

# Nigeria

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Nigeria is the most populous country in [Africa](#) with an estimated 206 million inhabitants served by less than 300 neurologists and 131 [neurosurgeons](#). Neurological conditions account for approximately 18% of all medical emergencies. [Neurocritical care](#) challenges in [Nigeria](#) are as complex as they are in other low-to-middle-income countries (LMICs). These include a high burden of neurological [diseases](#), poor pre-hospital [care](#), delays in [transfer](#), lack of neurocritical care [equipment](#), and inadequate rehabilitative [capacity](#). Neurocritical care units in Nigeria offer mostly limited [multimodal monitoring](#) due to out-of-pocket [payment](#), and the success of repeat radiological imaging and [blood](#) work is low. [Data](#) gathering and outcome [research](#) in neurocritical conditions can help in clinical decision-making and enhance [cost-effective clinical care](#). The concept of [allocation](#) requires that when medical resources are scarce, they must be efficiently utilized in the most judicious way so as to achieve the greatest possible [benefit](#). A high degree of [transparency](#) is needed with regard to the principles, values, and criteria employed to facilitate such triage [decisions](#). Proper funding will help improve the availability of equipment and [drugs](#) resulting in a higher quality of care and, subsequently, improvement in [mortality](#). There is ample evidence that neurocritical care improves overall prognosis in neurocritical-ill patients. Neurocritical care units (NCCUs) are mostly unavailable in Nigeria, often resulting in poorer prognoses for patients. What is already known: Nigeria has an unacceptably huge deficit in the overall capacity for neurocritical care. The inadequacies affect a wide range of components - facilities, quantity, and quality of personnel, and the unbearably high [cost](#), among others <sup>1)</sup>

## Neurosurgery in Nigeria

- [Management outcome of a patient with a self-inflicted multiple intracranial nail impalement in a tertiary hospital in Uyo: illustrative case](#)
- [Multinational Attitudes Toward AI in Health Care and Diagnostics Among Hospital Patients](#)
- [Complications of ventriculoperitoneal shunting: Is there further need of more evidence-based approach to care?](#)
- [Global, Regional, and National Burden of Nontraumatic Subarachnoid Hemorrhage: The Global Burden of Disease Study 2021](#)
- [Spinal arachnoid cyst among Nigerians](#)
- [Audit of Operative Site Marking Practice in a Tertiary Hospital in Nigeria: A Key Step in Patient Safety](#)
- [BOOTStrap-SCI: Beyond One Option of Treatment for Spinal Trauma and Spinal Cord Injury: Consensus-Based Stratified Protocols for Intensive Care and Surgical Management](#)
- [AI-enhanced telemedicine for personalized antiretroviral therapy in HIV patients with neurological comorbidities: a narrative review](#)

## History

BEGINNINGS OF NEUROSURGERY AT THE UNIVERSITY OF IBADAN, NIGERIA <sup>2)</sup>.

Latunde Odeku <sup>3)</sup>

## Units

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## Neurosurgeons

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H W Oyinlola

S A Balogun

E O Komolafe

John Usuah

Damilola Jesuyajolu

Olufemi Bankole

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## Publications

1: Komolafe MA, Idowu AO, Peter ME, Oyinlola HW, Sanusi AA, Balogun SA, Olateju SO, Adebowale AA, Fawale MB, Komolafe EO. Neurocritical Care in Nigeria. West Afr J Med. 2023 Jun 29;40(6):630-633. PMID: 37390330.

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