

UNIVERSITY OF PORT HARCOURT

**NO LONGER BEHIND THE SCENE:
A MOST IMPROBABLE JOURNEY**

A Valedictory Lecture

By

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PROGRAMME

- 1. GUESTS ARE SEATED**
- 2. INTRODUCTION**
- 3. THE VICE-CHANCELLOR'S OPENING REMARKS**
- 4. CITATION**
- 5. THE VALEDICTORY LECTURE**

The lecturer shall remain standing during the citation. He shall step on the rostrum, and deliver his Valedictory Lecture. After the lecture, he shall step towards the Vice-Chancellor, and deliver a copy of the Valedictory Lecture and return to his seat. The Vice-Chancellor shall present the document to the Registrar.

- 6. CLOSING REMARKS BY THE VICE-CHANCELLOR**
- 7. VOTE OF THANKS**
- 8. DEPARTURE**

PROTOCOL

The Vice-Chancellor,
Deputy Vice-Chancellor (Administration),
Deputy Vice-Chancellor (Academic),
Deputy Vice-Chancellor (Research & Development),
The Registrar & other principal officers of the University,
Provost, College of Health Sciences,
Dean, School of Graduate Studies,
Other Provosts,
Dean, Faculty of Clinical Sciences,
Deans of other Faculties,
Distinguished Professors,
Directors of Institutes,
Heads of Departments,
Other distinguished Scholars and Administrative staff,
My distinguished friends and guests, students of Unique
UniPort, members of the Press,
Ladies and Gentlemen:

DEDICATION

With utmost humility, I dedicate this work to:
The Almighty God, the Father of Anaesthesia who made it all
possible;
Chief Israel Lomma Mato, my late father, and all the numerous
giants who pulled me out from behind the scene and walked
with me throughout this most improbable journey
And
My daughter, Singto Deborah Ruby Mato, *Esq.*

ACKNOWLEDGEMENT

I wish to express my profound gratitude to God Almighty for His mercy and faithfulness all through my life; His love continues to overwhelm me, and I acknowledge today as always, that without Him, I am nothing.

I am grateful to my family for their unconditional love, unwavering support and encouragement throughout my life. My parents gave me an indomitable spirit of resilience; I am grateful to God that my Mum, Maama is here to see her 3rd child and 2nd daughter at 70.

My siblings, late K. Mato Esq, Mrs Carol B. Udegbumam (Bura), Mrs TamBari Ekpeta (Tam), Engr Nalor Mato and Bariyaa Mato, thank you for your total and unflinching support and encouragement always, I couldn't have asked for a better family; my cousin and big brother Senator (Dr) Ben Birabi, (cheese, crackers and red grapes for breakfast, all munched together) thank you

I specially acknowledge my nephew, Meesuan Paul-Birabi who conspired with my daughter to design our home, obtained all necessary permits and personally supervised and coordinated the building of that home, ensuring that I moved in at a time when I was still strong enough to carry boxes and arrange furniture; that sacrifice freed me from accommodation stress so I could focus on my work. Thank you.

My schools, primary, secondary, tertiary and postgraduate laid the foundation that enabled me to navigate through the waters of the academia and medical practice. I am most grateful to all my teachers. Mr Ansa in Primary school believed in me,

encouraged me and flaunted my results after every examination.

My first Head of Department when I started Anaesthesia at the University College Hospital, Ibadan, Professor O. O. Akinyemi needs special mention –about 2 months after starting in the Department, he pulled me aside and encouraged me to complete the full fellowship, instead of just the Diploma programme I was admitted for; then Dr BEN Mengot followed up, and advised me to seize the opportunity, because I may not get another one. I am most grateful for their guidance.

Professors Olaitan Soyannwo, Elegbe, late Sotunmbi and late Amanor-Boadu were the women who stayed on to train us when all the men left for greener pastures; their encouragement saw me through Residency training.

I acknowledge Professor Sylvia Akpan for her detailed review of my Part II Fellowship work that resulted in a work I remain proud of up till today.

I was at a cross roads after Residency training until late Dr Tumini Blue-Jack, one of the earliest Anaesthetists in Rivers State pointed me to the University of Port Harcourt; I acknowledge that wise counsel with deep gratitude.

I am grateful to the University of Port Harcourt and the University of Port Harcourt Teaching Hospital for providing the enabling environment and platform from which I could venture into the world of conferences, seminars, publications and service.

I am grateful to Professor Aaron C. Ojule (CMD, UPTH 2009 – 2017) for inviting me to work with him as CMAC; I appreciate the opportunity, support, encouragement and guidance throughout my tenure.

Professor Chris Akani, the 8th Provost trusted me enough to hand over the College to in April 2015; thank you for your confidence in my ability.

I am deeply grateful to late Emeritus Professor Nimi Dimkpa Briggs, our 5th Vice-Chancellor, for his mentorship, support and wise counsel especially when I was Provost, College of Health Sciences. I also appreciate our 6th Vice-Chancellor, Professor Don Baridam for his kind words of encouragement and support.

I started my tenure as Provost with the 7th Vice-Chancellor, Professor Joseph Atubokiki Ajienka whose unflinching support and encouragement during the early weeks helped me settle down quickly. Thank you for the opportunity to oversee the University in your absence, for making out time to review my Inaugural lecture despite your very busy schedule, and for your kind comments when you reviewed this Valedictory lecture; I appreciate your kindness through the years.

I acknowledge Professor Ndowa Lale, our 8th Vice-Chancellor, and my friend and brother, under whom I served most of my years as Provost; thank you for trusting me to act for you on all those occasions of the absence of the University Top Management.

I acknowledge the PAMO Foundation and His Excellency Sir (Dr) Peter Odili, for giving me the opportunity to serve humanity in a pioneering capacity at the PAMO University and

the Teaching Hospital, and experience leadership at a much higher level.

I appreciate my Anaesthesia family, especially my children, grandchildren, great-grandchildren and great, great... grandchildren in the Department of Anaesthesiology. I am grateful to the Consultants in the Department of Anaesthesiology, for holding the fort during the periods of my absence; thank you all for your support and pride in my modest achievements, and for constructively critiquing this work at the rehearsal presentation.

I acknowledge my colleague and friend, Major General Shina Ogunbiyi (Rtd) with whom I navigated quite a few difficult sessions during Residency training in UCH Ibadan; thank you for a solid friendship that I could always count on.

Alabo Professor Sotonye Fyनेface-Ogan, my first son in Anaesthesia, thank you for everything, and for sitting with me to arrange and rearrange this work.

I am grateful to all my colleagues in the Faculty of Clinical Sciences and College of Health Sciences.

I specially acknowledge the Deputy Provosts and Deans of the 3 Faculties of Basic Medical Sciences, Clinical Sciences and Dentistry with whom I worked as Provost; Professor OK Obunge and Professor Daye Seleye-Fubara. Professor Iyeopu Siminialayi (and later Professor Chijioke Nwauche), Professor Uzoigwe (Uzoheaven) and Professor CO Onyeaso. Thank you. Mrs Joyce Tamuno was College Secretary, Mrs Gloria Chindah was head of Personnel, while Mrs Nene Eronini was in charge of Exams & Records; I appreciate you all, as well as

all the administrative and technical staff of the College; thank you all.

My friends, Dame Claribel Abam from primary school at Holy Trinity, Calabar; secondary school at Holy Rosary, Port Harcourt, Dr Nengiya Ideriah (Nengiya le le), Dr Faka Tamunomiebi (Fakus), Dr Awoere Teme; Honorable Justice Beatrice Laz-Iliya, Retired Chief Judge of Gombe State from NYSC, and later, Dr Titi Akingbogun (Titi rè), Professor Eno Ikpeme (MmaMma), Dr Queen Appresai (Queen o); thank you for standing by me through life's numerous challenges. My cousin and friend with whom I speak the same dialect, Mrs Felicia Zawalo Woluchem (Zee), thank you for all the so many years of encouragement and loud cheer. And the many others I am unable to include here but they know; thank you for seeing me, I appreciate you all.

Finally, my Baby-girl, Singto, the one with whom God wipe away my tears, my one that is more than ten; thank you for your unconditional love, care, tremendous support and encouragement. You continue to amaze me. It has not always been easy, no; and this year has been particularly challenging, but we are here. I thank God for the honour and privilege of being your Mum

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“NO LONGER BEHIND THE SCENE: A MOST IMPROBABLE JOURNEY”

1.0 Preamble

I am most grateful to the Vice-Chancellor, Professor Owunari Abraham Georgewill for allowing me to give this Valedictory lecture. This was something I very much wished to do, because this University and its Teaching Hospital since 1992 (for more than thirty-three (33) years) have provided the environment for me to excel and achieve my highest potentials in academics. It therefore would have been remiss of me and totally out of character to bow out of this great citadel, without saying thank you and good bye.

A Valedictory lecture is an opportunity to reminisce, remember the past, share experiences garnered through the years in the service of the institution; it is not compulsory, and some do not see the need, but for me, I could not have just walked away.

This is the first Valedictory lecture from the Department of Anaesthesiology in this University, and I am honoured to again make history, and be the one leading the way in this Specialty that has blessed me so much; as with my Inaugural Lecture, others will proudly follow.

My Inaugural lecture, titled, “The Anaesthetist: working behind the scene, ever-present, ever- watchful” was delivered on the 17th of July, 2014 and was the 107th in the series. Then, the emphasis was on the Anaesthetist behind the scene, unknown and unsung, a backstage actor, but without whom no meaningful surgery could effectively be carried out. Today,

this Anaesthetist is no longer behind the scene, but has evolved and emerged from behind the scene.

For who would have thought or believed that a quiet, timid and shy girl, from a sub-middle class family, minority community in a minority tribe in a minority State, practicing in a minority Specialty could come this far? Coordinator/Head of Department of Anaesthesiology, Associate Dean Faculty of Clinical Sciences, Chairman, Medical Advisory Committee (CMAC) University of Port Harcourt Teaching Hospital, Provost College of Health Sciences, Pioneer Dean, Faculty of Clinical Sciences, PAMO University of Medical Sciences, Pioneer Chief Medical Director (CMD) PAMO Teaching Hospital, Deputy Vice-Chancellor (DVC) and Acting Vice-Chancellor PAMO University of Medical Sciences; truly, it has been a most improbable journey.

2.0 Introduction

For years, the Anaesthetist has worked behind the scene and mainly in the operating room, unknown and unsung, a backstage actor; many did not know what the Anaesthetist did, and others did not even know that the Anaesthetist was a medical doctor (Mato, **2014**). Indeed, in the past, a drape was often tied between the poles of two drip stands to ‘cordon’ off the head and neck of the patient during abdominal surgeries, but it also cordoned off the Anaesthetist who then sat at the head of the operating table/patient, many times alone, while the surgeon, operated; there would be about 3 to 4 surgeons to one lone anaesthetist (Fig 1).



Fig 1: Operating Room in Session (*accessed June 12, 2025*)

Yet, the Surgeon could not venture into the sacred parts of the human body – the brain, chest and abdominal cavity, like he has done, without the Anaesthetist – no surgical feat to date has been possible without the full involvement, cooperation and skills of the Anaesthetist.

Yesterday, the Anaesthetist was behind the scene, but all of that has changed. In the University of Port Harcourt, in Rivers State, in Nigeria, and the world today, the face of Anaesthesia is totally different from what it was when I was a Resident doctor at the University College Hospital, Ibadan (1986 – 1991).

3.0 The Journey

On the 17th of July, 2014, I talked about The Anaesthetist: working behind the scene, ever present, ever watchful. Today, eleven years later, I am saying with full confidence, ‘No longer behind the scene’.

According to a popular Chinese proverb, “a journey of a thousand miles begins with the first step” (https://en.wikipedia.org/wiki/A_journey_of_a_thousand_miles_begins_with_a_single_step accessed June 12, 2025).

In 1986 when I first thought of venturing into the Diploma programme in Anaesthesia, there were only three (03) Teaching Hospitals in Nigeria with full accreditation for Residency training in Anaesthesia (Sule **2025**); they were:

1. The Lagos University Teaching Hospital (LUTH), Lagos
2. The University College Hospital (UCH), Ibadan
3. University of Benin Teaching Hospital (UBTH), Benin

Thus, any doctor interested in Residency training in Anaesthesia had only those three (03) Teaching Hospitals to choose from, but there were even fewer doctors interested; most opted for the one-year training to Diploma level, and in many States at that time, they were offered Consultant positions, so why progress or go through the stress of Residency training for 4 – 5 years, failing examinations and sometimes unable to complete the programme? Thus, for the various sessions, only one or two remained to complete the Fellowship in Anaesthesia.

In my set, the 1986/87 set in Anaesthesia in UCH, I alone completed the Residency training – in 1991.

3.1 Sub-specialty Training

Anaesthesia training in the eighties and nineties had no provision for sub-specialty training locally; the emphasis was on training to provide a workforce for anaesthetic services in Hospitals in the country, but the Lagos University Teaching

Hospital (LUTH) boasts of the first Fellow in Anaesthesia of the National Postgraduate Medical College (1984), as well as the first Anaesthetist with sub-specialty certification in Paediatric Anaesthesia, Professor OT Kushimo; in 1990, she received the Association of Commonwealth Universities Medical Fellowship award for subspecialty training in Paediatric Anaesthesia at the Royal Children's Hospital, Salford, Manchester. No training center in Nigeria offered sub-specialty training.

Today, however, there is active encouragement of sub-specialization, and the University of Port Harcourt and the University of Port Harcourt Teaching Hospital can boast of seven (07) such Specialists with sub specialty Fellowships –

1. Professor Sotonye Fyeface-Ogan, Obstetric Anaesthesia (Holon, Israel, 2009)
2. Professor LN Ebirim, Regional Anaesthesia & Pain Management Calcutta, India, 2009)
3. Dr Alfred T. Aggo, Paediatric Anaesthesia (Vellore, India, 2014)
4. Dr Job Gogo Otokwala, Critical Care (Vellore, India, 2011)
5. Dr Bright Obasuyi, Regional Anaesthesia (Kumasi, Ghana, 2017)
6. Dr Maxwell Tobin, Paediatric Anaesthesia (LUTH/UCH, Nigeria, 2017)
7. Dr Fiekabo Ogan-Hart (Obstetric Anaesthesia, UPTH, Nigeria, 2023)

(Trained in Nigeria – UPTH is now a WFSA training centre for Africa in Obstetric Anaesthesia)

Vice-Chancellor, Sir, I had areas of interest, but never got the opportunity to sub-specialize to certification level. I did however train in critical care at the Chris Hani Baragwanath

Hospital, South Africa under the teacher upgrade-programme funded by the Mac Arthur Foundation in 2003, and again in 2010 for the Diploma in Health Systems Management at the Galilee Institute of Management in Israel. In 2013, I received full sponsorship from the University of Port Harcourt Teaching Hospital for training in Palliative Care in Kampala, Uganda, under the world-renowned Anne Merriman, (1935-2025), Founder of Hospice Africa.

However, I stand to proudly say that I laid the foundation in the Specialists mentioned above. I personally supervised their training in Anaesthesia; I supervised the dissertations of five (05) of them, prepared them for their Fellowship examinations and worked with them until they passed their Fellowship examinations of the West African College of Surgeons in Anaesthesia. I therefore vicariously hold a sub-specialty certification in Obstetric Anaesthesia, Critical Care, Regional Anaesthesia and Paediatric Anaesthesia. Distinguished ladies and gentlemen, this is no mean feat as I have anaesthetized pregnant women and neonates, headed the ICU in UPTH, and carried out regional anaesthesia and analgesia, even on pregnant women; one of my babies delivered on the 11th of October 2002 at the beginning of the programme in epidural analgesia in labour in UPTH, recently bagged a Distinction in his Master's at the Nottingham University.

Today, the West African College of Surgeons has officially approved sub-specialty training in Paediatric Anaesthesia, Obstetric Anaesthesia, Cardiothoracic, Neuro-Anaesthesia and Pain Management. In December 2024, the Senate of the National Postgraduate Medical College of Nigeria also approved sub-specialty training in two areas in Anaesthesia - Critical Care and Pain Management; thus, trainees may pursue and write examinations in these sub-specialties, and complete

the Residency training with a Fellowship in any of these sub-specialties.

Perhaps as I bow out on the 17th of October, I may now have the time to fully train in Critical care, with Dr Job Otokwala as one of my Supervisors.

3.2 The Anaesthetist in Management

In the past, it was rare for an Anaesthetist to aspire to be part of the Management team of any Hospital or University, because Anaesthetists were very few, overworked and his duties were often in the operating room; the dedication to duty was total and absolute (Mato, 2013).

When the Anaesthetist was behind the scenes, he could head his Department, but in some Universities, there were no Anaesthetists; the Hospitals had a few Diplomates, but no Fellows. Thus, the Diplomate could head the department in the Hospital, but not in the University, resulting in dual headship of the Department. The Department of Anaesthesiology, University of Port Harcourt experienced that, and for years, the Department in the University was headed by Surgeons, but from 2001 to date, the Department has had a Lecturer/Consultant Anaesthetist in the University and Hospital to head the Department starting with this Valedictory lecturer.

3.2.1 Coordinator, and Head of Department of Anaesthesiology (2001- 2005)

Some Achievements / Contributions

- Establishment of an Academic Training Programme in Anaesthesia in UPTH

In the Department of Anaesthesiology in the eighties and nineties, there was very dedicated service provision, but no academic programme; residents in the Department either stagnated or went to other Teaching Hospitals to commence proper Residency training. It is on record that the great turnaround witnessed in the Department was largely from the year 2001. Within one year, for the first time, the Department of Anaesthesiology, UPTH obtained **Partial Accreditation for Residency training**, and was put on the map in the West African sub-region. The sacrifice, determination, competence and confidence were transparently obvious to everybody in the Hospital. There was team work, a sense of belonging and pride

In 2002, **sponsorship was obtained from a donor for ten (10) Doctors in the Department to attend a national conference** – the Nigerian Society of Anaesthetists Annual Conference. That was the largest/highest number attending from any one hospital in Nigeria. That experience served to uplift many of the Doctors who benefited from that sponsorship, both academically and personally.

Yearly Appreciation

I introduced the Departmental reward system whereby staff received a token at the end of each year to say ‘thank you’ for efforts during the year. This was an innovation and staff felt a sense of belonging and ownership. They were proud to belong to the Department of Anaesthesiology, and worked harder, knowing that their efforts were noted and appreciated.

The Department of Anaesthesiology became the show-piece of the Hospital and a success story in Anaesthesia circles in Nigeria.

These efforts did not go unnoticed and resulted in an award of excellence by the Association of Resident Doctors of the University of Port Harcourt Teaching Hospital for two consecutive years - 2003 and 2004

As we speak, the Department has produced 34 Fellows, Consultant Anaesthetists working all over the world including in the UK, US and Saudi Arabia

3.2.2 Sabbatical Leave: Establishment of Postgraduate Training in Anaesthesia at the Braithwaite Memorial Specialist Hospital, Port Harcourt (now River State University Teaching Hospital) 2009

On Sabbatical leave with the Rivers State Ministry of Health in 2009, a mandate was received, in writing to establish postgraduate training in Anaesthesia at the then Braithwaite Memorial Specialist Hospital (BMSH).

- a. In December, 2009, an accreditation team from the Faculty of Anaesthesia, West African College of Surgeons visited the Hospital, and by February 2010, we attended the West African College of Surgeons Conference in Calabar to defend the Hospital; accreditation was given to train 20 doctors to Diploma level at the BMSH – the Postgraduate Diploma in Anaesthesia of the West African College of Surgeons; it was official.
- b. Sponsorship to International Conference
During the same sabbatical year, sponsorship was obtained from the Rivers State Government for the very first time, for 13 Anaesthetists to attend an International Conference – the All Africa Anaesthesia Congress (AAAC) in Nairobi, Kenya (Figs 2 & 3); that

was the largest group from Nigeria attending that conference, and for some members of the Team Rivers, that was their very first time at an international conference, and first time leaving the shores of this country. The excitement was palpable, and all participants in the Team Rivers attended most of the workshops; five of us were actively involved as Speakers and Moderators at symposia.



Fig 2: At the AAAC 2009



Fig 3: Speaking at a Symposium during the AAAC, 2009

That exposure had a profound impact on one of us, and resulted in a study whose findings were presented at the New York School Of Regional Anaesthesia (NYSORA) 12th Annual Symposium on Regional Anesthesia, Pain and Perioperative Medicine (September 21 – 22, 2013) in New York, and a publication in The Nigerian Health Journal (Nwate, 2014)

3.2.3 Chairman, Medical Advisory Committee, UPTH

In December 2009, towards the end of my sabbatical year, I was informed that the position of CMAC of UPTH was vacant; two key players in Management at that time thought I was the best candidate and asked me to run for that office. I did.

Excerpts from my Manifesto to the body of Consultants (MDCAN):

Dear Esteemed Colleague,

Welcome to another occasion of the election of the Chairman, Medical Advisory Committee (CMAC). This is the third time this body of highly qualified professionals will be electing a consultant into the office of the CMAC; but this is the first time a woman will be running for that office. So, we are about to make history.

The office of the CMAC is the nerve centre of the Hospital, the office in charge of Clinical Services and Training. It is an office that requires the following of the office holder:

- *Wisdom & Competence*
- *Diplomacy & Sensitivity*
- *Confidence*
- *Hard work*
- *Credibility*
- *Discipline*
- *Honesty & Humility*
- *Loyalty*
- *Transparency*
- *Resilience & Tenacity*

Do I have these qualities? The answer is a resounding yes!!!

What do I have to offer as the new Chairman, Medical Advisory Committee?

The Vision of the UPTH is to be a first-rate world class hospital.

The Mission is to provide excellent medical service, manpower training and research, using a well-trained and well-motivated workforce and the best affordable modern technology with a culture of courtesy, humanness and patient-friendliness.

The job of the office of the CMAC is to pursue and use that Mission to actualize the Vision of being a first-rate world class hospital.

Therefore, as CMAC, I intend to -

Support the Chief Medical Director who is the Chief Executive of the Hospital, and work closely with him to do the following:

- 1. Establish a constant, adequate voltage power and water supply and distribution in the whole Hospital*
- 2. Ensure that the UPTH becomes a Centre of Excellence through identification of an area of advantage and strength in the Hospital and focusing on it to excellent levels.*
- 3. Source for collaboration and linkages for manpower development and services*
- 4. Encourage and adopt a holistic approach to manpower training and research*
- 5. Ensure a well-trained workforce through the establishment of a Continuing Professional Development Unit in the Hospital. Professional Development will no longer be by personal effort but by planned and well-coordinated effort from the Hospital*

6. *Establish definite structures for grant sourcing in the Hospital, and reduce dependence on Federal government funding for development of facilities in the Hospital.*
7. *Pursue the establishment of a private wing in UPTH as a means of providing sustainable revenue-generating intramural private practice*
8. *Ensure the provision of the best affordable modern technology in the Hospital especially ICT and explore the possibility of introducing Telemedicine in the Hospital.*
9. *Adopt a system for motivation of staff through recognition and reward of excellent staff performance*

My Esteemed Colleagues, the foundation has been laid for us. It is now left for us to build on it. There is a lot of hard work ahead for us, but together, we will do it better and move UPTH to be greater than the greatest.

I have the Vision, I have the Passion, and I have what it takes. I've been tried and tested; I am Credibility. I am a Walking Manifesto.

Thank you

Dr Christie N. Mato

Distinguished ladies and gentlemen, I received overwhelming support from fellow Consultants and the Executive of the Medical & Dental Consultants Association (MDCAN) UPTH chapter, and was later appointed CMAC in April 2010; I served for 2 terms – 2010 – 2014. To date, I stand as the first and only female to occupy that position in the history of the University of Port Harcourt Teaching Hospital

During my tenure as CMAC, there were some significant milestones:

1. Training of Teams: The Spine Team was trained in India in 2012
2. Employment of a Radiation Oncologist
3. Training of Cardio-thoracic surgeon
4. Training of two Nuclear Medicine specialists
5. Establishment of the Palliative Care Unit

Palliative Care Services in the UPTH

Background: My job as Chairman, Medical Advisory Committee (CMAC) of the University of Port Harcourt Teaching Hospital (UPTH) included going round all clinical departments in the Hospital to ensure efficient and effective clinical service delivery. At least twice daily, I went through the acute care areas of the Hospital - Accident & Emergency Department, Children Emergency Ward, Labour ward and theatres, Main Operating theatre and Intensive Care Unit, Special Care Baby Unit. In the course of this, I saw very ill patients, some terminal. I also saw many in very severe pain, sometimes alone, abandoned by family and friends.

As CMAC and part of the Management Committee of the Hospital, working with the Chief Medical Director, Stakeholder meetings were introduced in the Hospital, to

encourage teams with similar goals to work together. In this regard, Cancer Care stakeholder meetings were held, bringing together all staff involved in any way with the management of cancer patients both adult and paediatric.

Representing the Chief Medical Director at a Stakeholders' meeting at the National Atomic Energy Commission (2012), I found myself sitting beside the National Cancer Programme Coordinator, Federal Ministry of Health and discussing cancer care in Nigeria as well as Palliative Care services with a pointer towards further discussions with Professor Olaitan Soyannwo, my Mentor and Founder of Palliative Care services in Nigeria.

These discussions emphasized the importance and need to assemble a Team. Further meetings with the Cancer Care Stakeholders in UPTH resulted in advocacy visits to the Departments of Surgery, Obstetrics & Gynaecology, Nursing Services, Community Medicine, Family Medicine, Internal Medicine, Anaesthesiology, Paediatrics and Medical Social Services. These visits aimed at encouraging Departments to form oncology Units in their Departments so cancer cases would be referred to such units for better care, and also introduce Palliative Care to the Departments.

Professor Soyannwo extended an invitation to the Presenter to visit the University College Hospital; she also offered to visit the UPTH to help set up Palliative Care Services in the Hospital.

Following these discussions, one doctor and three nurses were trained by Professor Soyannwo and her Team in UCH, and in 2013, the UPTH sent me, the then Head of Medical Social services and Dr Ndukwu the current Coordinator of Palliative

care services in UPTH for training under the world-renowned Dr Anne Merriman 1935-2025). The Palliative Care Unit was born; as CMAC, I had registered the University of Port Harcourt Teaching Hospital with the Hospice & Palliative Care Association of Nigeria (HPCAN) in 2011, and later set up the first Palliative Care Team in UPTH, with approximately 13 members, including doctors, nurses, a pharmacist, and medical social services staff; there were 2 pastors in the team.

From then, the Palliative Care Unit has blossomed, hosted 2 national conferences and continues to serve all patients with life-limiting illnesses, providing compassionate and crucial care, including handling of end-of-life care and bereavement counselling to patients and their families. Some of those who benefited from this care have come back to join the Unit, to reach out to others and share their experiences.

But what exactly is Palliative Care?

According to the World Health Organization, Palliative Care is an approach that improves the quality of life for patients (adults and children) and their families facing problems associated with life-threatening illness. It prevents and relieves suffering through the early identification, correct assessment and treatment of pain and other issues whether physical, psychosocial or spiritual (*Palliative Care who.int 5/8/2020 <https://www.who.int/news-room/fact-sheets/detail/palliative-care> accessed 14/4/2025*)

This care is interdisciplinary, can be provided at any point during the patient's illness, and is not limited to end of life care as is often thought. It improves the quality of life of the patient and family and our experience is that it also blesses the practitioner.

The need for palliative care services will continue to increase in our environment; with an ageing population and the increasing incidence of non-communicable diseases.

3.2.4 Provost, College of Health Sciences (2015 – 2019)

In a keenly contested election on the 16th of March, 2015, the College of Health Sciences by majority vote elected a woman to head the College. On the 15th of April, 2015, that election was followed by the official appointment as Provost of the College of Health Sciences for a four-year tenure, the first female to be so appointed in the then forty-year history of the University of Port Harcourt (Fig 4).



Fig 4: Provost, CHS

In those four tough years marked by very poor funding, the College stood strong and united and moved forward, building on the firm foundation laid by the previous 8 Provosts.

At my Valedictory address to the College Assembly on the 18th of March 2019, I enumerated the following achievements:

The 2015 – 2020 Strategic Plan and Logical Framework for the College of Health Sciences stated three strategic goals as follows:

- 1. To upgrade infrastructure and utility services*
- 2. Excellence in Teaching, Training and Research*
- 3. Allied Medical Science Building Complex*

These were our guide

Accomplishments

- 1. Faculty of Basic Medical Sciences Building commissioned and occupied*
- 2. Anatomy Building commissioned and occupied*
- 3. Medical Students Hostel renovated*
- 4. Four out of 6 classrooms renovated – College Hall, Pathology classroom, Year V and year VI classrooms renovated*
- 5. Department of Nursing Science classrooms renovated and furnished*
- 6. Upgrade of the College Administration signpost*
- 7. Repainting of the College Boardroom, renovation of all College Administration restrooms and provision of running water in the College as well as provision of lighting along walk ways in the College Administration, internet access, and air conditioning in the Board room and most offices*
- 8. Relocation of the Exams & Records Unit to a more secure location within the College*

9. *Training of 30 staff of the College by ICTC in Computer appreciation*
10. *Setting up of College Committee to computerize all College Examination results and back up of past results for easy retrieval*
11. *Annual retreat for HODs*
12. *Presentation of official letters of Condolence, Appreciation and Congratulation to staff*
13. *Strengthening of the Annual Year I Orientation exercise of the College anchored by the Faculty of Basic Medical Sciences*
14. *Strengthening of the Annual Brain Awareness Day by the Department of Anatomy*
15. *Introduction of the examination balance vote-head to hold every balance from examinations; these funds are made available for re-sit examinations*
16. *Diploma in Medical Education Programme, now reviewed and revised to the Masters in Medical Education programme*
17. **School of Public Health:** *This school has received senate approval and has commenced enrollment of students for the first batch.*
18. **World Bank ACE-PUTOR programmes:** *This is a five-year grant from the World Bank for Public Health and Toxicological Research. Enrollment for these programmes has commenced.*
19. *University of Port Harcourt Teaching Hospital: Initiation of a “Joint Committee of the College Top Management and the UPTH Management” to develop a strong relationship and explore areas of mutual collaboration and benefit. The incoming Provost would need to push for regular meetings of this committee.*
20. *Faculty of Engineering, University of Port Harcourt. Review and repair equipment in the College and train*

our technologists / technicians. Engineering students can carry out their Projects in any of the Laboratories in the 3 faculties in the College

21. *Establishment of the Indigent Student's Welfare Fund*
22. *Establishment of the CITA Prize for Integrity*
23. *Establishment of the College Business Committee*
24. *Institution of the Valedictory College Academic Board for retiring College Board members*

One month later, I officially handed over to Professor I. M. Siminialayi who became the 10th Provost of the College

ADDRESS AT OFFICIAL HAND-OVER AND EXIT CEREMONY,

MONDAY APRIL 15, 2019

At the College Assembly on Monday, March 18, 2019, Professor Iyeopu Siminialayi was elected Provost, College of Health Sciences, University of Port Harcourt.

Today, Monday, April 15, 2019, is my last day in office as the 9th Provost of this College; today, I hand over the College of Health Sciences to you, with 3 Faculties + 1...the Faculties of Basic Medical Sciences, Faculty of Clinical Sciences, and the Faculty of Dentistry. The Faculty of Basic Clinical Sciences is just gearing up to be the 4th Faculty in the College; as well as the Institute of Maternal & Child Health and the Center for Medical Education and Training.

I am handing over 24 Academic Departments and the College Administration to you, along with 259 academic staff and 244 Administrative and technical staff and all other assets of the College of Health Sciences.

In the course of the last four (04) years, we have leveraged on the vision of our Founding Fathers, stood on the strong foundation laid by former Provosts of this College and extended the frontiers and boundaries of the College.

The following additions to the activities of the College require your close attention:

1. The College Indigent Students' Welfare Fund
2. The College Business Committee
3. The CITA Prize for Integrity
4. Valedictory College Academic Board
5. Letters of Appreciation, Condolence and Congratulations

Today's event is new in the tradition of this College, and I hope it will be upheld; I believe there should be a brief ceremony like this to officially hand over the College to the next Provost.

In this University, there is more than one academic gown with a label, but there is ONLY ONE academic gown in existence in the University that is labeled PROVOST.

As I hand over to you today, I enjoin you to stand as the Father of this College, be an umbrella under which all in the College will have the confidence to take shelter and with dignity and integrity uphold the ethics for which this College is known.

I wish you all the best

Prof Christie N. Mato

9th Provost, CHS,

University of Port Harcourt

4.0 PAMO University of Medical Sciences (PUMS)

In 2020/2021, I was invited by the Pro-Chancellor of PAMO University of Medical Sciences for a discussion; that marked the commencement of my relationship with the PAMO Foundation and some of my most interesting, challenging and productive years in public service.

Vice-Chancellor, Sir, distinguished ladies and gentlemen, I was given the unique opportunity and privilege of serving in the following capacities:

1. Pioneer Dean, Faculty of Clinical Sciences, and Coordinator of Clinicals
2. Special Adviser on the MBBS Programme
3. Pioneer Chief Medical Director, PAMO Teaching Hospital
4. Deputy Vice-Chancellor, PAMO University of Medical Sciences
5. Acting Vice-Chancellor, PAMO University of Medical Sciences

4.1 Dean, Faculty of Clinical Sciences & Coordinating Dean of Clinicals

This took place during my 2nd Sabbatical (2020/2021) and the following were achieved:

1. Establishment of clinical training for MBBS students – the foundation for the MBBS clinical programme was laid during that year as the pioneer MBBS students progressed from Pre-clinicals to clinicals, with preparation for and conduct of accreditation visit by the Medical & Dental Council of Nigeria (MDCN). The visit was to accredit the University and approve for the pioneer students to write the Part I MBBS examination and accredit the facilities available for the commencement of the clinical postings.

2. I have always worked in established institutions, but here, I was given the rare privilege of pioneering a programme; observing and participating in the commencement of the MBBS clinical programme made me a part of history.
3. It was a very challenging sabbatical year, especially with the COVID-19 pandemic, but most productive and rewarding:
The published studies –
 - i. The Psycho-social impact of the COVID-19 tests and positive results on clinical students screened during the second wave of COVID pandemic in Rivers State, Nigeria (Mato CN, Ijah RFOA, Onodingene NM et al, **2022**), was one of the results of that experience
 - ii. Challenges and Opportunities of a shared facility for the training of medical students in Rivers State: Perspective of stakeholders and medical students. (Mato CN, Uzosike TC, Ijah RFOA, Alali AA, **2023**).

4.2 Pioneer Chief Medical Director, PAMO Teaching Hospital

This appointment was full-time, thus I applied for, and obtained approval from this University to proceed on Leave of Absence for two (02) years (1st December, 2022 – 30th November, 2024). I wish to most sincerely thank the Vice-Chancellor, Professor Owunari Abraham Georgewill for his immediate support, advice and encouragement to “go and help”. The Chief Medical Director of the University of Port Harcourt Teaching Hospital, Professor Henry Arinze Ugboma was no less encouraging, sharing some of his experiences as CMD with me, and assuring me that God would see me through and reward all the sacrifice. Thank you, both.

The reaction of colleagues in Anaesthesia all over the country and the medical community to this appointment was overwhelming.

I thus went over to PAMO Teaching Hospital and PAMO University, buttressed by this support, determined to do my best to serve humanity in that capacity.

A significant note on assumption of duty was the clear position of the CMD in the activities of the University, confirming the fact that the affiliate Teaching Hospital is an integral part of every University that has a Medical College. A National Universities Commission (NUC) Team on an unscheduled visit to the University observed the synergy between the University and the Teaching Hospital (the CMD was sitting on the right of the Vice-Chancellor), commended the University and assured that the observation would be part of their report to the NUC, with the hope that this would be a model to be passed on for other Institutions to emulate.

Furnishings and installations were on-going in the Teaching Hospital, hand in hand with the completion and preparation for the ceremonial opening.

There were no staff yet, so I worked alone, on ground in the Hospital daily, discussing with the Architect, and bringing in relevant stakeholders in the various sections for their input (Fig 5)



Fig 5: With VC, Prof Diejomaoh & With Laboratory Medicine Physicians

On May 24th, 2023, all the hard work culminated in the ceremonial commissioning of the Teaching Hospital (Fig 6).



Fig 6: PAMO Teaching Hospital the night before commissioning

Shortly thereafter, I was appointed Deputy Vice-Chancellor of PUMS, and then Acting Vice-Chancellor.

Acting Vice-Chancellor (w.e.f. January 4th, 2024)

This appointment came as school was re-opening after the Christmas and New Year break, and it was with immediate effect; there was no time to process anything as students were resuming and lectures were scheduled to commence on Monday January 8th, 2024. On Sunday, January 7th, I was physically present in the University to observe the check-in process, encourage the staff on duty, and welcome the returning students.

Some significant achievements during that year were:

1. Successful relocation of academic activities from the Delta Hotels lecture halls to the academic wing of the PAMO Teaching Hospital
2. Successful conduct of professional examinations in general Nursing, Midwifery and Public Health; candidates for this examination were from PAMO University, University of Port Harcourt, Rivers State University, and College of Nursing, Port Harcourt. PUMS was the examination centre
3. Induction of the first set of graduates of Radiography and Radiation Sciences
4. Induction of the 3rd set of graduates of Medical Laboratory Science & Nursing Programmes (1st Joint Induction ceremony)
5. Induction of the 2nd set of graduates of the MBBS Programme
6. Successful conduct of the 4th Matriculation ceremony of the University.

In the course of the years of my sojourn in PAMO University of Medical Sciences, I worked very closely with some very committed and dedicated staff. The job was stressful and very demanding, but also most rewarding. As a young University, almost everyone wore more than one cap. We chronicled our activities, turning the pressure of work into something positive - Publications. Every hiccup we encountered became something to learn from, investigate further and share with the world. The very real challenges of sharing a health facility with another institution, the stress associated with preparing for the so many accreditation visits by regulatory bodies, the impact of COVID-19 on students who could not get into the hostels if they were COVID positive, the relationship between work stress and job satisfaction, etc; these all became topics for further studies.

We authored a total of 13 publications, some of which have generated some serious conversations due to the findings (Mato CN, Ijah RF, Aaron FE, Onodingene NM, Alagbe-Briggs OT, **2022**; Mato CN, Ijah RFOA, Onodingene NM, Ogamba MI, Aaron FE et al **2024**; Mato CN, Ijah RFOA, Odu NN, Aaron FE, **2024**; Mato CN, Ijah ROFA, Onodingene NM, Ogamba MI, Aaron FE, Eleki BJ, Athanasius B, Bob-Manuel M, Aguwa EN **2024**, etc).

The study on medical students and Joint Admissions Matriculation Board (JAMB) examinations followed our experience as Proctors for the JAMB examinations in 2022 when the then Vice-Chancellor of PAMO University of Medical Sciences was Chief Examiner for JAMB in Rivers State (Ijah RFOA, Onodingene NM, Kolawole TA, Dimoko AA, Mato CN, **2023**). This publication gained increased visibility and readership following the technical glitch and poor results released by JAMB in May 2025.

5.0 Completion of the Circuit

I had been on leave of absence from the University of Port Harcourt for two (02) years with effect from December 1st, 2022. On Friday, 29th November, 2024, I physically presented myself to the Vice-Chancellor and the Registrar; I also signed the Resumption Register, and informed the Chief Medical Director, UPTH, the Provost, College of Health Sciences, the Dean, Faculty of Clinical Sciences and my Head of Department that I had resumed from Leave of Absence.

Re-integration into the University and the Hospital was smooth, but then, the pre-retirement documentation process caused significant stress; there was so much paper work! Pay slip for June 2004 was one of the required documents to be attached; in 2024? But I must commend the Head of the Pension Unit of the University and her staff, who despite their very cramped work space did their best to smoothen the process for son-to-be retirees and retirees.

Vice-Chancellor Sir, distinguished ladies and gentlemen, the journey started here, so it was necessary to complete the circuit in the University of Port Harcourt and close the loop.

I have been asked repeatedly by friends and colleagues: “What next? What are your plans for retirement?”

5.1 Mentorship with Professor Mato

At the beginning of this year, I had asked a young consultant in my Department how many publications she had; later that week, I had met another young consultant and asked the same question. They were not too sure; and so was born the programme: Mentorship with Professor Mato on January 20th, 2025, with an initial membership of nine (Fig 7)



Fig 7: A mentorship session in progress

Two pending studies were immediately concluded within the first two months and manuscripts sent out for peer review and possible publication; both were published in March and May 2025 respectively:

(Mato CN, Hart F, Harry A, Johnson UU. Perception of doctors in surgical specialties about fasting guidelines for day case surgeries in a tertiary hospital in south-south Nigeria. J Adv Med Res (formerly British J of Medicine and Medical Research) 2025;37 (4): 73-80;

Uwandu CB, Hart F, Mato CN. Audit of anesthetic chart documentation in private hospitals in Port Harcourt, Rivers State, Nigeria. Int J Sc Res Arch 2025; 15 (01): 098 – 104)

Three pending studies are at various stages of completion, but all discussed by the various teams in the group, working together, sharing responsibilities and forging a partnership aimed at solidifying a team spirit that is supporting and encouraging. It is my hope that what these have received, they would pass on to younger colleagues and students coming up.

On Friday, May 23rd, 2025, I participated in the Anaesthesia End-of-posting test for final year MBBS students; I met two young students – one, a cousin's daughter (Belema Worika) whom I had interacted with a few years earlier and encouraged to not give; the other was a young man, (Smart Oparaugo), a 1st class graduate of Anatomy of this University whom I had met when I was Provost and had supported to get into the MBBS Programme through Direct entry.



Fig 8: Smart & Belema – the Faces of Tomorrow

They represent the future, they are the faces of tomorrow; and need every support and encouragement to enable them navigate through the rapidly changing times of today with confidence.

6.0 Conclusion

In 1992 I joined the services of the University of Port Harcourt and the University of Port Harcourt Teaching Hospital, almost fresh from Residency training at the University College Hospital, Ibadan. Timid, hesitant, struggling to understand the University system in which I found myself; I had no aspirations to head anything, content to work from behind the scene, but life had other plans and I was pulled out from behind the scene into the limelight, the pull was not premeditated, not planned; I was just minding my business, for who would have thought that such a girl, from a sub-middle class background, from a minority community among a minority tribe, from a minority part of the nation trained in a minority specialty could come this far? Life took me on a most improbable journey from behind the scene, and today, as I say good bye and bow out, I acknowledge that my academic life has truly shown that -

All the world's a stage,

And all the men and women merely players;

They have their exits and their entrances; ***And one woman in her time has indeed played many parts...***

William Shakespeare As You Like it Act 2, Scene 7;146 – 150
(adapted)

Thank you

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CITATION ON



PROFESSOR CHRISTIE NWIDUM MATO

*MBBS; PgDA; FMCA; FWACS; FICS;
Dip HSM (Israel); MNIM*

Mr. Vice Chancellor, Sir, distinguished ladies and gentlemen I feel highly honoured and privileged to be standing before you today, to read the Citation on this distinguished Valedictory lecturer.

Professor Christie Mato was born on the 17th of October 1955 at the St. Thomas Hospital, Enugu, to Chief Israel Lomma Mato, a Local Government Administrator of blessed memory and Mrs. Florence Kpigibeke Mato both of Bua-Yeghe, Ogoni. Her name, Nwidum, means ‘Child of Life’.

Christie, as she is fondly called, started her academic life at the St. Bartholomew's Primary School, Asata, Enugu at an early age. In 1964, the family moved to Calabar where Christie completed her primary school education at the Holy Trinity Primary School, Calabar, passing the First School Leaving Certificate examination with Distinction to the joy and excitement of the Headmaster Mr. Ansa; Christie was the youngest pupil in the history of the School at that time to have achieved such a feat. She went on to pass the interview and gained admission into the prestigious Queen's School, Enugu, the premiere girls' secondary school in the then Eastern Region.

School for Christie was interrupted by the Nigeria/Biafra war, and with her father in detention camp, it seemed as though young Christie's school days were over. However, her cousin, Ernest Mato of blessed memory stepped in and took her to Calabar, to start secondary school afresh, and she was admitted into Holy Child Secondary School, Marian Hill, Calabar. In 1969, they moved back home, and Christie completed her secondary education at the Holy Rosary Secondary School, Port Harcourt with a Grade 1 in 1972.

Higher School saw her as a pioneer student at the Federal Government College Port Harcourt, and following A-Levels at the then College of Science and Technology, Christie got admitted into the University of Ibadan to study Medicine and graduated in 1980. House job at the General Hospital, Port Harcourt was followed by National Youth Service at the General Hospital, Iquita, Oron, in 1982.

Dr. Mato commenced Residency training in Anaesthesia at the University College Hospital, Ibadan in the 1986/87 session, and obtained a Postgraduate Diploma from the University of

Ibadan, and the Fellowship of the Medical College of Anaesthetists (FMCA) of the National Postgraduate Medical College of Nigeria in 1991; in 1996, she was awarded by election the Fellowship of the West African College of Surgeons in Anaesthesia, and the Fellowship of the International College of Surgeons in 2004.

Finding herself underutilized at the Health Centre of the then University of Science and Technology, she moved to the University of Port Harcourt and was appointed Lecturer 1 in the Department of Anaesthesiology in 1992, and Consultant Anaesthesiologist in the University of Port Harcourt Teaching Hospital (UPTH).

From 2001 – 2006 under her leadership, the Department of Anaesthesiology was completely transformed, obtaining partial accreditation for residency training for the first time, and collaborating with the UCH, Ibadan for postings in Intensive Care, Cardio-thoracic and Neuro-Anaesthesia to help prepare resident doctors in the Department for Fellowship examinations.

As Acting Head of Department, she introduced Medical students to Preoperative ward rounds and call duty in Anaesthesia, attaching them to Resident doctors to learn first-hand how the Anaesthetist worked. She exhibited leadership by example and instilled discipline in all staff. Her hard work and personal sacrifice of time and resources resulted in an era of anaesthesia resident doctors from Port Harcourt being known for passing their examinations at the first attempt. The image of the Department was at an all-time high; Anaesthesiology as a Specialty became so attractive that doctors wanted to specialize in Anaesthesia (before this time,

doctors came to ‘mark time’ in Anaesthesia, while awaiting openings in other Departments).

Dr. Mato has always been interested in Critical Care, and in 2003, as a beneficiary of the MacArthur Foundation Teacher Upgrade Programme she was accepted at the Chris Hani Baragwanath Hospital in South Africa where she worked in the Hospital’s Intensive Care Unit to gain experience in the care of the critically ill.

She brought that experience to bear in the Intensive Care Unit of the University of Port Harcourt Teaching Hospital, especially when the Hospital moved from the temporary site with a Level 1 ICU to the permanent site with a Level 2 ICU, introducing ward rounds, teaching sessions and tutorials in the ICU.

During her sabbatical year with the Rivers State Government in 2009 Dr Mato was given the mandate to introduce postgraduate training in Anaesthesia at the Braithwaite Memorial Specialist Hospital (BMSH), now Rivers State University Teaching Hospital. This was successfully accomplished and an accreditation team from the Faculty of Anaesthesia, West African College of Surgeons visited the BMSH in December 2009, and later approved the Hospital for Postgraduate training to Diploma level in February 2010.

On her return from Sabbatical in 2010, Dr Mato was by majority vote by the body of Consultants of the UPTH elected and later appointed the Chairman, Medical Advisory Committee (CMAC) of the Hospital, becoming the first female to be so appointed in the Hospital. After serving the first term of two (2) years, Dr Mato, now Professor Mato was unanimously voted unopposed to return and serve for another

two years, becoming the first Professor to hold that position in the Hospital.

Her Inaugural Lecture titled ***The Anaesthetist: Working behind the scene, ever-present, ever-watchful***, delivered on the 17th of July, 2014 at the Ebitimi Banigo Hall received official commendation from the Quality Assurance/Quality Control Unit of the University.

By majority vote again in a keenly contested election on the 16th of March, 2015, Professor Mato was elected and then appointed Provost, College of Health Sciences, University of Port Harcourt, making history as the first woman to serve as Provost of the College for a four-year tenure (2015 – 2019).

In 2020/2021, Professor Mato proceeded on sabbatical leave to the young PAMO University of Medical Sciences, Port Harcourt, and as Pioneer Dean and Coordinator of the MBBS Programme worked with other eminent scholars to lay the foundation for the MBBS clinical programme of that University. She later returned (on leave of absence for two years from the University of Port Harcourt) on December 1, 2022 to serve as Pioneer Chief Medical Director of the PAMO Teaching Hospital, Deputy Vice-Chancellor, PAMO University of Medical Sciences and Acting Vice-Chancellor, PAMO University of Medical Sciences.

Professor Mato returned from leave of absence on November 29th, 2024, seamlessly re-integrating into work in the University of Port Harcourt and University of Port Harcourt Teaching Hospital and remains a teacher, mentor and role model.

In May, 2025 she was appointed the Chairman of the 14-member Technical Planning Committee of the Ogoni Specialist Hospital, tasked with the responsibility of providing the framework for the operationalization and sustainability of the Hospital.

Mr. Vice-Chancellor, Sir, Professor Mato has touched many lives seated here today, and has been honoured with several awards including the National Union of Bua-Yeghe Students Award of Excellence for outstanding academic Achievement as the 1st Professor in Bua-Yeghe and 1st female Professor in the Gokana Kingdom, Nigerian Medical Association (NMA) Roll of Honour Award and the Nigerian Society of Anaesthetists & World Federation of Societies of Anaesthesiologists Award for Distinguished service, award of excellence by the Gokana Progressive Union, and an award of excellence as the most punctual lecturer by the PAMO University of Medical Sciences pioneer MBBS graduates.

She is a Part II examiner in Anaesthesia with the National Postgraduate Medical College of Nigeria and the West African College of Surgeons and a Professorial rank Assessor to 8 Universities in Nigeria.

In September 2024, as Chairman, Local Organizing Committee of the 18th Annual Scientific Conference & All Fellows Congress, (ASCAF) she and her Team successfully hosted in Port Harcourt, a combined ASCAF (Treasure Base 2024) and Convocation Ceremony of the National Postgraduate Medical College, adjudged to be one of the best in the history of the College.

Mr. Vice-Chancellor, Sir, distinguished ladies and gentlemen, Professor Mato has served the University, Rivers State, Nigeria and indeed humanity with humility and integrity. Today, it is my honour and privilege to present to you - the 1st and only female Chairman, Medical Advisory Committee (CMAC) of UPTH to date; the 1st Professor of Anaesthesiology in University of Port Harcourt; the 1st female Professor in the Gokana Kingdom; the 1st female Professor of Medicine in Ogoniland; the 1st Professor of Anaesthesiology in Rivers State; the 1st female Provost of the College of Health Sciences, pioneer Chief Medical Director, PAMO Teaching Hospital, and immediate past Acting Vice-Chancellor, PAMO University of Medical Sciences. Professor Mato will now deliver her Valedictory lecture.

Thank you

Professor Ngozi O Ekeke

Provost, CHS