



COURTESY ADDIS CLINIC

A new elective course connects med students to the Addis Clinic in Kenya.

KENYA CONNECTED

GLOBAL MEDICINE REBOOT

BY MICHAEL AUBELE

This fall, fourth-year Pitt Med students Amani Davis and Vanessa Murray spent a month working with frontline health care professionals in Kenya—from roughly 7,500 miles away.

For the new elective, Global Telemedicine with the Addis Clinic (www.addisclinic.org), Davis and Murray began their days at 6 a.m., Pittsburgh time, logging on with clinical officers in Kenya, who assisted the med students as they interacted with a patient, performing a history and limited physical exam. In the afternoons, the students presented each daily case and clinical reasoning to faculty here, working to create a plan for an additional workup or case management before sharing it with the clinical officer back in Kenya. The course is codirected by physicians Thuy Bui, associate professor of medicine and director of the Internal Medicine Track in Global

Health and Underserved Medicine, and Peter Veldkamp, associate dean for global health education.

The Kenyan health care team treats everything from newborn needs to adult cancers. “They really do see it all,” Murray says, including illnesses not commonly encountered in the United States, like malnutrition and parasitic infections.

For both students, the class was a much welcomed way into global medicine. Says Davis, “I have been trying to make an international learning experience happen, but with COVID, those plans have fallen through.”

Murray, who has spent time abroad in Mexico and Guatemala, says, “We’ve built very rewarding relationships with the providers in Kenya. Everyone was super-open to teaching us how they do things.”

Pitt cardiologist and professor of medicine

Stephen Chan launched the Addis Clinic as a volunteer 10 years ago while he was a clinical and research fellow in Boston.

“It was our hope that our endeavors would not only improve our patients’ lives but also inspire the next generation of health care providers here in the United States to care for and connect with those persons most vulnerable in the developing world,” he says.

Davis notes: “I hope that I can be part of a group of students and doctors who are committed to the longitudinal relationships and partnerships required to actually make a difference.”

Murray says that ethics and the sustainability of global health practices are important to her, and that she wants to see a level playing field. Telemedicine is a way to make that happen, she says. “There’s a future, at the very least, in this platform.” ■