



Mongolian Emergency Service Hospital Hygiene Project

MeshHp.mn

Prof. Dr. W. Popp
HyKoMed GmbH, Lünen/Dortmund
Germany

Report of the visit to Ulaanbaatar 14 – 21 April, 2018

Participants:

Prof. Dr. Walter Popp, HyKoMed, Dortmund
Dr. Nina Parohl, HyKoMed, Dortmund
Jörg Spors, Fire Brigade Essen
Volker Römer, Fire Brigade Essen

The main purposes of this visit were to get some informations about food production (Walter and Nina) and to start training in Emergency Center (Jörg and Volker) after a 4 year break.

Jörg Spors will make an own report about working at Emergency Service.

Hospitals

In **Central Hospital No 2**, we met director Dr Bayasgalan.

The new building shall be opened on 1 March, 2019, and Prof. Walter shall be invited. CSSD will move there. They will get a stroke unit, an infection unit, 6 operation theatres, neurosurgery, minimal invasive surgery, orthopedics. In the last year, they did 130 operations of hip and knee, without infections. The new hospital will have 100 beds. Also a heart center is in planning because Shastin hospital is in the West and No 2 would be a good location in the East. The old building might become an outpatient area.

Noone heard anything from Health V, no renovation within Health V done until now! During visit, we saw that a lot is renovated. Endoscopy is much bigger now and coloscopes are reprocessed separately.

In CSSD, all 3 autoclaves are working at the moment. There is no renovation in CSSD at the moment because of moving to new building in next months and unclear situation of Health V.

In CSSD, the filter patron for clean water – which is absolutely necessary and should be changed every week! – is completely black and hanging there since one year:



The responsible lady in administration who should order is refusing and has the opinion that this is not necessary. This is completely unacceptable!

In the operating theatre, there were a lot of complaints about reprocessing of endoscopes from Storz and Aesculap in CSSD. Nouzha has to care for that during next visit and we will inform here just now.

Every operation is documented by video from the ceiling and automatically deleted after three days.



Deleting after 3 days seems very short because most wound infections develop later. Anyway, we will take this idea with us to Germany.

On the surgery ward, hand disinfection dispensers were seen at each door on the floor and on each bed! Very good!



There was a meeting with **Dr. Erdenkhuu and others of University Clinics** about the new building which will be visited by us in June, 2018. Prof. Walter will give written advice in next weeks about CSSD and what should be thought about during planning it.

We had a visit to new MeshHp member **Amgalan Maternity Hospital**. They are in a new building since 2015 and have 9,000 births a year. There are 200 beds. In emergency unit, there are 80-110 patients a day, 50 % during night. Nearly 50 % of births are done by sectio.

They have a nice triage system in outpatient/emergency area and we saw operating theatre, delivery rooms, ICU, neonatology, wards, CSSD, washing unit, emergency unit. There is a lot of space and everything is very clean. The rooms contain only what is needed for patients, no private equipment like plants or sofas like in other hospitals very often.

In ward rooms, there are supply units (eg oxygen)!

There are paper towels and fluid soap available at the sinks. The old dispensers for disinfectants on the wall should be replaced with modern ones and single use bottles.

Biggest problem is CSSD: Only manual reprocessing – at least in correct way: cleaning, rinsing, disinfection, rinsing with deionized water, then drying in oven. Only one of three autoclaves is working.

Smaller problem: Plastic bottles of different sorts and sizes are used and refilled with iodine for mucosa disinfection:



There is big risk of biofilm growing and contamination. They should be replaced by single use bottles, eg Skinsept mucosa.

The washing machines in the washing unit are cheap household machines and going to work not any longer. In the future, professional machines should be bought because they are used all around the time.

In one ward, we saw an inhalator:



It should be clarified that this can be dismantled completely, disinfected and dried on all surfaces. Otherwise there might be a risk of biofilm, eg with Pseudomonas.

Food industry and relations

We had a visit to **APU CYY**. They will get a separate report.

We had a visit to **Tumen Shuvii Chicken Farm** which seems to work with comparable technology like in Germany. There are 300,000 chicken producing eggs and meat.



Then we visited a **meat packing facility** owned by a Chinese who is exporting frozen meat to China. The beef is brought in frozen, then defrosted over 24 hours in room climate or in water (!), then cooked, cut in small pieces, packed and frozen again. Rather terrible conditions.



The cooling towers outside might be full of legionella:



We visited the **State Central Veterinary Laboratory**. There were different topics to discuss and we will stay in contact.

By the way:

Different very reliable sources told that most of the herders give **Ivermectin** to their livestock against parasites. It is imported from China and directly sold to the herders by travelling sellers. The herders use it without real knowledge about how to use it. Also Ivermectin is found in meat if this is investigated in lab.

Basically, Ivermectin is allowed against parasites but after it was given, meat should not be eaten for 14 days and it should not be given to lactating cows!

Also it was told that many herders regularly use **antibiotics** and some even give them to the raw milk.

Meetings

During **MeshHp meeting** Amgalan Maternity Hospital (No 3) got a new member of MeshHp.

Presumably in November 2018, a group of directors will come to Germany.

We had a meeting with **Dr. Altantuya and Dr. Bodart from ADB** re an intended new project about Emergency Medicine.

We had a meeting with **Mrs Nyamsuren, president of Mongolian Nurses Association**. We talked about the training which will be held on 14 and 15 of June in UB.

There was a **meeting with Dr. Baatarsukh und Dr. Enkhzaya from UB City Health Department**: Main topic was our small study about hepatitis B and C prevalence in HCWs. At the moment screening is only done by rapid tests because PCR is too expensive.

The Hygiene Symposium in UB in September will be done together with UB CHD and also be included in their anniversary year.

Social life

On Sunday we had **sightseeing** in UB and Jörg compared the development from our first visit to now (all photos are from Zaisan):



On Saturday, we had a nice trip to relatives of Chuchal in the **countryside** where Walter's horse is living. Unfortunately, it was lost in the night because of a storm and they were searching for it and other animals.



We had the chance to see **ballet** Swan Lake in Opera House.

Next steps

In **November a group of Mongolians will come** to Germany.

Maybe, in October already a **group is coming from CHD.**

Next trips to UB will be in June and September (then also Hygiene Symposium with German industry), 2018, and a private trip during Naadam of 9 Germans (including Martin Schmidt, Christian Waydhas and Walter Popp) together with Dr. Purevdash and Dr. Gantumur and others.

Walter Popp, 28 April, 2018