



Dr. Outerbridge examines a patient in the Ranthambhore Sevika Hospital in Eastern Rajasthan, India.

# World Spine Care opens its first clinics in the developing world

Imagine a scenario in which a subsistence farmer, the only working member of a household, suffers a traumatic back injury and is unable to continue working. The loss of income is devastating to his family, which includes his own parents, his children and the children of deceased relatives. A lack of access to adequate medical care leads to further complications, which only serve to exacerbate the misery of increased poverty. In developing countries, such injuries are the common consequences of falls and motor vehicle accidents.

In another situation, a family has been devastated by HIV/AIDS, with most of its financial resources consumed in an effort to provide medical care for ailing members. Those able to work sustain the members of the family who cannot. Spinal tuberculosis and other infectious spinal diseases become another threat for those afflicted, as well

as those still able to work. According to WHO/UNAIDS/UNICEF Towards Universal Access, 2008, HIV/AIDS affects 25 per cent of the population of Botswana alone.

## Providing a solution

These situations and countless others like them inspired Dr. Scott Haldeman to create World Spine Care (WSC), a multinational not-for-profit organization charged with “filling the profound gap in the treatment of MSK conditions found in the developing world.” Says Haldeman: “After completing the Neck Pain Task Force in 2008 and co-editing a special issue of *The Spine Journal*, I realized that the evidence suggested the best care for most people with spinal disorders could be offered by chiropractors or physical therapists with advanced training in the diagnosis and manual treatment of spinal disorders who would serve as the primary care clinician

for spinal disorders. The primary care clinician would be required to have the ability to consult with medical specialists such as rheumatologists or neurologists and spine surgeons for serious conditions. In reviewing the literature, I saw how rampant spinal disorders were, and how seriously they were impacting the productivity of some of the least advantaged people in the world.”



Dr. Scott Haldeman  
Founder, WSC

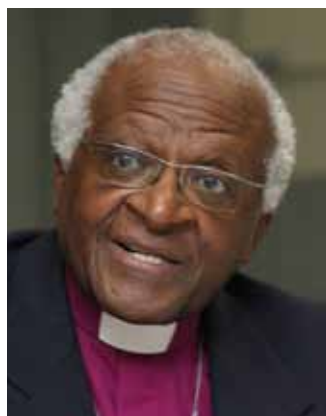
Spinal disorders encompass a wide spectrum of disease, including infection, metabolic disorders, degenerative disease and some cancers as well as the almost universal back and neck pain. The sheer physical burdens experienced by those who perform physical labour that requires high stress on the spine are also unlike those experienced in the

developed world. Together, the indirect and direct cost of spinal disorders approaches three per cent of the GDP in certain countries, which according to the World Health Organization, is equivalent to a permanent severe recession.

### Support for WSC

Haldeman founded WSC in 2008. Since then, the endeavour has attracted powerful supporters, including Archbishop Desmond Tutu, who is a member of WSC’s Advisory Council, and Elon Musk, an entrepreneur/philanthropist well known for co-founding PayPal and founding Tesla Motors and Space X. The list of supporting institutions and societies, which include CMCC and Palmer College, is encouraging.

According to Dr. Geoff Outerbridge (Class of ’01), Clinical Director, WSC, the project has engendered goodwill, thanks to the nature of the project, and to Haldeman’s affability and reputation for professional excellence.



Archbishop Desmond Tutu  
Member of WSC’s Advisory Council

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“What we are hoping comes from Shoshong is a universal model of care for spinal disorders that is applicable to future WSC locations and beyond”



Meeting with the Ministry of Health, Botswana

Haldeman is educated as a chiropractor, researcher, medical doctor and neurologist, and has been a member of CMCC’s Board of Governors since April 2009. His specialized knowledge of the spine has earned him respect among both DCs and MDs and has given him a unique vantage point when it comes to health care. Haldeman is an early champion of interdisciplinary collaboration, and it is the integration of health care professionals that makes the WSC so compelling.

WSC’s committee members include international specialists trained in health care and policy, and as more clinics open, will include partnerships with local health authorities and care centres in areas of consideration. Adds Haldeman: “WSC will provide the opportunities for clinicians, including chiropractors, physical therapists and specialists, to donate their services and obtain unique experience in the management of patients with spinal disorders.”

Speaking to *Primary Contact* in January, Outerbridge reminisced about the day the Botswana Ministry of Health pledged its support of WSC, which allowed the organization to open its first clinic in Shoshong. On that pivotal day, the government offered space for the clinic, space in the nearby hospital, surgical facilities and scholarships for living expenses abroad for their own citizens, who would be trained to run the clinics once established.

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Dr. Outerbridge at the Ranthambhore Sevika Hospital.

### Shoshong as pilot clinic

The town of Shoshong, Botswana, was selected as the site of the first pilot clinic. Two of the reasons it was chosen are that the wide range of spinal conditions occurring in similar communities can be found in Shoshong and there are medical facilities a short distance from the village to facilitate testing of the WSC protocols. As a country, Botswana has a stable economy and a national vision that is consistent with the goals of WSC. Since gaining independence from Britain in 1966, the country has maintained one of the world's highest economic growth rates, a success attributed to sound fiscal discipline and management. Diamond mining accounts for more than one third of the GDP and half of the government's revenues. While the prevalence of HIV/AIDS is the second highest in the world, Botswana's existing medical structure can support the development of the WSC's model of care.

"What we are hoping comes from Shoshong is a universal model of care for spinal disorders that is applicable to future WSC locations and beyond," says Outerbridge, who is planning to relocate to Botswana with his wife and son in September. Outerbridge will develop a clinical model of care appropriate for the rural setting in addition to assessing the type of training and education needed on the ground to make it a successful and sustainable venture. The project also includes a research component that involves a study of MSK disorders presenting in people living with HIV/AIDS. The hope is that the project will yield valuable information that will have an impact on health care in the developing world as well as rural communities everywhere.

### A clinic in India

India is the site of WSC's second spine centre, located within the Ranthambhore Sevika Hospital in Sawai Madhopur, in Eastern Rajasthan. Outerbridge travelled there in March to determine what the clinic will look like and what kind of education will be needed to make it a success when it opens in a few months time. For example, how to educate the care providers and the local community. Outerbridge says they needed to ask practical questions regarding the burden of spinal disorders at the hospital and whether WSC could provide a valuable service there. "The step after that will be recruitment of clinic staff," he says. The Prakratic Society, a non profit organization that runs the hospital will provide food and accommodation for volunteers as well as clinic facilities. "Each clinic will require a volunteer chiropractor until we can move someone in from the local community." ■

To learn more about WSC and how you can get involved, visit their website at [worldspinecare.com](http://worldspinecare.com).



### Committing to Botswana

Geoff Outerbridge's commitment to WSC entails selling the practice he's built over the past 10 years in Old Ottawa South and moving with his wife, Sophie, and son, Liam, to Botswana for the next three to four years. It helps that Botswana is a country he and Sophie have talked about spending time in and that both have a background in adventure racing, a pastime requiring endurance and an adventuresome spirit. "Adventure races are four person team, multisport, multi day wilderness races requiring navigation using map and compass," says Outerbridge.

"The events are mountain biking, foot racing (which can be trekking, trail running and/or bushwhacking) and paddling (canoe, kayak or raft). Each team must complete the race together, non-stop from beginning to finish. The races can last from six hours to 10 days. The course is kept secret until just before the race, at which time the team uses a compass and map to plot their check points and decide how they will complete it."