



Prof Zach Koto

is the new President
of Association of Surgeons
of South Africa
(ASSA)

Prof Zach Koto, Head of Surgery at Sefako Makgatho Health Sciences University, was recently elected as the President of the Association of Surgeons of South Africa (ASSA). He wants to see ASSA grow to a point where it also mentors young surgeons apart from looking at the affairs of surgeons in the country. Under his capable leadership, he hopes to see the association address many pressing challenges that include amongst others training, inadequate funding for training posts in public hospitals, equipment issues and the disease burden that threaten to overrun surgical programmes across various training platforms. Prof Koto is an ordinary individual who likes to work hard, challenge himself continuously to be a better version of himself. Focus on SMU reporter caught up with him to get insight into his role as the president of the association.

His thoughts on taking up the role of President.

“I have previously served in the executive committee as a representative from academic centres as head of the department, I served in various capacities for many years in the association and I think for colleagues to have confidence in me and elect me as president is indeed an honour and privilege. It is an association that organises surgeons across the width and breadth of South Africa and does many things in terms of surgical care and training. I am looking forward to working with a very able executive committee under the chairmanship of Prof Paul Goldberg, Secretary Dr Claire Warden, and treasurer, Dr Mbulelo Khenene. I'm looking forward to working and serving as the president of the association,” said Prof Koto.

What is the criteria used to elect the President of ASSA?

One to be appointed as the president of the association you must be one of the seniors and have an established track record as a leader in the field of surgery. You must be experienced and have the potential to steer the association in the right direction. Currently, the association has many challenges because we just emerged from the COVID-19 pandemic and need to reorganise the surgical fraternity and move forward. This came at the right time because of the kind of energy I have to steer the association in the right direction.

What is your leadership style?

There are a lot of challenges in what I do, and I think it needs a lot of dedication. I derive a lot of pleasure and a lot of happiness in involving myself in the affairs of surgery because I love surgery and everything that has to do with it makes me happy. I look at surgery from where we come from as a country in terms of the democratic dispensation and there has been a lot of transformation, so I see myself as an agent of transformation. We have come a long way as surgeons and indeed the association has done a lot of good work. I believe that my little contribution will also help us leave a legacy that will help encourage up-and-coming young surgeons to be involved in matters that affect them directly. Hopefully, I will leave a legacy of “being a service to others” for those that are coming after us. Leadership is a team sport- you can't say you know it all, I'm a team player, I believe in working with others, learning from others and interacting with others, asking for advice, and working with people who are more experienced than me because I have learned a lot from them and I continue to learn. So my leadership style is “collective leadership” there are times when I have to make decisions but I try as hard as possible to involve others in decision-making.

What is your vision for ASSA?

I want to see ASSA grow and help mentor young surgeons. The society is involved in the bread and butter issues that affect surgeons ranging from the billing challenges in the private sector

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to scarcity of training post in the public sector. There are many pressing challenges which include amongst others training, inadequate funding for training posts, equipment issues and the diseases burden that threaten to overrun surgical programmes across various universities. There is a challenge for service load on the one hand and the need to train surgeons that are fit for purpose on the other hand, so those kind of balancing dynamics are very important. With the kind of experience, I have, I believe that I will be able to work with the ASSA executive committee to carry out that mandate.

How does SMU fit in holistically within ASSA?

I think SMU is one of the very important institutions in the country that trains the healthcare workforce. It is a relatively new university, and there is a lot of dynamism and enthusiasm for being a new university. I think it also assists us as we begin to reconfigure and rebrand SMU as a go-to health science University for both undergraduate and postgraduate training. Without any fear of contradiction and without sounding apologetic, we need to position this university on both a national and international platform to be competitive. It fits in well with the strategy of the association as well because I am very much involved in directing the Department of Surgery at SMU to become competitive nationally and internationally. So that there is synergism in working at SMU and being involved in the affairs of ASSA. These portfolios will complement each other and assist in moving forward with speed.

Prof, you are the president of two different associations, what is the difference between the two associations?

I am the current president of the College of Surgeons, which is one of the 29 constituent colleges of the College of Medicine of South Africa (CMSA). Others include amongst others, the college of neurology, college of medicine, college of psychiatric etc. One of the mandates of the CMSA is to organise exit examinations in collaboration with the universities, and also to help uphold quality training, right now the college of surgery is heavily involved with other colleges with the establishment of work based assessment. There is recognition that when you train surgeons you need to train them holistically, firstly they must have bio-medical knowledge which they get from theoretical content and technical skills of how to carry out a surgical operation and other competencies such as communication, be able to make clinical judgement, interpersonal skills to be able to handle complex problems in their working environment. That whole package makes what we call a surgeon. We only assess one part which is a theory which includes writing exams and a bit of oral, we don't assess the other competencies, for instance (can our students operate safely, communicate professionally) those are "entrusted professional values". The whole world is now looking at those values (work-based assessment). That is what the CMSA together with the committee of medical deans are currently busy with.

Where do you want to see SMU?

I want to see SMU grow significantly in terms of its stature as a health sciences university in the country. I want to see it climb up the rankings both nationally and internationally. Now, we have moved three places on the latest rankings, at least we should move further, maybe five more places but for that to happen we need to collectively focus and be visible. This is not a pipe dream,



it is achievable. As an academic in SMU and also being the president of ASSA, president of the College of surgeons and senior vice president of the CMSA I believe one will also contribute in making our university visible. Everyone in the university has a role to play in raising the university ranking, e.g. the students positive posting of the university on social media contributes positively to its rankings, protecting its reputation at all cost will enhance its ranking.

This year's graduations were very special to you, can you take us through that?

The graduations were indeed very special to me because my son graduated and it was something I was very proud of. What made me particularly happy is the fact that his average since he joined SMU to final years was well over 75% which in my view is passing the degree cum laude even though the University came with some bizarre ruling that because he was exempted on certain subjects, he did not qualify for cum laude – what a fuss! It was so sad to deny the young man his well-deserved cum laude. I hope that the university will rectify this travesty of justice and officially award his deserved Cum Laude.

You are well known for coming up with groundbreaking surgeries, what can we look forward to?

As you see me in my scrubs today, I am from theatre just now and we have just successfully completed a procedure called retro-rectal repair of an incisional hernias using a technology called – Fasciotens – this is technology developed in Germany by Dr Greenen and the first case in South Africa was done by Dr Greene himself in Somerset Hospital in Cape Town. We did the second case in South Africa here at Dr George Mukhari academic hospital. We were guided by the team in Germany as we did this procedure and it was hugely successful and the patient was discharged home.