dr. Amit Sura and sonographer Daniel Rae.