Editorial: Neurosurgery in Indonesia

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Received: March 4, 2015; Accepted: March 16, 2015

Keywords: Neurosurgery in Indonesia; History of Neurosurgery in Indonesia

Neurosurgical service in Indonesia was first established in 1948 at Princess Margriet Hospital in Jakarta (previously known as Batavia) by the Dutch Red Cross during the war for Indonesian independence. It was the first hospital in Indonesia which was equipped with diagnostic, treatment, and rehabilitation facilities for neurosurgical cases. Initially the main purpose was to treat Dutch soldiers with central nervous system injuries. To fill the required neurosurgeon position, the Dutch Red Cross assigned different Dutch neurosurgeons every 6 months. They were Dr. P.R.M.J. Hanraets and Dr. A.C. de Vet from Wassenaar, Dr. Wiersma from Rotterdam, Prof. Dr. Noordenbos from Amsterdam, Dr. M.P.A.M. de Groot from Tilburg, and Prof. Dr. C.H. Lenshoek from Amsterdam, who later became Professor in Groningen. The last of these assigned neurosurgeons was Dr. P. Albert, a Spanish neurosurgeon, who extended the contract with the Indonesian government until the end of 1952.

At the beginning of 1953 Dr. SK. Handoyo completed his neurosurgical training in Netherlands and became the first Indonesian neurosurgeon. He returned to Indonesia and started his service at Princes Margriet Hospital. Five years later, Dr. Soewadjiprawirohardjo and Dr. Basoeki completed their neurosurgical training from abroad and joined Dr. S.K. Handoyo in Princes Margriet Hospital. For the next 10 years, neurosurgical service grew continuously without any change in the number of neurosurgeons. Dr. S.K. Handoyo and Dr. Soewadjiprawirohardjo were responsible for the neurosurgical service in Jakarta and the west part of Indonesia, and Dr. Basoeki was transferred to a new post in Airlangga University, Surabaya, to develop a neurosurgery service for the east part of Indonesia.

In the late 1950s and early 1960s, deterioration in economic conditions adversely affected further development of neurosurgery. The lack of modern equipment limited the range of service available. This situation began to reverse in the early 1970s. In 1969, came the next generation of neurosurgeons. Dr. R.M. Padmosantjojo returned from Netherlands in 1969, followed by Dr. Med. Iskarno in 1971 from West Germany. Dr. R.M. Padmosantjojo was prepared to replace the predecessor in University of Indonesia, Jakarta, and Dr. Med. Iskarno was assigned in Padjadjaran University, Bandung, West Java. Both neurosurgeons later became the department heads in each faculty.

Neurosurgical training was instituted in 1973. Three universities, University of Indonesia, Padjadjaran, and Airlangga University, were officially assigned as centers for neurosurgical training. In 2010 three more universities, University of North Sumatra, Gajah Mada University, and Diponegoro University, established their own neurosurgical training. From a handful of pioneering Indonesian neurosurgeons, the number has now grown to approximately 250 neurosurgeons, serving more than 250 millions people (1:1 million) spread across a vast area, which includes 17,508 islands.

I myself have first-hand experience of training in Bandung: I was sent by Prof. Dr. Med. Iskarno for a fellowship program to Dusseldorf, Germany in 1992, then to Nagoya University in 1993 to learn microneurosurgery. At that time microneurosurgery was not well recognized in Indonesia. In 1996, we started to develop a modern neurosurgery service with advanced equipment in the Siloam Hospitals of Lippo Village, Tangerang. Many friends, mostly from Japan, Canada and European countries came and helped in developing microsurgery in our center. I recall Prof. Tetsuo Kanno, Prof. Hiroshi Nakagawa, Prof. Yoko Kato, Prof. David Fairholm, and the late Prof. Yoshio Suzuki, to name a few. Many difficult cases underwent surgery in Siloam Hospitals, such as aneurysm clipping, brain tumors, and complex spine disease. One significant milestone was the first successful resection of brainstem cavernous angioma in 2001 by my colleague, dr. Jesajahus and me. Siloam Hospitals are now developing rapidly by having 20 hospitals in different parts of the country;
almost all of them are well equipped for neurosurgery services. Our own neurosurgery team has grown to 18 neurosurgeons who work together in harmony, developing every subdivision of neurosurgery such as: neuro-oncology, spine, endovascular, peripheral nerve, functional, epilepsy, radiosurgery, pediatric, and interventional pain management.

Despite encouraging development in the clinical service, Indonesia is still lacking on the area of neuroscience research. Not many Indonesian neurosurgeons are actively involved in neuroscience research, nor writing a scientific paper. This is at least partly due to the limited support from the government to fund health research, and our health system, which does not encourage the growth of health researcher. We do hope that the International Journal of Neuroscience will serve as a bridge to bring together neuroscience researchers from all around the world, allowing neurosurgeons, particularly in Indonesia to update and expand their knowledge. Hopefully this will sparks interest of neuroscience researchers in Indonesia to take part in this wonderful journey in the world of neurosurgery.

References