

ALLAN DRASH FELLOWSHIP REPORT

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DECCP – Centre Hospitalier de Luxembourg
Period: 05 January – 19 February 2026



Breakthrough T1D™



Introduction

The Allan Drash Fellowship is an opportunity awarded to physicians from low-resource countries to undertake a clinical internship in hospitals located in high-resource countries. We were selected in 2025, and I am the youngest physician to have received this opportunity. I am a medical doctor at Kivu Diabetes Center, a young and emerging healthcare structure that currently follows approximately fifty children and adolescents living with type 1 diabetes in the eastern region of the Democratic Republic of Congo.

I undertook my fellowship at the DECCP, Centre Hospitalier de Luxembourg. The department includes more than eight pediatric endocrinologists, following over 400 children and adolescents living with diabetes. The multidisciplinary team is composed of: 3 psychologists, 2 dietitians, 5 nurses.

Luxembourg is a stable, high-income, and multicultural country, with approximately 50% of the population being foreign nationals. Public transportation is free of charge, facilitating mobility across the country.

1. Objectives of the Fellowship

The objectives of this fellowship were:

- To gain comprehensive knowledge and strong practical skills in pediatric diabetology, including both conventional management and the use of diabetes technologies, and to apply feasible practices in my region.
- To participate in educational trainings, diabetes camps, and webinars focused on pediatric diabetes.
- To develop a multidisciplinary approach to diabetes management, with a clear understanding of task allocation among healthcare professionals.
- To produce the first carbohydrate counting book in the Congo, in collaboration with the host center.
- To co-author a scientific paper on therapeutic patient education with the host institution.
- To establish long-term partnerships with the host center to improve diabetes care in our setting.

2. Activities During the Fellowship

My usual schedule was from Monday to Friday, 08:00 to 17:00, with one-hour break between 12:00 and 13:00. This schedule was flexible depending on clinical needs.

I participated in outpatient consultations with pediatric endocrinology colleagues, who were very open and welcoming, as were the patients.

A major component of my training was exposure to a multidisciplinary approach, where I worked closely with psychologists and dietitians. This helped me better understand their roles in diabetes care and the importance of integrating nutritional and psychological factors into patient management.

I also spent significant time with nursing staff, who were extremely supportive, both toward patients and myself.

3. Diabetes Technology and Clinical Skills

During the fellowship, I learned the practical use of insulin pump systems commonly used in Luxembourg: YpsoPump, Medtronic systems and Tandem pumps.

I acquired skills in:

- Pump assembly and disassembly,
- Patient-specific parameter adjustment,
- Closed-loop insulin delivery systems,
- Data generation and interpretation from patient devices.

4. Clinical Exposure

I had the particular opportunity to follow two patients who were newly diagnosed during my stay. I participated actively in:

- Medical follow-up,
- Psychological support sessions,
- Nutritional consultations,
- Carbohydrate counting in a meal to estimate the amount of carbohydrates with patients,
- Therapeutic education sessions from the beginning until the parents or the child feel confident in managing diabetes,

These experiences strengthened my understanding of early multidisciplinary diabetes care.

5. Academic and Multidisciplinary Learning

I particularly appreciated Tuesday mornings, which began with a medical staff meeting followed by a multidisciplinary staff meeting during the entire morning.

These meetings allowed me to better understand:

- The multidisciplinary approach in diabetes care,
- Task distribution among healthcare professionals,
- Collaborative decision-making processes.

During my presentation describing my work at Kivu Diabetes Center and comparing practices, I received strong encouragement from the staff. I understood that medicine is universal: we all care for patients, although resources may differ.

6. Cultural and Professional Experience

Luxembourg is a multicultural and welcoming country. I benefited from excellent living and working conditions, which allowed me to be well integrated and professionally fulfilled.

Outside the hospital, I established professional contacts in Luxembourg, which I hope will contribute to future collaborations. I also took the opportunity to visit Belgium and France, neighboring countries, in the context of networking and partnership development.

7. Outcomes After Return (2 Months in Congo)

After my return, several important changes were implemented at Kivu Diabetes Center:

- Introduction of a structured appointment system, improving organization of care and reducing patient waiting times.

- Introduction of continuous glucose monitoring systems, with staff now trained and familiar with its advantages for one patient.
- Strengthened international collaborations with partners from Luxembourg and Belgium, expected to support pediatric diabetes care in South Kivu. We are in discussion.
- Integration of psychological and nutritional care into routine diabetes management.
- Separation of medical consultations and therapeutic education sessions for newly diagnosed patients.
- Strengthening of therapeutic patient education, now a central component of care with observable improvement in glycemic control.
- Modification of insulin therapy protocols:
 - Transition from fixed doses to carbohydrate- and pre-meal glucose-adjusted bolus insulin.
 - Introduction of glargine (basal insulin) administered in the evening.
- Introduction of educational materials to support patients and staff in type 1 diabetes education.
- Patient data management is done using the DPV application, and our center is now part of the SWEET network thanks to the contacts I made in Luxembourg.
- I remain in contact with mentors whom I consult for advice about my patients, and they respond directly. We are working on a research project, some of whose authors will be from the Luxembourg hospital center.

Conclusion

The Allan Drash Fellowship was a highly enriching experience that significantly improved my knowledge and skills in pediatric diabetology, particularly in diabetes technology and multidisciplinary care.

It also enabled the development of international collaborations and led to meaningful improvements in diabetes care delivery in my home institution, the Kivu Diabetes Center.

Acknowledgements

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Physicians: Dr De Beaufort, Dr Bonnet, Dr Michael, Dr Yousr, Dr Ulrich, Dr Marianne, Dr Chiraz.

Dietitians: Sarah and Stéphanie.

Psychologists: Micky, Kathlyn and Aurélie.

Nurses: Yasmina, Muriel, Dominique, Mareva, Cindy, and Morgane.

Secretaries: Sophie, Melanie and Eunice.

I would also like to extend my gratitude to the medical education and training team at the CHL, particularly Paul, for their support and contribution to my learning experience.

Gratitude to the Kivu Diabetes Center team (Dr. Rolande, Kereine, Hervé, Marie-Reine and Antoine) for their support while I was in Luxembourg.

Done in Bukavu, On 22nd April, 2026.

Dr. **Kalehezo Murhabazi Albert**



Photo of Albert Kalehezo at the entrance of the Luxembourg Hospital Center, in the Pediatric department.



Multidisciplinary staff meeting, Dr. Kalehezo presenting his work and the outcomes of his internship in Luxembourg.