

# Ethiopian Radiology

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**E**arlier this year I was fortunate enough to be invited to Addis Ababa (which means "New Flower", founded 1887) in Ethiopia for a week. Not only was this a great opportunity to learn more about this country's fascinating historical and religious background, especially its connections to the Middle East, but it also gave me the chance to see for myself the state of Radiology in another African country.

Ethiopia (formerly Abyssinia) has had a prominent role throughout African and world history, including delivering early mankind in the form of "Lucy" (*Australopithecus afarensis* - 2 million years old) in 1974, and giving rise to that other vital ingredient of any Radiology practice - coffee! Strongly reminiscent of the midlands of Natal with green rolling hills, their use of the unconventional Julian calendar (12 months of 30 days and the balance of 5 or 6 days in a 13th month) gives rise to their advertising slogan - "The only country with thirteen months of sunshine".

There are three medical schools in the country, including in Addis Ababa. These schools are modelled on the American system, with associate professors appointed early in their careers. Concerning Radiology, at the time of my visit there were no functioning CT scanners, MRI scanners, angiography tables or nuclear medicine cameras in this country of 60 million people. There had been a single refurbished CT machine in one of the state hospitals in 1997, but it had since broken down and could not easily be repaired. Much the same applied to other equipment, with a number of obsolete screening tables and mobile units in evidence. Chemicals for automatic processors are not available, and wet film processing is the rule. I was able to speak with colleagues from other African states, and heard that their diagnostic imaging services face similar problems. The major Radiological centres in Africa at present are perceived to be Egypt, South Africa, Kenya, Nigeria and Zimbabwe.

On the positive side, plans are afoot to develop a major new private diagnostic imaging unit in Addis Ababa, with significant South African involvement. From the state hospital perspective, sponsors appear to play an important role in equipment provision, and Ethiopia as a prominent African country has the capacity to draw their support. Despite the hardships, the overall mood and the quality of Radiology in my host department (Black Lion Hospital, Department of Radiology, University of Addis Ababa) were very good. I left Ethiopia feeling humbled, but also grateful for our relative fortune, even in state hospitals.