

CLINICAL OBSERVERSHIP AT MASSACHUSETTS GENERAL HOSPITAL: *A Personal Experience*

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There have been significant advancements in the management of gastrointestinal pathologies, especially in developed countries, due primarily to technological leaps. Middle- to low-income countries, such as Jamaica, have not been able to keep pace with these advancements. Jamaica, a Caribbean country with persons predominantly of African descent, has approximately 15 gastroenterologists to care for a population of 2.8 million, as well as patients transferred to Jamaica from nearby Caribbean islands who may also require care from a gastroenterologist.

To obtain training in gastroenterology in first world countries, Jamaican doctors depend on the ability of GI training programs to accommodate candidates, and the ability of Jamaican candidates to financially sustain themselves or obtain scholarships while at these institutions.

Since 2022, the University of the West Indies has embarked on local training of gastroenterologists within the Caribbean, which will provide human resources to fill the gap, and thereafter provide equipment for use by these doctors. However, there will remain a deficiency with locally trained gastroenterologists who may not experience the progress seen by developed countries during their training. It is therefore important that gastroenterology fellows or gastroenterologists in the Caribbean are exposed to the practices outside their own, with an aim of appreciating what is possible for the future.

As the first candidate to be trained in gastroenterology at the University Hospital of the West Indies (UHWI), I was fortunate to have been chosen for an observership by the Massachusetts General Hospital (MGH). I spent six months in total, the first of which was in interventional gastroenterology with my mentor Dr. Akwi Asombang. MGH has an excellent faculty of interventional gastroenterologists who freely allowed me to observe and ask questions. I was able to see innovative procedures performed by interventional gastroenterologists such as Dr. Brenna Casey, Dr. Brian Jacobson, Dr. Jonah Cohen, Dr. Kumar Krishnan, and Dr. Asombang. They performed advanced procedures, inclusive of ERCPs, EUS, and EMR.

I now have an appreciation of the importance of onsite cytopathologists delivering real-time results, impacting decision making. No longer are choledochoscopy and pancreatic necrosectomy just words on a page for me—they became real during my time at MGH, where I witnessed these procedures.

Additionally, I spent three months on the hepatology service, where I had the opportunity to see the impact of interventional radiology in the management of patients with chronic liver disease, aiding not only diagnoses but also treatment with procedures such as splenic artery embolization and TIPS in patients with portal hypertension. I also had the privilege of spending time on the infectious disease (ID) service with MGH scientist Dr. Jodian Pinkney, who allowed me to observe their ID Grand Rounds and participate in the management of patients referred to the service during that time.

The hepatology teams were warm and engaging. While on this rotation, I saw how cases common to both MGH and UHWI were managed in the different resource settings, rich versus poor. This period also allowed me to see for the first time rare cases of diseases, such as erythropoietic protoporphyria (EPP), which I am likely never to see again. I was able to observe the management of patients pre- and post-liver transplant.

Currently in Jamaica, there is no adult liver transplant program for patients who need it, and the alternative of going to a country that provides this life-saving procedure is not financially feasible for most Jamaicans. My knowledge gained while in transplant hepatology will assist my patients in advising them of appropriate options available to aid their decision making. I am deeply appreciative of all the doctors who assisted me during this time, including Dr. Raymond Chung, Dr. Wei Zhang, Dr. Andrea Reid, Dr. Jay Luther, Dr. Nneka Ufere, and Dr. Eric Przybyszewski. Their assistance was key to my understanding of some of the fundamental concepts in hepatology.

My time spent in neurogastrointestinal medicine was eye-opening, where I had the opportunity to see the diagnostic tests of esophageal and anorectal manometry performed. I was taught how to interpret these tracings, for which I am especially indebted to Dr. Jennifer Dimino for her time and patience. The patients I interacted with were open to my presence during their interviews. The neurogastrointestinal team who assisted me during this rotation, inclusive of Dr. Christopher Vélez, Dr. Kyle Staller, Dr. Brad Kuo, and Dr. Barbara Nath, were incredibly supportive.

The gastroenterology fellows during my stay allowed me to have insight into their approach to patients with various acute GI emergencies while we were on call, and I benefited from the various educational opportunities afforded to me such as Grand Rounds, Kelsey Rounds, Pathology Rounds, and IBD forums, which were quite instrumental in my understanding of certain pathologies. I would like to thank the nurses with whom I interacted who were themselves stalwarts in their field. They also freely shared their knowledge with me and assisted during my stay.

Community is important to support goals and encourage dreams, and I was inspired by the wider GI community through exposure to the Association of Black Gastroenterologists and Hepatologists Conference, Digestive Disease Week, and the 2024 American College of Gastroenterology Annual Scientific Meeting held during my stay in the United States.

I am deeply indebted to MGH for embarking on knowledge sharing with the UHWI GI program and to the ACG West Indies Governor, Dr. Mike Mills, who made the initial link between UHWI and MGH. I hope that this is just the beginning of a long and fruitful relationship between the MGH and the UHWI. I am certainly more empowered through this experience to impact the community in which I live. I also acknowledge the sacrifice of my husband, Najah, and sons, Kyle and Zane, in allowing me the time to pursue my dreams.

Thank you also to the ACG for choosing me as one of the International Training Grant recipients, which helped me to experience GI in this widely different space. Lastly, to my mentor, Dr. Asombang, without whom this whole experience would not have been possible.

About



Dr. Kerry-Ann Penn-Brown is a gastroenterologist at University Hospital of the West Indies in Jamaica and was the first graduate of the institution's GI fellowship program.









Clockwise from top left: Dr. Braden Kuo, Dr. Penn-Brown, Dr. Jennifer Dimino; Dr. Brenna Casey, Dr. Penn-Brown, Dr. Jonah Cohen; Dr. Penn-Brown with MGH endoscopy nurses Brian Blau, Laura Shannon, and Jenny Mean; Dr. Penn-Brown at MGH Gastroenterology Department