

Entesar Al Hammadi â?? Director of Academic Affairs & Deputy Medical Director, Al Jalila Childrenâ??s Specialty Hospital; President, Emirates Pediatrics & Neonatal Society

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Dr Entesar Al Hammadi has held leadership positions in paediatric hospitals in the United Arab Emirates (UAE) for the past 23 years. She is currently heading up the Al Jalila Childrenâ??s Hospitalâ??s academic affairs department as well as serving as its deputy medical director. Dr Al Hammadi is also the President of Emirates Pediatrics and Neonatal Society and heads up the child protection unit within the Dubai Academic Health Corporation (DAHC). She discusses the importance of undergraduate and postgraduate medical education and how that will influence the development of the countryâ??s paediatricians, the challenges of a fragmented healthcare system, the access to care issues facing non-UAE nationals, as well as how the UAE government is supporting child protection.

You have vast experience in paediatrics and have spent part of your career abroad. Can you start by giving us an overview of your background?

I am a very proud and lucky UAE national from Dubai. I attended medical school at Jordan University of Science and Technology and graduated in the year 2000. Then I went to Canada and got Canadian and American boards for paediatrics and continued with my fellowship in paediatric nephrology.

In addition to my medical training, my passion has always been for education. After graduating and even before my residency, I became part of a number of awareness-building initiatives I also got involved in teaching both medical students and in residency programmes training paediatricians. I was also involved in career counselling for people in medical school and in pre-med because I lacked that guidance myself, having graduated in the 1990s.

Once I finished medical school, I joined the Ministry of Health. I finished my internship and began in the paediatric department at Alqassimi Hospital in Sharjah, which had a huge and great impact on me. It was a big centre and I learned a lot. After that, I went to Canada to finish my training in paediatrics and in nephrology. During that period, I was privileged to be assigned as chief resident, and then the chief fellow at another centre. I was given the responsibility for administrative areas, so when I came back to the UAE, I practised as a paediatric nephrologist but at the same time I was interested in leadership in the medical and education fields. That led me to look for a Masters in healthcare management and I was accepted at the Royal College of Surgeons in Ireland (RCSI), the Dubai Campus, and I finished in 2016.

I did my master's thesis on a change project at the Dubai hospital which I am proud to say had a big financial and logistic impact on the hospital and community level.

After I came back from Canada in 2010, I worked for two years in the ministry and then I was offered a job at the Dubai Health Authority (DHA) in 2012. I became the deputy to the head of the department at that time and worked on a project to change the structure of paediatrics and the way physicians were organized in order to enhance their expertise and ultimately provide better service for our children. As some had knowledge gaps, so we did a special schedule for them to rotate into sub-specialities. I also changed the structure of the unit and created a step-down unit after ICU, which helps to increase capacity and the turnaround per patient. I proved by numbers that we could use more beds in the ICU and save a lot of money. That was at Dubai Hospital in 2013.

At the same time, they asked me to be the head of the paediatrics and I was approached by the medical education department and became the programme director for the residency programme that trains paediatricians at the DHA. There were two hospitals at the time and I was there for about 10 years from 2013 until last year when we moved to the Al Jalila hospital and the whole paediatric service merged into that.

I was then shortlisted for interviews and chosen as the director of academic affairs

So instead of just looking at paediatric training, I am looking at medical and surgical sub-specialities along with our exciting staff development. Since I started, we have created more sub-specialities and fellowship programmes for paediatricians and we now have 10 fellows, plus 62 paediatric residents. In 2016, I found my other passion as I was nominated by the CEO of Dubai Hospital to be part of the Child Protection team across the DHA. In the beginning, it was a very challenging task because there is a large emotional component to it, and in 2020 I became the lead of that unit.

I still practice my sub-speciality, which is kidney disease in children, because there are also very few of us in the country. I love my work. I love my patients and their families. I deal with them, like my own kids. But at the same time, I enjoy teaching and child protection as well.

What areas and projects are you currently focusing on?

Education and staff development. With respect to education, I am talking about undergraduates because I have been teaching at several universities and medical schools, but I am actually more involved in postgraduate training.

In Jan 2023 I was elected to be the president of the Emirates paediatric and neonatal society and as such my role is more about making sure our pediatricians are at the level they should be at in the Emirates. In the UAE we have over 2,400 paediatricians and myself and the board members we feel we are responsible for their ongoing development. Of course, I do not know all of them by name, but

our role is to make sure they are all on the same page and we are at the level of expertise our ruler, Sheikh Mohamed bin Zayed Al Nahyan, and our government want us to be at.

One of the things we do is talk with each other as a group because a lot of physicians do not know each other and do not know what services can be provided at which centre. We are now more focused on sub-specialities and providing patients with the correct treatment. It used to be that GPs could do everything, but not anymore. We have specialities like internal medicine or surgery and then on top of that, there are sub-specialities. For example, I am a paediatrician, but I am also a nephrologist and then on top of that we have other sub-specialities, like transplants and dialysis. We want people to advocate for that. We need general paediatricians, family physicians, and general practitioners, but at the same time, they have to know what their limitations are and when to refer a patient. We need to help people who have limitations in accessing the system, both patients and physicians. Thus, I would say my three main focus areas are education, career development for physicians, and increasing the level of child protection in the UAE.

If you choose medicine, you need to understand that it is a life journey. It does not end. You need to always teach yourself and learn and seek things to reach your full potential.

The world is wide open nowadays and everyone can connect with anyone. We are collaborating with the GCC countries, the entire Arab world and the MENA region, and globally. When I started in January 2023 I found out who the heads of paediatrics societies were in all of these countries and I connected with them. Then I went to a meeting of the International Paediatric Association in February and connected with a lot of global people.

We are doing a lot of conferences. One of them is with the Royal College in the UK, bringing them here because Dubai is a big hub and the Dubai government is supporting me through Dubai tourism.

Taking a step back and looking at the UAE healthcare ecosystem as a whole, what is the status of paediatrics and specifically nephrology?

Thanks to Sheikh Mohammed Bin Rashid and his great vision, having Al Jalila Children's Hospital built was a huge milestone in paediatrics for the country, and the region because Sheikh Mohammed's vision was to have a top hospital, one of the top 10 in the world for paediatrics. We are working in that direction with the support of our leaders and are lucky to have Sheikh Mohammed and his family who are very supportive of paediatrics. The hospital opened in 2016 and it has evolved since then. It is going in the right direction, but is it not enough as one hospital for the country and the region.

We need to collaborate because hospitals that are among the top 10 are never primary and secondary-level hospitals. They are at the tertiary level. Thus, we need to have a good primary and secondary network, not only in Dubai but in the whole country.

In addition, the healthcare system in the UAE is still fragmented. By that, I mean that we have a lot of sectors that are not talking to each other and that needs to change.

We want to reach a target for our healthcare system and we are stuck in a system where different sectors are trying to prove themselves. Competition is good and healthy but if that happens without thinking about the whole, we will never progress. I personally try to reach out to people, but it is wrong to reach out to the region without reaching out to the country and there are, unfortunately, several layers, the main challenge is fragmentation.

Our leaders know this, but we need to deliver the information to them more clearly. I do not want my patients to suffer when I transfer them to a different sector or a different area within the healthcare system. And the other way around some patients struggle to reach specialized services at the right time and we know well that, in medicine, that has a huge impact on the patient outcomes.

The healthcare system should not be dealt with as a profit-making system. Paediatrics anywhere, and especially in those top 10 centres around the world, is a not profit-making area. It is funded by the government and charity and although it may drain resources, it will provide the outcome of a healthy population. If we think long term, in 10 or 20 years, about what we want for the country, we want a healthy and productive population, who will bring back the profit we put into them as children when they are adults.

What other challenges can you identify within the UAE healthcare system?

The other big challenge is access to the system because of health insurance. We have a big portion of our population that is non-national. Thankfully, locals are insured. All of them can get access to healthcare in any of the system's segments. If it is government funded, they have free access to it wherever they go, which is great.

However, we have a huge number of patients from other countries. During the COVID-19 pandemic, Sheikh Mohamed decided to cover everyone and there was a brilliant response from the government, whose pandemic response was world-leading. I am very proud of what happened in my country during that period and I would like to see that continue within the paediatric service.

We need that to continue because although we do not deny any patients emergency treatment, they often need more than that. Some of them have chronic illnesses even as children.

Parents come here with the hope of a better future in the UAE and if they are unfortunate enough to have a child with a chronic illness we need to support that child and those families.

Families do reach out to other sources for funding, but that itself needs to be centralised. There is a foundation that offers great support, but it is not enough. Many people have donated a lot of money for these unfortunate children, Ultimately, these families might end up going back to their home countries because it is cheaper for them or more convenient, or they have family support, which they do not have here.

We as physicians, and especially as paediatricians, face many families who are calling for help, and they do not know where to get it. We need a central place where those families can get support and remain in the country. We need them.

We have spoken to several companies about rare diseases. A number of them expressed concern over late diagnosis and are looking to offer screening programmes. Can you share any insights?

I know there are companies that try to do screening, but unfortunately, some healthcare professionals are suspicious and wonder why they want to screen their patients and think it is only to find patients for their treatments. I do not think it matters why they are offering it, if they are offering something, why not take advantage of it? It makes sense to take advantage of these opportunities as long as you do it intelligently.

But again, it goes back to the same problem of fragmentation. If there was no fragmentation, we would have a central system that would look at all of these companies and ask them how they want to do screening and make sure they will maintain the confidentiality of patients. Those companies will be requested to share in the funding for the treatment of those patients who were picked up by the screening programs.

With your international background, how would you assess the level of academia and research in the UAE, particularly in your area?

We do have a lot of people with research backgrounds now, people with international experience who come back to the UAE. They understand the need for research and being involved in the larger scientific community. Our hospital itself is involved in many international studies, but we can expand that more.

Some people fear involvement in research because their training did not include it. Thus, what we did 10 years ago was to involve it in our training. My trainees, not just in paediatrics, but in all specialities, are given a course about how to conduct a study, collect data, read statistics, and submit their studies for publication.

We have a central committee to look at that area and we also have, here in the hospital here and in other hospitals, a research lead that encourages the staff to do research and to look internationally. The Al Jalila Foundation also has a research fund. It is competitive, so those who are interested have to apply for it. We discourage people from getting research money from individual pharma companies because we feel they will be biased.

Looking at the future and at advancing paediatrics in the UAE, is there any final message you would like to share with PharmaBoardroom's international audience?

We need a less fragmented healthcare system, even if that means having a central authority to oversee everything. Maybe we cannot avoid being fragmented because it is not easy to fix, but having a higher central authority to look at everything would make things much easier; either in identifying the gaps or mapping the future.

We are not a huge country, so if we had a big umbrella to oversee healthcare, we would do much better.

As we say in Arabic, at the heart of union is power. Take the example of our country, which is the union of seven separate emirates. We can do the same with the healthcare system. We can be the healthcare hub for the GCC and MENA region, but we cannot do that if we do not join forces.

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