



The PAACS Bulletin

Monthly Newsletter • Issue 264 • July 2026



MISSION

PAACS' mission is to glorify God by training and discipling African surgeons and related specialists to become Christ-like leaders and servants providing excellent and compassionate care to those most in need.

VISION

PAACS envisions a growing number of African surgeons and related specialists living out the Gospel and ministering to the sick.

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FROM THE DESK OF THE CEO

Susan Koshy, JD, MPH
Chief Executive Officer

Dear PAACS Family,

I want to begin this new fiscal year (July 1, 2026 - June 30, 2027) by saying thank you for your steadfast partnership in this ministry. Every resident and fellow trained, every patient served, and every life touched with the love of Christ is possible because of friends like you.

As this new season begins, I have been reflecting on 2 Samuel 5:23, where David once again inquired of the Lord. Although God had helped him succeed in the past, David did not assume he knew what to do next. Instead, he sought the Lord's guidance before taking another step. That is our desire at PAACS as well. Even as we thank God for His faithfulness and all He has accomplished, we want to continue looking to the Lord for wisdom, following His leading, and remaining obedient to the calling He has given us. Every new opportunity, every challenge, and every decision is another invitation to trust Him more deeply and rely on His direction rather than our own understanding.

With that heart, we began this fiscal year with a day of fasting and prayer on July 13th. Over 60 members of the PAACS family from around the world joined one of two Zoom prayer gatherings to seek God's wisdom, provision, and blessing for the year ahead. It was a meaningful time of worship, prayer, and unity as we committed this new season of ministry to the Lord. If you joined us, thank you. Your prayers are one of the greatest gifts you give to PAACS. It is a blessing to know that we do not serve alone but alongside a community that looks to the Lord with us.

Our time together was also a reminder that as we walk in the Lord's leading, He is always at work through this ministry. This month, residents and fellows who required remediation following their June examinations completed their remediation exams. Many of our trainees also recently finished their spiritual examinations, another meaningful step in their preparation for faithful service. We also launched the 2026 PAACS Alumni Survey and anticipate learning how God is working through our graduates across Africa. Their responses encourage us and help us better serve future residents and fellows.

On July 21st, PAACS leadership gathered for a Dream Session to prayerfully listen for God's direction and consider what He might accomplish through PAACS over the next 5, 10, 20, and 30 years. As we looked to Him for wisdom, we considered how He might expand our impact through surgical training, discipleship, and Gospel ministry across Africa's rural and underserved communities so that even more lives are transformed for His glory.

We praise God for His unfailing faithfulness. We are grateful that He has invited each of us to take part in His work at PAACS. With thankful hearts, we look ahead with great anticipation to all He will accomplish in the months to come as together we inquire of the Lord and follow His leading.

Blessings,

Susan A. Koshy, JD, MPH
Chief Executive Officer



PAACS AND COSECSA VISIT BAPTIST HOSPITAL OF MUTENGENE, CAMEROON

Keir Thelander, MD, FACS, FWACS, FCS (ECSA)
Executive Vice President

Dr. Henry Ndasi has been instrumental in the growth of Baptist Hospital of Mutengene (BHM) since 2012, when he completed his orthopaedic fellowship at Kijabe Hospital, Kenya, as an addition to his General Surgery residency at the PAACS collaborating facility, Bansa Baptist Hospital, Cameroon. At his invitation, a team from COSECSA represented by Dr. Seke KAZUMA, and PAACS EVP, Dr. Keir Thelander joined with the PAACS representatives: Dr. Chukwuemeka Nwegbu (Mbingo Baptist Hospital GS program director), Dr. Nathaniel Evans (PAACS Orthopaedic Council), Dr. Ryan Horazdovsky (PAACS Tenwek Orthopaedic Faculty member).

During two packed days, the team assessed BHM's General Surgery and Orthopaedic capacity to train, while meeting with the University of Buea officials and the medical licensing body of Cameroon leadership. Day 1 included extensive meetings hearing the rich history and growth of BHM, into a now very active primarily orthopaedic facility performing over 1,300 orthopaedic cases a year and seeing over 50,000 outpatients a year. We also met with the leadership of the University of Buea who are very supportive of the collaboration, playing an instrumental role in receiving accreditation from the West African College of Surgeons for the collaboration between BHM and the University.

The next day the team met with the Cameroonian Baptist Convention Health Services Director, Mr. Ngum, and visited the impressive activities of the Cameroonian Baptist Convention (CBC) which, among many other engagements, strengthens the health systems in Cameroon through their supplying medications, IV fluids, and equipment to not only their 16 hospital facilities across Cameroon, but also in times of need, supplying the governmental health facilities.

The team's final meetings occurred in Douala with the leadership of the Medical Council of Cameroon. The reception included an intense, productive meeting discussing possible processes for recognition of future COSECSA graduates within the country. The President of the council invited us to his home for a buffet dinner, further discussions, and finally a bit of World Cup cheering.

The PAACS consideration of this young program encompasses the initial MCS years of COSECSA training, primarily General Surgery as well as the subsequent orthopaedic formation, raising the question of specialty training without a foundation of a full General Surgery Residency, which will be discussed in future PAACS meetings. We thank the CBC for their hospitality and congratulate BHM and the CBC for their immense work and role in the healthcare delivery to the Cameroonian people.





BONGOLO HOSPITAL: GOD'S ANSWER TO THE DESPERATE

**David Thompson, MD, FACS, FWACS
PAACS Founder**

Becki and I had always assumed that God would send us back to Vietnam or Cambodia to continue the ministries our parents had started to unreached tribes. But Communist forces were winning the wars in both countries, and Americans like us were no longer welcome. Because of that, our mission asked if we would consider serving in either Gabon or in the Democratic Republic of Congo. We were shaken by their question! Africa? We had heard of the Congo, but where in the world was Gabon? After months of soul-searching and prayer, God said to both of us separately and on the same day, "I want you to go to Gabon!"

When we looked at a map of Africa, Gabon turned out to be on the west coast opposite Kenya. It appeared to be covered with dense rain forests. Our mission's plan was for us to enlarge an existing dispensary that missionary nurses had built and staffed for decades in a mysterious place called "Bongolo." We would later learn that in 1933, Bongolo was where the gospel was first preached south of Gabon's Ogoué River. Over the four decades that followed, Alliance missionaries planted the first of twenty or thirty small churches in the surrounding villages, started a Bible school to train pastors, and by the time we arrived had started their first church plant in Libreville, Gabon's largest city located 350 miles to the north. Nevertheless, in 1977 the majority of the population in south Gabon still worshipped the demon gods of Bwiti and Mwiri.

The church planting work in south Gabon by the early missionary pioneers was a great victory for the Kingdom of God, but a dark reality still loomed over the region: deaths from malaria, trauma, snake bites, sleeping sickness, hernias, and childbirth were decimating the region's population. Medical services were mostly absent for the 150,000 to 200,000 people scattered in small towns and villages.

When we first heard our mission's plan to build a hospital in the jungles of the south, we thought, "Why build a medical facility so far from Gabon's population centers, and in the middle of nowhere?" But after carrying out a medical survey of 100 homes in the area, our missionary team was shocked to learn that four out of five children were dying before the age of 5 from measles, malaria, polio, whooping cough, and diarrhea. In addition, roughly one in 30 women who delivered their babies in their homes died in childbirth. Added to that, almost every household had a family member who suffered from a hernia, and strangulated hernias were the major cause of death in men.

Before sending us to Gabon, our mission sent us to France to learn French for a year, then to Antwerp, Belgium for six months where we studied tropical medicine, including the treatment of poisonous snake bites. During our time in Europe our supporters back in the U.S. raised \$15,000 so we could purchase a new Land Rover in England. We finally arrived in Libreville, Gabon's capital city, in May of 1977. Our Field Director met us and accompanied us as we drove 350 miles south, mostly on dirt roads.

BONGOLO HOSPITAL: GOD'S ANSWER TO THE DESPERATE (CONT'D)

Our final surprise came when the road ended at a 60-foot wide river, where a hand-pulled ferry was waiting to take us across to the mission! On the mission side we marveled at the six mission houses that the early missionaries had built in the 1940's and 50's out of homemade, burned bricks and cement made from limestone. Missionary nurses who preceded us had built a small dispensary, and the Christians had built a large and beautiful church. In the valley below the church, a village of 500 souls was called "Dakar." Becki and I couldn't help muttering to each other, "What have we gotten ourselves into?" We had come—a surgeon and a registered nurse—knowing none of this in advance. The question we asked that first week was, "Where do we begin, Lord?" To our surprise, most of the population at that time didn't speak French, so we would have to spend the next six months learning the local tribal language!

Oswald Chambers wisely said, "God's order has to work up to a crisis in our lives because we will not heed the gentler way. He brings us to the place where He asks us to be our utmost for Him, and we begin to debate; then He produces a providential crisis where we have to decide--for or against, and from that point, the 'Great Divide' begins."

Fortunately, God never left us alone and helped us across His "great divide." He gave us a dedicated team of capable nurses to work with, both American and African, and wise and tested leaders.

A year later, Becki and the four other missionary nurses the mission sent opened a nursing school that would eventually train and disciple hundreds of nurses, midwives, lab techs, and later, dentists, nurse anesthetists, and finally, PAACS surgeons!

Three years after Becki and I arrived in Bongolo, God provided for the construction of a modest surgery/maternity building, making it possible to perform C-sections and many other operations. Initially most of our surgical equipment came from a donated M.A.S.H. unit from the Korean War, but in later years Samaritan's Purse and other organizations provided us with instruments, modern autoclaves, and anesthesia machines.

You may be wondering why I'm telling you all these details about our lives and my training. The point I want to make is that only God knew the beginning from the end. Not only did He have a plan for us, but he guided us as we followed and obeyed. Over nearly four decades, the original dispensary was expanded into a 150-bed hospital, and eventually the first PAACS residency program. When we put our faith and trust in God and obey Him--even when it doesn't make perfect sense to us, God will accomplish the plans He made for us before we were even born! That is exactly what Ephesians 2:10 tells us: "For we are God's masterpiece. He has created us anew in Christ Jesus, so we can do the good things he planned for us long ago." That's why God alone deserves the glory for what He allows us to do!

(A more complete account of all that God has done is available in my book, "The Curse of Bongolo Falls," available online at trinityalpsmedia.com).



FIRST FLS CERTIFICATION AT SODDO CHRISTIAN HOSPITAL

Gezahegn Tilahun, MD, FCS (ECSA), FACS
Assistant Program Director, General Surgery
Soddo Christian Hospital, Ethiopia

We are delighted to celebrate an important milestone in our surgical training program.

Dr. Yohannes Debebe has become the first PAACS General Surgery graduate to earn the Fundamentals of Laparoscopic Surgery (FLS) certification at Soddo Christian Hospital, following the hospital's designation as a SAGES-accredited FLS Testing Center. This internationally recognized certification demonstrates proficiency in both the cognitive knowledge and technical skills essential for safe laparoscopic surgery.

This achievement is part of the lasting legacy of Dr. Tim Love, whose vision helped establish an FLS Testing Center within our program. Today, our center is one of only two accredited FLS centers in Ethiopia, creating opportunities for surgeons to receive world-class training and certification without leaving the country.

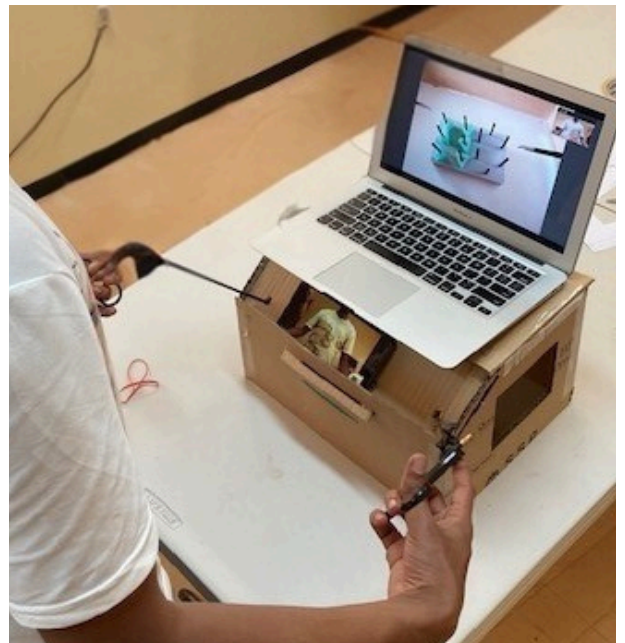
All of our attending surgeons and most of our residents have completed the FLS curriculum and simulator training. In recent weeks, three candidates successfully completed both the written examination and the hands-on skills assessment. Others are awaiting their scheduled examinations.

Last week, Dr. Yohannes received official confirmation of his successful completion of the FLS Program. As the first PAACS General Surgery graduate to earn FLS certification at the Soddo Christian Hospital Testing Center, his accomplishment marks an important milestone for our program and reflects the continued growth of surgical education in Ethiopia.

We thank God for His faithfulness, for the investment of mentors like Dr. Tim Love, and for the continued growth of surgical education in Ethiopia. We also thank Netsanet for procuring the examination. It would be impossible to have the test without an FLS-certified proctor. We look forward to celebrating many more FLS-certified surgeons from our program in the years ahead.

Congratulations, Dr. Yohannes Debebe! May God continue to use your knowledge and skills to bring healing and hope to many patients.

Our door is open to any surgeon or resident who wants to take the examination.





AFRICA BIBLE COLLEGES ACCREDITS PAACS SPIRITUAL CURRICULUM

Ed Searce, DMin, ThM
Spiritual Dean



Institution
**Pan-African Academy of
Christian Surgeons**

Exam #1 (July 2026)
Pink
Book Section One
of Questions: 36
Total Exam Points:
100

Attention:

Between July 1st - 14th a new first has taken place within PAACS. As you may know we have a two-rail approach in the training of PAACS residents. One is the surgical and related specialties and the other is spiritual formation. As residents are involved in training of surgical skills they also participate in spiritual development. Spiritual development is necessary as each of us are on a journey of becoming fully devoted followers of Christ. Growth is achieved via a number of ways. One is the study of the PAACS Spiritual Curriculum. It is comprised of five spiritual curriculum books designed for growth in Bible knowledge and practical application.

In the past year Africa Bible Colleges (Malawi) has accredited our curriculum and will issue a degree in spiritual formation for PAACS residents who satisfy the study objectives. During that period, 125 PAACS residents took the first ever accredited spiritual exam.

Praise God for a great launch as we seek to glorify God in all we do!



RENEWED TO SERVE: MALAMULO SPIRITUAL RETREAT

Pastor Robert Yanduya
Associate Spiritual Dean

There is a certain kind of exhaustion that comes from pouring yourself out for others. Residents, faculty, and theatre staff at Malamulo College of Health Sciences, Malawi know this very well. Regularly, they carry the weight of suffering, sometimes loss, and many times the painful limits of scarce resources. Grief is often pushed aside because the next patient is waiting in the queue. When these burdens are left unattended, they can harden into discouragement, frustration, or even anger, though their roots lie deeper in sorrow and unanswered questions.

Into this reality came Rev. Connex Ijalasi's call to integrity. Samuel could stand before Israel and ask, "Whose ox have I taken? Whom have I oppressed?" (1 Sam 12:3), because his life matched his words. Rev. Connex emphasized that integrity is more than honesty; it is wholeness before God, a heart willing to pray, "Search me, O God, and know my heart" (Ps 139:23). Yet hearts burdened by unprocessed grief often struggle to say such a prayer.

This is why spiritual retreats are not a luxury for the PAACS family; they are a necessity. Joseph's integrity in Egypt flowed from a heart anchored in God (Gen 39:9). Daniel's blameless life grew out of steadfast communion with the Lord (Dan 6:10). This same grace sustains us today. Only the "Father of mercies and God of all comfort" (2 Cor 1:3–4) can help us bear the suffering of others without being crushed by it ourselves.

Those who care for the sick need their own upper-room moments, times to be still, times to worship, times to weep, and times to remember whose they are. That is exactly what we witnessed at the Malamulo Spiritual Retreat: God's people being gently re-anchored in the presence of the Master Jesus. For the work of healing bodies and discipling hearts is sustained not by our strength, but by the God who draws near to the brokenhearted (Ps 34:18).





PAACS REPRESENTED AT THE 18TH ICMDA WORLD CONGRESS IN SOUTH KOREA

Joseph Mkandawire, MD
Graduate, General Surgery
Blessing Hospital, Malawi

The International Christian Medical and Dental Association (ICMDA) World Congress is a global gathering of Christian medical and dental professionals held every four years since 1963. This year, the congress was held on Jeju Island in South Korea. It brought together more than 1,300 delegates from 130 countries under the theme, “Building God's Kingdom Among the Broken,” based on Isaiah 58:12. The event included three days of preconference streams followed by a three-day main conference. Each day began with worship and Bible teaching before transitioning to educational plenary sessions on missions, bioethics, artificial intelligence, and evangelism.

Among the many brothers and sisters gathered in Christ were four PAACS members. Dr. Joseph Mkandawire (GS Malamulo, 2025) attended the conference on behalf of Blessings Hospital in Lilongwe, Malawi, while Dr. Marco Faniriko represented HVMM, Madagascar. Dr. Wanda Lam, Program Director at Nkhoma Mission Hospital, Malawi, presented on the impact of PAACS across Africa. She highlighted the increasing need for surgeons and related specialists across the continent, the growing demand for PAACS training, the high retention of PAACS graduates within their home countries and in rural Africa, and the positive impact of PAACS graduates on patient outcomes. Dr. Louisa Nneka Nwachuku (GS Galmi, 2025) led a preconference session on health, healing, and missions and also presented a poster titled, “Patterns and Outcomes of Anorectal Malformations among Children Presenting at SIM Galmi Hospital, Niger.”

Reflecting on the conference, Dr. Louisa said, “Coming from a country affected by conflict and insecurity, this year's theme, Building God's Kingdom Among the Broken, spoke deeply to my heart. Hearing healthcare professionals from around the world reminded me that we are not alone in the struggles we face. Through the Bible teachings and breakout sessions, God encouraged and renewed me. I returned home with a lighter heart, a renewed sense of purpose, and a deeper conviction to serve those whose lives have been broken by war, suffering, and hardship through compassionate surgical care, discipleship, and the love of Christ.”



The conference proved to be a wonderful season to rejuvenate our spiritual lives, network, and learn from the diverse practices from Christian medical professionals representing almost every nation on earth. Despite gathering so far from our homes among people who were initially strangers, our shared faith instantly united us. The fellowship provided a deep, spiritual bond of brotherhood and sisterhood that truly surpassed biological ties—a vivid, modern fulfillment of Jesus' promise in Mark 10:29-30.



AM I LIVING MY PAACS DREAM? REFLECTIONS FROM PAACS GENERAL SURGERY IN ETHIOPIA

Gezahegn Tilahun, MD, FCS (ECSA), FACS
Assistant Program Director, General Surgery
Soddo Christian Hospital, Ethiopia

It has always been my dream to see sick patients become healthy again—to give them another chance to smile, to hope, and to live.

When I joined the PAACS residency program, healthcare resources in Ethiopia were limited. In many communities, even having a clinical nurse or a general practitioner was a precious blessing. At one point, the government even delayed issuing licenses and degrees to new general practitioners in an effort to reduce migration abroad. Having a trained surgeon, let alone multiple surgical specialists, was considered a luxury.

My dream was to reach patients suffering from conditions such as appendicitis, obstructed labor, open fractures, and countless other surgical emergencies—people who desperately needed not only an operation but also compassion, prayer, and hope.

As a general practitioner serving in a rural hospital, I had the privilege of quietly praying with my patients. Those moments remain among the happiest and most meaningful memories of my medical journey.

Since graduating from the PAACS program, I believe I have been privileged to live part of that dream.

Just last week, we received a young man referred from another private hospital one week after undergoing a Graham patch repair for a perforated duodenal ulcer. He arrived in septic shock. It was heartbreaking to watch him and his parents and younger sibling desperately pleading for help. By God's grace, today he is on postoperative day five, walking, eating, and recovering well.

That same week, we cared for another patient with a double-twisted sigmoid volvulus. After a sigmoid colectomy, he was discharged home on postoperative day three. We planned to refer an elderly woman to Addis for an ERCP because she has choledocholithiasis. She could not afford the procedure. You should have seen her smile as we prayed together before she was discharged after an open common bile duct (CBD) exploration.

We also treated patients with necrotizing fasciitis. One is recovering well. Sadly, another patient died because of delayed presentation and the lack of available blood for transfusion. We also cared for many trauma and elective surgery patients. These are just a few of the many patients we care for each week.

Our surgical residents learned invaluable lessons from these patients. They saw firsthand that a patient's condition can change rapidly and that timely intervention can make the difference between life and death.

AM I LIVING MY PAACS DREAM? REFLECTIONS FROM PAACS GENERAL SURGERY IN ETHIOPIA (CONT'D)

Sometimes the plan made during morning rounds had to change completely as the patient's condition evolved. In particular, these cases strengthened their clinical decision-making skills.

We strive to care for every patient with the same compassion we would show our own family members. Whenever possible, we pray with them before surgery, during difficult moments, and before they return home.

Am I living my PAACS dream?

Yes. Yet I am still not satisfied.

I always feel I could do more—serve more, pray more, teach more, and love more.

Our work is not without challenges. We face obstacles from many directions: limited resources, delayed presentations, shortages of blood, and many other daily issues and struggles. Yet we continue to press on, strengthened by Christ and serving for His glory.

Please pray for me, my family, our residents, and our team, that we may faithfully continue living the dream that PAACS has helped make possible—bringing healing, hope, and the love of Christ to those who need it most.

Gezahegn Tilahun

"If anything is good in me, it is because of Him."



GOOD NEWS TO SHARE



Newest Addition to the PAACS Family at Mbingo

Shuongminui was born on July 20th, 2026, to Roger Tankombo and his wife. Roger is a second-year PAACS Head and Neck Surgery fellow and a 2024 PAACS General Surgery graduate.

PAACS AMERICAN COLLEGE OF SURGEONS RECEPTION – REGISTER TODAY



Register today to attend the PAACS Reception at the American College of Surgeons (ACS) Clinical Congress on Monday, September 28, 2026.

The ACS Clinical Congress will be held in Washington, DC, and we invite you to join us for an evening of fellowship from 5:45 PM to 7:00 PM.

The reception will be held in the MINT Room on Meeting Level 4 (M4) at the Marriott Marquis Washington, DC. When you register, please be sure to include any guests who will be attending with you.

Click here to RSVP: <https://paacs.churchcenter.com/people/forms/1271839>

NEW PAACS STORE
[Click here to easily shop our store](#)
[for PAACS-branded items.](#)

[Print Your Cause](#) – featuring 30th anniversary apparel and scrubs.

[Queensboro](#) – offering a wide range of apparel and accessories across various price points.

[Lands' End](#) - providing premium business-casual styles and accessories.

PRAYER & PRAISE

- Pray for God's favor over all PAACS training programs, that they will glorify God and be used to impact Africa for His Kingdom.
- Please pray that the upcoming spiritual retreats at HOH/HBB and Nkhoma will refresh and encourage residents, faculty, and staff, deepen their faith, and strengthen their commitment to serving Christ through surgical ministry.

Each month, we pray for residents by name. Please join us this month by covering these residents in prayer:

- Andrew Adel
- Armah Toko Wilson
- Benjamin Unamosi
- Désiré Razafindrasara
- Drafor Drafor
- Junior Arung
- Lahatra Andriamahaly
- Lalaso Randrianjohany
- Mba Habre Tamukum
- Michelle Mbody
- Ngankwe Franck Vincent
- Patiente Umuganwa
- Radoniaina Dinamalala Olivier
- Shady Onsi Anis
- Tefinirina Aina Mirana Razafimanantsoa
- Toavina Rabenasolo
- Top Maad
- Valimbavaka Santatriniaina



ARTICLES ON SURGERY, OB/GYN, AND ANESTHESIA

Compiled by Margaret Tarpley

- Systematic Review of the Lancet Commission on Global Surgery Indicators with Quality Assessment of Modelled Estimates
- Mapping Plastic Reconstructive Surgical Needs and Access Barriers in Sub-Saharan Africa: A Scoping Review
- Treatment of Postoperative Hypertension for Inpatient Surgical Patients
- Raised to Run Faster, Not to Heal Moral Injury and the Surgeon's Capacity to Lead
- Football-Specific On-Pitch Concussion Assessment Protocol
- Pressure Points: A Pilot Study Using the NASA-TLX Tool to Measure the Intensity of Acute Care Surgery Work
- Traditional Bone Setter Practices and the Interaction with Biomedical Care in the Treatment of Hip Fractures in The Gambia: A Qualitative Study
- Epidemiological Aspects and Functional Outcomes of Femoral Neck Fractures Managed with Triple-Screw Fixation in Abidjan: A 10-Year Retrospective Cross-Sectional Study Following STROBE Guidelines
- When Scarcity Reshapes Surgery: Digestive Disease in Times of Economic Crisis
- Single-Use vs Reusable Catheters for Patients with Urinary Retention
- A Clearer Path for Resurfacing the Patella During Total Knee Replacement
- Surgical Site Infections After Laparotomy in a Tertiary Referral Hospital in Kenya: Incidence and Risk Factors

Read more articles compiled by Margaret Tarpley by [clicking here!](#)

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GIVE (Other)

CONNECT

