When health centres turn death centres

•How medical personnel in public hospitals endanger patients' lives

Tessy Igomu

Oluwaseun Ezekiel's death on March 17, 2018, at the University College Hospital (UCH), Ibadan, Oyo State, was one unforgettable loss. It is one death that her family keeps referring to as too hard to bear.

Seun, as she was fondly called, had graduated from the University of Lagos. She was awaiting her National Youth Service Corps (NYSC) deployment letter when she died, allegedly from negligence and unprofessional conduct by some medical personnel at UCH. Her distraught family insists the caregivers in the hospital were squarely responsible for her death.

Enoch Godson, a family member, recalled that when Seun was rushed to the UCH Emergency Unit, it took a doctor more than 15 minutes to amble to where she lay in a car unconscious, just to ascertain if her condition was truly an emergency.

Godson said, having satisfied himself, the doctor then grudgingly scribbled drugs for the family to buy from the in-house pharmacy and requested for an oxygen tube to aid her breathing. At the pay-point, the cashier told them to wait till he finished his bowl of amala before anything could be done.

He went on to say that the family was stunned by the coldness of the cashier. And when they could not take it anymore, they protested and their action attracted the attention of a senior nurse who promptly cautioned the man. That was when he reluctantly began to work on the bill. Just then, a nurse who sauntered in said contemptuously: "I hope these ones came with much money."

Godson said: "Seun was later admitted into the Resuscitation Unit that reeked of death. The ward only had one functional ECG monitor serving four dying patients. It was very stuffy, manned by nurses who frequently threatened to dismiss any patient whose relatives were not cooperating with them.

"The two air conditioners serving the unit were faulty. But the ones in the offices attached to the ward were working effectively. I personally felt the place should be called a euthanasia ward."

Godson said the family's hope soared when a team of doctors strolled in for a ward round. But it soon became obvious that they were student doctors. Then, shortly, Seun's face suddenly contorted with a painful fit; she struggled, shuddered and died.

"We began to scream for help but the nurses grew hostile. Rather than help or sympathise with us, they were more concerned with quietening us. They later managed to give her a few chest compresses in a futile CPR charade. While chatting and making light of the matter, they casually pronounced her dead.

"The nurses appeared more used to death than saving lives. When you kill someone with inaction, apathy and negligence, are you not complicit? UCH killed Seun with sheer negligence," he fumed.

It was in like manner that Loli, a vivacious, active child, died in a Port Harcourt hospital not too long ago. The only child of her parents, she was born after a four-year wait.

The 17-month-old toddler allegedly died due to the ineptitude of the doctor in charge. But in a sudden twist, the distraught parents were allegedly accused of complicity in their own child's death, even as the hospital told them to go and do their worst.

Even till this moment, many in the sporting confraternity in the country are yet to put the loss of Enechi Emeka, an ace sports journalist behind them.

Enechi died from his injuries, which were not life-threatening, after an auto crash. He was left to go to another hospital for treatment without being administered with anti-tetanus injection in a hospital near Nsukka, Enugu State. The alleged negligence cost him his life.

At the moment, Ekene Som Mekwunye is still grieving that he lost his father to negligence rather than illness in a Lagos hospital. He said that he did know how bad the nation's public health sector was until the incident happened. His three-day experience was more of a nightmare, recalling how he agonised as his father died after he was moved from General Hospital, Ikorodu, to the Lagos State University Teaching Hospital (LASUTH).

He is still unhappy that at, the LASUTH Medical Emergency Ward, the matrons he encountered acted like demi-gods, insisting that his father died an undeserved death.

Many who have met sheer disappointment in public hospitals have sordid experiences. There are stories bordering on utter negligence on the part of public hospital staff. In Lagos State, the Lagos University Teaching Hospital (LUTH), LASUTH, General Hospital, Ikorodu, and Gbagada General Hospital are some of the health facilities that residents are complaining about.

According to Chike Okafor, a public commentator, cases of negligence by health professionals clearly mirror the debacle in the nation's health care system.

He regretted Nigeria has jettisoned the aphorism "health is wealth," emphasising that the health of the citizenry was a true reflection of the nation's health. He noted that no country could sustain economic growth without a proper health care system and robust health care infrastructure. He lamented that access to basic health care in Nigeria had continued to pose a huge challenge.

"Most health professionals are guilty of gross misconduct. Something needs to be done urgently about this.

"Decay in infrastructure and personnel negligence are common features in many public hospitals across the country."

Experiencing the rot

Recently, the correspondent visited some public health facilities in Lagos to see how patients fared.

At LUTH, a woman was observed in the corridor leading to the women's ward, lamenting how she had had to buy every medical consumable required to treat her daughter: "My daughter has been on admission for the past three days. Here, you buy everything all by yourself – syringes, drugs, disinfectant and even examination gloves.



"Everything is costly. The process of buying them is cumbersome, yet you are compelled to get them or else no one will attend to you. If you don't have those items, the doctors will simply not look your way no matter how much you plead with them.

"Some of the nurses here are rude and hostile. It is sad but what can you do?"

At LASUTH, a woman who identified herself as Mrs. Oladele, said, sometimes, the attitude of the medical staff did not engender hope of convalescence.

"The first time before my daughter was admitted, we arrived her as early as 6am. We wanted to be among the first to be attended to before midday.

"When they opened to patients about 8:30am, some grouchy nurses began to bark orders at patients, with some saying that we were flouting some unnamed orders."

Still at the hospital, a man who gave his name as Adedeji sat resigned on a bench meant for outpatients. He kept staring into space. He said, for hours, he had been waiting with his child to see a certain consultant physician who was yet to show up for duty. Looking spent, everything around him was simply chaos and energy-sapping.

A patient who pleaded anonymity told the reporter: "Attitudinal problem is the bane of this hospital. You see it in virtually every level of care you are given."

Poor attention

Sometime ago, former Minister of Health, Prof. Babatunde Osotimehin, was reported to have said that, in 2009, health workers were largely responsible for the death of patients in various health centres across the country.

Apparently corroborating his submission, Thomas Agan, chief medical director (CMD), University of Calabar Teaching Hospital (UCTH), also said that over 90 per cent of deaths recorded in Nigerian hospitals were as a result of the bad attitude of health workers.

He lamented that health workers were not taking the life of patients seriously, in spite of their professional training and work ethics, adding that the health sector was supposed to be a place of succour, not only for the rich, but for ordinary Nigerians.

"Until health care givers begin to realise that patients under their care could be any of their family members, things will not change. Until we realise that we would be held accountable for every challenge we create, things will not go down well," he said.

Dr. Vivian Nwosu, a medical doctor based in Egbeda, Lagos, also expressed worry at the growing acts of negligence and professional misconduct among some of her colleagues in the country.

Describing the trend as an act of impunity, she wondered whether those who indulged in such acts were ever mindful of the law and the Hippocratic Oath they once took to protect lives.

"Abroad, something as little as not answering a patient on time can get your practising licence seized. But here, nobody is monitoring anybody."

Insufficient number of caregivers

Part of the challenges in public hospitals is believed to be the insufficient number of medical practitioners available to Nigerians.

According to reports, medical schools in the country graduate between 2,500 and 4,000 doctors annually, which is said to be rather too low for a country whose population now averages 180 million people.

The World Health Organisation (WHO)has also noted that Nigeria's medical personnel-to-patients ratio falls far below its recommendation. It noted that, in 2013, Nigeria's doctor-to-patient ratio stood at1:6,400 as against the global standard of 1:600.

The Nigerian Medical Association (NMA), had, on its website, indicated that a little above 40,000 medical doctors serve over 170 million Nigerians.

Put in perspective, NMA said this figures comes down to one doctor per 5,000 Nigerians, compared to one doctor per 242 people in the UK. Yet, it said that most of the medics in the country serve in teaching hospitals, federal medical centres and general hospitals in the cities.

On the part of the nurses, Open Journal of Nursing, in 2014, reported WHO's recommendation of nurse-to-patient ratio of 1:700. But the total number of registered nurses in Nigeria is said to be lower than 150,000.

Expectedly, in the face of the limited number of health personnel, patients seeking health care services have to contend with waiting for long hours. This increases the challenge of patients getting the attention they require from health professionals in the hospitals.

Nwosu believes that acts of negligence and unprofessional conduct keep rising because impunity has become the order of the day in the country.

When health centres turn death centresThe Sun News

She stressed that people are not afraid of the law because they don't get punished even after being reported.

Speaking on the prevalence of professional misconduct, medical negligence and other forms of rot that pervade government hospitals across the country, the president of the NMA, Dr. Mike Ogirima, said the association does not support any form of malpractice.

He explained that the first thing the association does immediately it formally receives a complaint about a medical practitioner is to investigate, adding that the organisation only advocates on behalf of its members.

Ogirima, a professor of orthopaedic and trauma surgery, and president of thr Nigerian Orthopaedic Association, noted that the Medical and Dental Council of Nigeria is the body in charge of regulating the practice of medicine in Nigeria. He noted that the body was dissolved three years ago, adding that it was saddening that the administration of President Muhammadu Buhari was yet to reconstitute the board.

The NMA president said even if any aggrieved individual makes a report now, the matter would only be investigated by a tribunal. "Unfortunately, the tribunal cannot sit until the council is constituted," he added.

Reacting to allegations of professional misconduct and negligence perpetrated by medical workers at UCH, the head of the public relations unit, Mr. Deji Bobade, said questions bordering on unprofessionalism exhibited by medical and health personnel and the rot in public hospitals would be better addressed by the CMD, Prof. Temitope Alonge. But he said the CMD was away for an official function and could not speak with the reporter.