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**STATEMENT BY THE INTERNATIONAL SOCIETY OF
RADIOGRAPHERS AND RADIOLOGICAL TECHNOLOGISTS (ISRRT)**

Ms Cynthia Cowling

Director of Education

International Society of Radiographers and Radiological Technologists

Thank you for the opportunity to briefly address this meeting. My name is Cynthia Cowling and I have the privilege to represent the International Society of Radiographers and Radiological Technologists (ISRRT). The President, Robert George, was unable to attend due to other commitments in this region. He has suggested that I attend in my capacity as Director of Education to inform you of some of our educational activities globally. The Society has over 85 member countries and represents more than 300,000 imaging professionals around the world.

In our capacity as an NGO officially recognized by WHO, we work collaboratively with many international societies. We have become the official voice of the profession with the International Atomic Energy Agency (IAEA) and International Radiology Quality Network (IRQN).

We have developed a close relationship with the regional arm of WHO in the Americas, The Pan American Health Organization (PAHO) by collaborating in workshops on quality assurance, radiation safety and equipment maintenance. We have run and provided materials in English and Spanish for nine workshops in quality assurance, radiation safety and equipment maintenance in Central and South America and the Caribbean.

Working directly with the WHO Global Steering group for Diagnostic Imaging and Medical Devices, the ISRRT has developed workbooks which function as stand alone instructional materials. These provide all the information, tests, practical tips and teaching strategies needed to run a workshop, and can be used in a train the trainer capacity.

Activities currently underway are the development of a digital imaging workshop for Tanzania and East Africa, assistance with a digital imaging workshop in Burkino Faso for French speaking Africa and the development of a Basics of CT for Malaysia. We are also beginning to develop the technology educational stream for the next International Congress of Radiology to be held in Shanghai in 2010.

Radiology and Ultrasound are often not seen as central to the policies and strategies of the WHO, where primary care and medicine is always the first concern. Yet, for many of the strategies and actions outlined

in the WPRO Regional Director's report of July 1 2007 - 30 June 2008, diagnostic instruments would be used. Diseases, particularly tuberculosis, are diagnosed using imaging methods. Recent attempts to perform clinical trials and research related to infant respiratory diseases recognized that without consistency and quality, research is difficult to quantify. Further it was identified that it is the operator who is ultimately responsible for that standard and quality. Often operators are poorly trained and quality assurance is never implemented.

Health sector development requires radiology services which are effective and efficient. The PAHO/ISRRT collaboration has recognized the significant role played by the radiographer. Simple, regular maintenance of equipment can reduce the all too familiar sight of nearly new and expensive X-ray machines lying idle or broken because of a minor fault. A quick response is to ask for or buy another one. A better long term strategic approach is to train those individuals using the equipment to look after it by implementing a regular maintenance program. Similarly the introduction of a simple but effective quality assurance program can improve consistency of results, lower costs and reduce radiation exposure to the patient and clinical staff.

The introduction of digital equipment into radiology departments is seen as a method of improving quality. It requires less water and negates the need for film purchase. However, of three digital machines introduced by WHO into Dar Es Salaam within the last two years, only one is working effectively. At no time were the operators given significant training in digital technology or health informatics. This digital environment must go hand in hand with appropriate training.

The improvement of reproductive and maternal health is seen to have significant impact on the economies of many developing nations. Ultrasound has become an inexpensive, portable diagnostic tool in these two areas. Workshops and courses have been provided to suitably trained midwives in some countries, allowing them to use scans as one method to determine pregnancy health. A recent workshop on breast imaging was held in Fiji and another request has arrived for gynecology and obstetrics ultrasound training.

Radiographers are beginning to fill the gaps left by insufficient medical staff. This has been recognized by WPRO with the running of a course in interpretative skills X ray operators in Fiji. This is a global trend, but it can be extremely effective in the Western Pacific where operators work in remote regions often without close contact with medical officers or radiologists.

The mission of the ISRRT, *to improve the quality of radiographic practice globally* reflects the long term strategic plan of WHO to improve access, quality and use of medical technologies. We look forward to working with the Western Pacific region to help improve the capacity, sustainability and accessibility of radiological and imaging services.

I thank you for your attention and the opportunity to address this meeting. I pledge the ongoing support of the ISRRT towards the work of the WHO.